



United Way  
of New York State

# ISSUE BRIEF

## SUCCESS BY 6/EARLY CHILDHOOD

### OUR REQUEST

- Reconfirm New York State's commitment to Pre-k by restoring the \$38 million reduction in pre-k for FY 2009/10 and by modifying budget language to allow school districts the flexibility to use their pre-k allocation to support full day services, planning, transportation and capital improvements
- Restore funding for Home Visitation programs to their pre-deficit reduction levels at:
  - \$25 million for Healthy Families New York
  - \$5 million for the Nurse-Family Partnership program
  - Maintenance of Community Optional Preventive Services for home visitation
- Restore \$30 million of the state's share to the Child Care and Development Block Grant (CCDBG) for Child Care Subsidies
- Continue eligibility for Child Health Plus at 400% of the federal poverty level and maintain cover for the range of health care services needs (medical, dental, mental, etc.).

### CASE STATEMENT

#### Background

On January 7, 2009, in his Annual Message to the Legislature, Governor Paterson correctly noted that "*The road to economic competitiveness runs right through our schools.*" In fact, the road begins long before New York's children ever reach the schoolhouse door.

That tough choices lie ahead is not questioned. However, for too long it has been presumed that if we can't keep our promise to our youngest children today, we have other opportunities as they grow up.

That simply isn't true.

Goals of economic self sufficiency are supported through quality care that enables parents to work; through quality early education that increases the likelihood of school success and life success; and through helping the next generation break the cycle of poverty by giving young children and better a healthier start.

#### The status of young children in New York State

New York State has 2,581,581 families with 4,395,191 children ages 17 and younger; this includes the 771,114 families with 1,375,681 children who are younger than 6. Our youngest children are particularly vulnerable with 34% of those younger than six being exposed to 1 or 2 risk factors and another 11% exposed to 3 or more risk



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factors.<sup>1</sup> Consider that:

- Only 11% of New York's at risk population are currently served by home visitation programs.
- New York's child poverty rate of 20% has remained relatively unchanged over the past several years. This rate holds for children younger than six years as well with 281,00 poor very young children. Poor is defined as incomes below 100% of the federal poverty level which is \$22,050 for a family of 4.
- Poor children are even more likely to enter school 1–2 years behind their peers in language and other skills needed to succeed in school. Many may not catch up.
- More than 46,000 subsidized child care slots have been lost since 2003/04.
- Annually 10,000 children are found to have dangerously elevated blood lead levels.

Other signs that our children are at risk are evident in the 38% that do not have an employed parent, the 9% of children without health insurance and the 8.1% low birth weight rate.<sup>2</sup>

Universal pre-kindergarten, home visitation, quality child care and quality and preventive health care can all help to mitigate against some of these risk factors and improve the well-being of our youngest New Yorkers.

#### Universal Pre-kindergarten

***Restore the \$38 million that was cut from the pre-k budget in state fiscal year 2009/10 and amend the budget language to allow school districts the flexibility that they need to meet the needs of students in their communities; i.e. full day services, transportation and capital improvements.*** Pre-k services are currently provided in 450 school districts out of 677 districts statewide; yet still services just 42% of four year olds. Reducing the state's commitment to pre-k leaves one-third of the districts across NYS without the means to provide this program and precludes expansion in participating districts, while leaving fundamental barriers to quality improvement.

#### Home Visitation

**Restore funding to Healthy Families NY and the Nurse Family Partnership Program and maintain funding for COPS, which also supports home visitation efforts in NYS.** These programs are model home visitation programs that significantly improve pregnancy outcomes, child health and development and family economic self-sufficiency thereby accruing significant savings to the state at the same time. Reducing our commitment to them will have a serious and detrimental effect on the most vulnerable children and families they serve. Applying the findings of extensive research (more than 30 years) on home visitation programs on families served in NYS, it is clear that many children have been spared from child abuse and neglect, as well as the

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<sup>1</sup> From the National Center for Children in Poverty at Columbia University's Mailman School of Public Health; risk factors include single parent, living in poverty, parents who do not speak English well, parents with less than a high school education and parents with no paid employment.

<sup>2</sup> Data included under status were obtained from the National Center for Children in Poverty, Columbia University, Mailman School of Public Health and the 2007 Kids Well-being Indicators Clearinghouse, NYS Council on Children & Families

criminal justice system. (NOTE: The average annual cost to incarcerate one youth is \$43,000.)

### Child Care Subsidies

#### **Restore \$30 million in lost child care funding to increase the number of available subsidy slots for children in low-income working families.**

Quality child care is even better than a triple word score in Scrabble.

1. Children receive safe and quality care that helps them develop the social and cognitive skills they need to start kindergarten as able learners and succeed in school.
2. Schools then enroll 5 and 6 year olds who are more likely to demonstrate skill proficiency thereby reducing future costs for remedial education and improving school-wide achievement.
3. Parents are able to maintain productive employment with the knowledge that their children are in safe and nurturing environments.
4. Child care workers themselves comprise a significant workforce in many local communities; tax payers who spend their wages on Main Street.

Yet over time, reduced funding and an increase in market rate (a necessary increase) has reduced the number of children accessing subsidized care by 46,000 since 2003-04.

The increased federal support for young children, through the American Recovery and Reinvestment Act (ARRA) of 2009 has been used to make up for the state's declining commitment to the CCDBG rather than to create new child care slots.

### Child Health

**Maintain eligibility for CHIP at 400% of the federal poverty level** to insure that all children have access to adequate health care throughout their formative years and **maintain Medicaid and CHIP coverage for** dental, mental health, vision and other needed health services.

New York State has made important strides in providing for the health care needs of low income families and children. Maintaining the commitment to CHIP and Medicaid is but one part of a system designed to improve the odds for young children. Prenatal care and outreach, along with nutrition expansion and outreach and the provision of food assistance are the cornerstones of giving all children a healthy start to life.

*Approved – December 1, 2009*