Health, Access and Affordability in Child Care
What is the end game?

Elements of Healthy Child Care

- Safety and Environment
- Nutrition
- Breastfeeding
- Active Play/Screen Time
- Inclusion—Disabilities and Special Needs and Behavioral Health

Equity Rooted Change Levers

- Policy Development and Analysis
- Advocacy
- Research and Community Informed Practices
- Family and Community Engagement
- Workforce Capacity Building Activities

Affordable Child Care

Accessible Child Care
Quality Child Care, Healthy Communities

CORE DETERMINANTS OF HEALTH

- health services
- employment/working conditions
- education and literacy
- physical environments
- social support networks
- personal health practices and coping skills
- social environments
- healthy child development
- biology and genetic endowment
- culture
- financial and social status
- gender

**Minnesota**

- Bigger issue is shortage in *licensed* child care
- Child Care Assistance Program (CCAP) funding cuts effecting affordability of child care and limiting market for child care providers
- Pre-k in public schools vs pre-k in any QRIS approved site through scholarship
- In areas where schools are available, universal pre-k can limit market for child care providers if parents given a choice

**Maryland**

- Increasing the Child Care Subsidy Program (CCSP) budget to cover the needs of those who are eligible for the program
- Increasing budget for Child Care Resource Center to help with CCDBG implementation to help support providers
- Universal Pre-K
- Reducing/Eliminating expulsion Pre-K-2
CCDBG, Affordability, Access and Quality

CHILD CARE DEVELOPMENT BLOCK GRANT (CCDBG)

The Act that authorizes the CCDF Fund

CHILD CARE DEVELOPMENT FUND (CCDF)

The Child Care and Development Fund: provides funds to support child care subsidies AND to improve child care quality; CCDF regulations dictate the rules that must be complied with in order to receive funds

Only 1 in 10 children who are eligible for federal child care subsidies receive them.

- 1.5 million children obtained free or low-cost child care through the Child Care Development Fund.
- 12.7 million children met federal eligibility requirements but did not receive funding.

Child Trends

Per-month calculation based on a U.S. Government Accountability Office analysis of 2011-12 data.
Child Care Health Standards

• Nearly 15 million children of working parents are in some type of child care. On average, they spend 36 hours a week in care.

• In the reports *We Can Do Better 2013* (Centers) and *Leaving Children to Chance* (2012), revealed states have minimal promotion of health activities.

• At time of reports, most states had requirements for basic health and safety, but only 16 states met each of the 10 health and 10 safety practices recommended by pediatric experts.

• Current Online Database shows we’re not out of the woods yet...
Quality Improvement Activity Funding

FY 2016- 7%
FY 2017- 7%
FY 2018- 8%
FY 2019- 8%
FY 2020- 9%
FY 2021- 9%

Funds for Infant/ Toddler Spending:
At least 3% annually thru FY 2021
What can states do? CCDF and Healthy, Active Living

Financial incentives to support quality, health and safety standards and monitoring and workforce development

Training required for health and safety for all providers: an opportunity to require training around health, nutrition, physical activity and obesity prevention in preservice trainings

Requirements around Early Learning Guidelines: an opportunity to include a focus on developmentally appropriate practices that incorporate healthy, active living activities

Incorporation of healthy, active living into QRIS systems: linking activities to quality ratings rewards centers that implement best practices, increases incorporation of these activities

Consumer Education: websites will have information on quality, which may include on health, nutrition and physical activity standards in QRIS; information on best practices is more accessible to families
What we’re doing? Building Demand

Healthy Child Care, Healthy Communities Project

– Alabama: used our recommended state plan language to make public comment recommendations on their initial state plan
– Messaging focus groups and toolkits—getting providers accepting of change
– Staff health and wellness and Colorado
– GIS Mapping—using an equity lens to examine current use of existing resources to drive projects, bring stakeholders together to solve problems, at times—cross-sector solutions
  • Alabama and Farm to ECE
  • New York and Breastfeeding Friendly Communities
  • Indiana: access to safe spaces to play in community revitalization neighborhood grantees
What is the end game?

Affordable Child Care

Accessible Child Care

Elements of Healthy Child Care
- Safety and Environment
- Nutrition
- Breastfeeding
- Active Play/Screen Time
- Inclusion—Disabilities and Special Needs and Behavioral Health

Equity Rooted Change Levers
- Policy Development and Analysis
- Advocacy
- Research and Community Informed Practices
- Family and Community Engagement
- Workforce Capacity Building Activities
Contact Information

Krista Scott
Krista.Scott@usa.childcareaware.org
703-341-4157

usa.childcareaware.org/health-nutrition/