The BUILD Initiative (BUILD) & the Child and Family Policy Center (CFPC) launched the Learning Collaborative on Health Equity and Young Children.

- Funding from the Robert Wood Johnson Foundation
• When families are pushed into poverty and social exclusion, the results are often devastating for children.

  – Difficult to provide adequate care for their children
  – Many deprived of: healthy diet, access to quality health care or learning opportunities.
  – In danger of facing violence and maltreatment.
  – Risk being separated from their families

Protecting the Most Marginalized children and Families: Post-2015 Think Piece on Social Protection. SOS Children’s Villages.
Children of color and their families are more likely than white children and their families to experience social and structural discrimination, exclusion, marginalization and poverty.

Race influences the social networks available to individuals & networks have a major effect on opportunities.

Detrimental to healthy child development and learning

Fifty State Chart Book, CFPC
Race for Results, Annie E. Casey
The **Learning Collaborative** has three primary goals:

1. Raise **understanding** and **awareness**
2. Advance **knowledge**
3. Develop and **support** leaders

The **Learning Collaborative** facilitates learning to:

- Integrate the assets of the health and early learning systems
- Promote equitable outcomes for young children
- Produce policy and practice change
The Learning Collaborative strategies for achieving these goals include:

- **Information exchange with peers**
  - cross-state webinars
  - learning tables
  - online discussions &
  - in-person meetings

- **Targeted state/community support**
  - move a data point

- **Create and support a group of health champions and innovators in a CoIN.**
Making the Link Between Early Childhood Systems Building and Poverty Reduction
1) Chronic stress can cause substantial changes in children’s brains and therefore their behavior, in ways that impede later success in education, work, and the creation of stable families. ... Low stress, high predictability, and strong, stable relationships with caring adults all help children become measurably better at self-regulating, delaying gratification, and controlling their impulses. ... If we want adult citizens who can exercise responsibility, we should do as much as we can to improve the security of childhood, especially among the poor.

2) Children who experience poverty, particularly during early life or for an extended period, are at risk of a host of adverse health and developmental outcomes through their life. Child poverty also influences genomic function and brain development by exposure to toxic stress, a condition characterized by “excessive or prolonged activation of the physiologic stress response systems in the absence of the buffering protection afforded by stable, responsive relationships.” Children living in poverty are at increased risk of difficulties with self-regulation and executive function, such as inattention, impulsivity, defiance, and poor peer relationships. Poverty can make parenting difficult.

Poverty, Health Equity and Young Children

1. Poverty and Inequality Defined
2. Poverty and Young Children
3. Welfare Reform and Poverty
4. The Role of Early Childhood and Child Health Policy in Ending Poverty and Inequality
1. Poverty and Inequality Defined

Poverty is a multi-faceted concept, which includes social, economic, and political elements. ... Absolute poverty or destitution refers to the deprivation of basic human needs, which commonly includes food, water, sanitation, clothing, shelter and health care. **Relative poverty is defined contextually as economic inequality in the location or society in which people live.** – World Health Organization

In a wealthy and mature democracy, poverty is largely about social exclusion and the lack of belonging, not material inequality ... One is poor if one does not have the things needed to be a respected member of society. – John Powell

Official poverty level: $24,250 or less for a family of four

**WARNING: THE SURGEON GENERAL HAS DETERMINED THAT POVERTY IS HAZARDOUS TO CHILD HEALTH.**
2. Poverty and Young Children: Prevalent and Pernicious

• Young children age group most likely to live in poverty

• Young child poverty concentrated by:
  • Race
  • Place
  • Single parenting

• Poverty strongly associated with a compromised start in life and future healthy development and success – poverty most damaging to young children’s health
Young Children Age Group Most Likely to Live in Poverty

Distribution of the U.S. population by household income and age 2013

- 0-5 Years: 25.2% <100%, 23.1% 100-199%, 16.3% 200-299%, 11.6% 300-399%, 23.9% 400+%%
- 6-17 Years: 21.0% <100%, 22.0% 100-199%, 17.0% 200-299%, 12.8% 300-399%, 27.2% 400+%%
- 18-64 Years: 14.8% <100%, 17.2% 100-199%, 16.1% 200-299%, 13.5% 300-399%, 38.4% 400+%%
- 65+ Years: 9.4% <100%, 22.0% 100-199%, 19.1% 200-299%, 14.3% 300-399%, 35.1% 400+%%

Source: U.S. Census Bureau, Public Use Microdata Sample, 2011-2013
Young Children of Color by far Most Economically Disadvantaged

- **White, NH**
  - <100% of Poverty: 16.3%
  - 100-199% of Poverty: 19.7%
  - 200-299% of Poverty: 17.4%
  - 300-399% of Poverty: 14.6%
  - 400%+ of Poverty: 32.1%

- **Hispanic**
  - <100% of Poverty: 36.1%
  - 100-199% of Poverty: 30.2%
  - 200-299% of Poverty: 15.5%
  - 300-399% of Poverty: 7.7%
  - 400%+ of Poverty: 10.5%

- **African American**
  - <100% of Poverty: 43.1%
  - 100-199% of Poverty: 25.5%
  - 200-299% of Poverty: 13.4%
  - 300-399% of Poverty: 7.2%
  - 400%+ of Poverty: 10.8%

- **All**
  - <100% of Poverty: 25.4%
  - 100-199% of Poverty: 23.1%
  - 200-299% of Poverty: 16.1%
  - 300-399% of Poverty: 11.6%
  - 400%+ of Poverty: 23.8%

Source: United States Census, Public Use Microdata Sample 2012
Poorest Neighborhoods: Wealthy in Young Children

Source: United States Census Bureau, Population Division 2013

Impact: Poorest neighborhoods need half again as many child and family-friendly gathering points, activities and supports.
Poorest Neighborhoods: Highly Segregated

<table>
<thead>
<tr>
<th>Poverty Rate (%)</th>
<th>White non-Hispanic</th>
<th>African-American</th>
<th>Other</th>
<th>Hispanic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Over 50</td>
<td>18.7</td>
<td>34.5</td>
<td>7.6</td>
<td>39.2</td>
</tr>
<tr>
<td>40 to 50</td>
<td>28.4</td>
<td>22</td>
<td>8.3</td>
<td>41.3</td>
</tr>
<tr>
<td>30 to 40</td>
<td>38.3</td>
<td>17.6</td>
<td>8.8</td>
<td>35.3</td>
</tr>
<tr>
<td>20 to 30</td>
<td>50.1</td>
<td>12.9</td>
<td>9</td>
<td>28</td>
</tr>
<tr>
<td>10 to 20</td>
<td>58.8</td>
<td>9.6</td>
<td>10.4</td>
<td>21.2</td>
</tr>
<tr>
<td>0 to 10</td>
<td>66.5</td>
<td>6.2</td>
<td>12.9</td>
<td>14.4</td>
</tr>
</tbody>
</table>

Implication: Strategies need to address issues of inclusion and combat discrimination and marginalization, as well as being culturally and linguistically responsive.

Note: While 8.4 percent of white, non-Hispanic children live in census tracts where the poverty rate is above 40 percent, 38.2 percent of African Americans, 31.9 percent of Native Americans, and 28.9 percent of Hispanics do.
Single Parenting and Poverty: Beyond a Stereotype

- Poverty rates for single-parent families with young children are much greater than married-couple families
  - Married-couple households with only 0-4 children: 7.0%
  - Male-only households with only 0-4 children: 25.2%
  - Female-only households with only 0-4 children: 47.0%
  - All households with only 0-4 children: 18.6%

- Minority of young children live in single-parent families, but majority of children in poverty live in single-parent families
  - Proportion of households with children 0-4 only that are married-couple households: 65.6%
  - Proportion of poverty households with children 0-4 only that are married couple households: 24.8% (61.6% female-only households)

- Single parenting highly associated with parental education (and parental age)

Data from 2010-2014 American Community Survey, U.S. Census
3. Welfare Reform and Child Poverty

EXTRA! EXTRA! EXTRA! War on Poverty: Seniors Win, Kids Lose
A History of Welfare Reform in America

Public Welfare Policy

- **1900-1935** – Child removal
  Orphanages and orphan trains
- **1935-1996** – AFDC
  Income supports for “dependent children”
- **1996-Present** – TANF – Temporary support to needy families as bridge to employment

Poverty Reduction Initiatives

- **1964-Present** – War on Poverty/Head Start and Community Action
- **1975-Present** – EITC and Child Tax Credit – CCDBG, SNAP/WIC, Medicaid/CHIP
- **2016-Future** ??
Welfare Policy and Traditional Support to Households with Young Children

- **1980-1996**
  Erosion of value of AFDC benefits due to inflation, some growth in single parents with young children receiving AFDC benefits

- **1996-2015**
  Dramatic reduction in TANF caseloads (15+ percent to 4 percent of young children receiving benefits)

- **Today**
  EITC/Child Tax Credit, SNAP/WIC, child care assistance, and Medicaid/CHIP primary supports to young children in poor/low-income households
Other Evidence and Scholarship

Robert Putnam
*Our Kids: The American Dream in Crisis*

Charles Murray
*Coming Apart: The State of White America, 1960-2010*

Changes to American families and society threaten the future as we have valued it.

- Segregation (by place and association) of upper- and low-class/income families and their children.
- Idle and disconnected (sometimes incarcerated) young men.
- Single parenting by less-educated women.
Sound Judgment and Common Sense

George, think about it. If you don’t know how long you’re going to keep your house, and you don’t know how long you’re going to keep your job, you just have less energy to invest in the kids.

- Laura Bush (explaining to her husband and Robert Putnam the dilemma faced by many single moms in being both bread-winner and wage earner)

If children of color don’t have the opportunity to grow up to be part of the middle class, there won’t be one.

- Angela Glover Blackwell

If we’re going to end poverty in a generation, the parents of children born into poverty today must believe that their kids, with their help, can grow up to achieve their dreams.

- Charlie Bruner
Strengthen families in ways that will prepare children for success

The government isn’t an effective parent, and it shouldn’t dictate to parents how to raise a child. But government can play a positive role by providing guidance, almost always through a third party receiving government funding, on the practices and skills that fit best with the high aspirations parents hold for their children.
Community Health Council of the American Academy of Pediatrics Report on Poverty and Child Health in the United States

Support integrated models of care in the medical home that promote effective parenting and school readiness.

Although every family wants to provide the best resources and care to their children, economic barriers can stand in the way. An enhanced medical home providing integrated care for families in poverty is informed by the understanding that emotional care of the family ... is within the scope of practice for community pediatricians and that the effects of toxic stress on children can be ameliorated by supportive, secure relational health during early childhood.
Too often in the early childhood and health worlds, poverty is the end of a conversation – as in, the real issue is poverty and if we cannot address that, low-income kids always will be at a disadvantage.

**We have the opportunity to reframe this question** – How can we ensure that families in poverty have the information, resilience and supports they need to equip their youngest children for success (beyond what they may be able to achieve themselves)?
Toward Purple Solutions to Young Child Poverty

BLUE Proposals
Minimum wage increase, paid family leave, affordable higher education, universal preschool

RED Proposals
Devolution for community ownership and solutions, faith-based/fatherhood/personal responsibility initiatives

PURPLE Proposals
TBD (government, community, early childhood, and health role in strengthening families)
Larry Aber, Willner Family Professor of Psychology and Public Policy at the Steinhardt School of Culture and member of AEI/Brookings Working Group on Poverty and Opportunity.

Maxine Hayes, clinical professor of pediatrics at the University of Washington School of Medicine and recipient of the APHA Helen Rodriguez-Trias Award for Social Justice.
Additional Resources

- Top 10 Things We Know about Young Children and Health Equity... and Three Things We Need to Do with What We Know
- Fifty State Chart Book: Dimensions of Diversity and the Young Child Population
- Where Place Matters Most (and Village Building and School Readiness: Closing Opportunity Gaps in a Diverse Society)
- Healthy Child Storybook of Exemplary Programs and Practices
CFPC and BUILD want to be partners with others in this work and bring a learning community approach to further development and diffusion.

For more information:
www.buildinitiative.org
www.cfpciowa.org