



Early Childhood Poverty, Health and Education

A Summary of the Coastal-Georgetown AAUW January 2010 Community Forum

Prepared by the Issue/Action Group of the Coastal-Georgetown AAUW

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EARLY CHILDHOOD POVERTY, HEALTH AND EDUCATION

A Summary of the Coastal-Georgetown AAUW's January 2010 Forum

ABSTRACT

The Coastal-Georgetown American Association of University Women (C-G AAUW) along with other civic-minded organizations sponsored a community forum on early childhood poverty, health and education on January 21, 2010. State Representative Terry Schooley from the 29th District, chair of the Child Poverty Task Force and director of KIDS COUNT DELAWARE was the featured speaker. Additional panel members were Lisa Crim, Director of Early Care and Education at Children and Families First, Martha Quillen, Senior Social Worker from the Division of State Service Centers and Dr. Jo Ann Paulson, retired World Bank economist.

The purpose of the forum was to: increase sensitivity to local realities for many of our youngest citizens caught in poverty, particularly those living in Sussex County, Delaware; identify specific challenges that need attention; and set priorities and initiate actions related to early childhood poverty, health and education. In Delaware about 37 percent of children under the age of six live in or near poverty. (17 percent of children with family incomes less than 100 percent of the Federal poverty level; another 20 percent with family incomes 100 to 200 percent of the poverty level.) Over the last 15 years, the child poverty rate in Sussex and Kent counties has been consistently higher than for either New Castle County or Delaware as a whole.

Children born to single mothers in their teens are much more likely to live in poverty than those born into two parent households or to older women. According to the most recent Sussex County data over one-half (52.4 percent) of live births are to single mothers. This rate is higher than Kent and New Castle Counties and Delaware as a whole. Only the city of Wilmington has a higher percentage of single women giving birth. Accesses to both adequate health care and quality early education are influenced by income levels. Beginning with the lack of or late prenatal care, children that are born into poverty are at a much greater disadvantage when it comes to obtaining affordable health care. Since 2000, the percent of Delaware children not covered by health insurance has increased to slightly over 10 percent.

Cognitive development studies have shown that while a child's cognitive development is correlated with income levels, the chances of success in school for children living in low-income families increases with early learning intervention. With approximately 8,500 children in Sussex under age six who live in households where all parents are working, the need for some type of care is crucial. Over the last decade there has been a decrease in smaller child care facilities in homes with an accompanying increase in larger child care centers that offer more childcare spaces. Data in this report has shown that many of our youngest citizens live in economic situations that do not bode well for them in terms of obtaining adequate health care and quality early educational opportunities. The fact that approximately 37 percent of children under the age of six are living in poverty or near poverty in Delaware warrants action at all levels of government as well as by concerned community organizations to address the issues. As Governor Jack Markell stated in the preface to KIDS COUNT in DELAWARE 2009, "We pin our hopes for a better society and a stronger economy on our youngest citizens, so it is our job to ensure that each child has the resources they need to grow to their full potential."

INTRODUCTION

Nationwide many parents are struggling to meet the basic necessities for their families – necessities like housing, food, quality daycare and healthcare. According to Voices for American’s Children, “Today one in five American children live in poverty and the numbers are growing.”¹ Data show that the long-term consequences of the economic downturn coupled with high unemployment rates disproportionately affect children, specifically in areas of obtaining adequate health care and quality childcare; both of which impact their early educational development.

Delaware’s children have by no means escaped the impact of our current economic crises as evidenced in the number of children caught in poverty. Recent studies show that approximately 27,500 Delaware children (13 percent) age 18 and younger live in families that are below the Federal Poverty Level.² This statistic varies by county and by family demographics.

On January 21, 2010, the Coastal-Georgetown American Association of University Women (C-G AAUW) sponsored a community forum on early childhood poverty, health and education. This forum was co-sponsored by numerous other civic-minded organizations.³ (For information about C-G AAUW see Appendix I).

The purpose of the forum was to:

- Increase sensitivity to local realities for many of our youngest citizens caught in poverty, particularly those living in Sussex County, Delaware;
- Identify specific challenges that need attention; and
- Set priorities and initiate actions related to early childhood poverty, health and education.

The forum’s featured speaker was State Representative Terry Schooley from the 29th District, chair of the Child Poverty Task Force and director of KIDS COUNT DELAWARE. Additional panel members were Lisa Crim, Director of Early Care and Education at Children and Families First and Martha Quillen, Senior Social Worker from the Division of State Service Centers. Dr. Jo Ann Paulson, retired World Bank economist and AAUW member prepared and presented Sussex County Statistics.

Initially, the forum was to focus on the lack of affordable high quality early childhood education programs and the low enrollment of children in the State Children’s Health Insurance Program (SCHIP), known in Delaware as the Delaware Healthy Children’s Program (DHCP). However, it soon became clear that poverty was an overriding factor in many of our youngest citizens’ lives and that this poverty contributed directly to both the availability and type of early education experiences they had and the type of health problems they experienced.

¹ Child Poverty, Voices for American’s Children. www.voices.org.

² 2009 Federal Poverty Level is defined as a family of three with an annual income of \$18,310.

³ The forum was co-sponsored by the State AAUW, League of Women Voters, Kiwanis, Rehoboth Beach Lions Club, the Coalition on Tolerance and Justice, the Coalition for West Rehoboth, the Lewes-Rehoboth Association of Churches, the Epworth United Methodist Church, the Bethany Beach Disciples of Christ, the Seaside Jewish Community and the Unitarian Universalists of Southern Delaware

PURPOSE OF REPORT

The purpose of this report is twofold. First, it provides a synopsis of the information and input from the January Community Forum and second, it provides a list of actionable items that organizations can focus on over the next three to five years. Because of the current Delaware state budget difficulties, there is limited funding, if any, that will be available this year for many of the programs that would positively impact childhood poverty, health and education.

This report is divided into four sections: **Section I: Childhood Poverty** provides statistics about Delaware’s children caught in poverty and more specifically, children living in poverty in Sussex County. **Section II: Children’s Health Care** focuses on some of the health care needs for children living below the poverty level in Delaware. **Section III: Early Childhood Education** focuses on the importance of early childcare and education in children’s development. **Section IV: Next Steps** provides a list important goals and ideas that need to be brought to the attention of our elected officials in order to assure our youngest citizens have a chance to reach their potential. The majority of the poverty statistics in this report are from Representative Schooley’s speech and from the 2009 KIDS COUNT Fact Book as well as the U.S. Census’s American Community Survey.

As Representative Schooley said, “Children are 25 percent of Delaware’s population but 100 percent of our future.”

SECTION I: EARLY CHILDHOOD POVERTY

Representative Schooley presented data that showed about 17 percent of Delaware children under the age of six were living in poverty. However, as she pointed out this poverty threshold was formulated more than 20 years ago and does not reflect today’s economic realities. Thus if the 17 percent of children living below the Federal poverty level is combined with the additional 20 percent living in near poverty, the percent of Delaware children who live in poverty **increases to 37 percent.**⁴ This number varies by demographics, with children living in single female headed households the most vulnerable and by geography with Kent and Sussex Counties having a higher child poverty rate than New Castle and Delaware as a whole.

Figure 1. Number of Delaware Children in Poverty by Age, 2006-2008

Age	0 - 5	6 - 18	Less than 18
Below the poverty level	17%	11%	13%
100 - 200% of the poverty level	20%	na	na
At or below 200% of the poverty level	37%	na	33%

Source: KIDS COUNT DELAWARE 2009, pgs 14-15
na-not available

⁴ Representative Terry Schooley, C-G AAUW January 2010 Community Forum on Early Childhood Poverty, Health and Education and 2009 KIDS COUNT in DELAWARE Fact Book, pgs 14-15.

Because the January Forum focused on early childhood poverty, health and education, particularly in Sussex County, many of the statistics in this report are for Sussex County families and particularly for children below the age of five or six.

Sussex County: Almost one quarter of the population of Sussex County is under age nineteen and of those, almost 30 percent are under age five. In Sussex, there are about 21,500 households with children under age 18. Fifty-four percent of the households consist of married couples; 30 percent are single parents.⁵

Grandparents have taken on a greater role in raising their grandchildren. Approximately sixteen percent of Sussex County households consist of ‘other’ living arrangements, which include the approximately 1,900 grandparents who are raising their grandchildren. Of these grandparents, 80 percent have been responsible for their grandchildren’s care for over a year and almost 50 percent have been responsible for five years or more.⁶ While the data does not specify how many children are in their grandparents care we can surmise that there must be several thousand. The poverty rates of children living with non-parental caregivers such as grandparents are almost 2.5 times greater than those living with at least one parent.⁷

Children in Poverty: Representative Schooley again presented data that showed the child poverty rate in Sussex and Kent counties has been consistently higher over the last 15 years than for either New Castle County or Delaware as a whole.⁸ During the recession in early 2000, the child poverty rate in Sussex and Kent rose to 24 percent which was almost double the rate in New Castle. While this rate dropped somewhat in the mid 2000, the most recent data from the American Community Survey estimates that on average between 2006-2008, 17 percent of Sussex County children under the age of five years were living in poverty.⁹ We don’t know yet what affect the current recession coupled with high unemployment has had on the level of poverty in Sussex, but anecdotal evidence such as increased numbers at local food pantries suggests that more families are struggling.

The lower median¹⁰ income in Sussex County contributes to this higher child poverty rate. The median household income of \$49,794 in Sussex County is slightly lower than the national median income and is lower than both Kent and New Castle Counties. (Figure 2) This means that one-half of the households in Sussex have a household income of less than \$49,800. For single females working full-time year-round this median wages are only \$32,000.

⁵ Census Data, American Community Survey, Sussex County, 2006-2008.

⁶ Census Data, American Community Survey, Sussex County, 2006-2008.

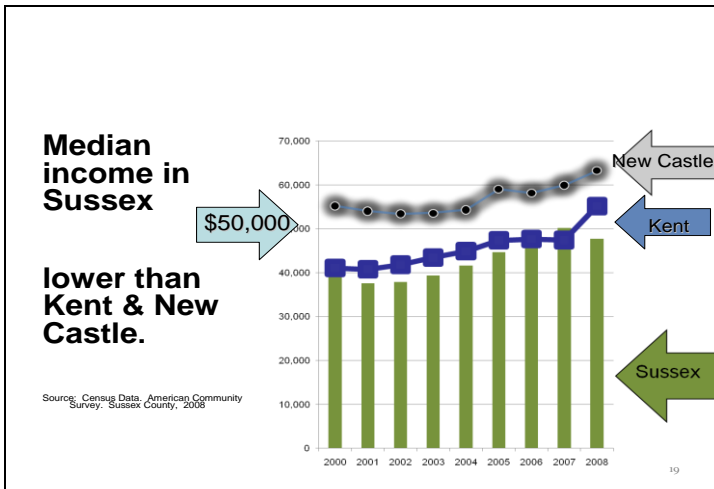
⁷ 2009 KIDS COUNT in DELAWARE Fact Book, pg 94.

⁸ Representative Terry Schooley, C-G AAUW January 2010 Community Forum on Early Childhood Poverty, Health and Education

⁹ Census Data, American Community Survey, Sussex County, 2006-2008

¹⁰ Median household income is where one-half of the households are above the income level and one-half are below the income level.

Figure 2. Median Income, Sussex, Kent and New Castle Counties



Source: U.S. Census Data, American Community Survey 2008

There are 5,200 female headed households in Sussex and over 40 percent of these families have incomes that are below the poverty level. Almost thirteen percent of Sussex families with children under age five are living in poverty; for female headed households that figure increases to approximately 42 percent. (Figure 3). The 'Federal Poverty Threshold is extremely low which means that a woman with two children is considered in poverty if she earns \$18,310 or less. Women who have only slightly higher income are not considered in the poverty rate.

Figure 3. Poverty in Female –Headed Households, Sussex County

	Poverty Rate
All families with related children under 5	12.7%
Married couples with related children under 5	1%
Female householders with related children under 5	41.9%

Source: U.S. Census Data, American Community Survey, Sussex County 2006-2008

Data have shown that children born to single mothers in their teens are much more likely to live in poverty than those born into two parent households or to older women. According to Schooley, the most recent Sussex County data shows that over one-half (52.4 percent) of live births are to single mothers. This rate is higher than Kent and New

Castle Counties and Delaware as a whole. Only the city of Wilmington has a higher percentage of single women giving birth.¹¹ Because about one-third of the households with children are single parents, the poverty level for these families is precarious with child care and health care costs real factors.

SECTION II: EARLY CHILDHOOD HEALTH CARE

Beginning with the lack of or late prenatal care, children that are born into poverty are at a much greater disadvantage when it comes to obtaining affordable health care. Low-income mothers are 1.8 times as likely to have inadequate health care; their babies are 1.9 times as likely to be born at low birth weight and 1.6 times more likely to die in infancy.¹² In Sussex County the most recent figures show that the infant mortality rate was 7.5 deaths per 1,000 live births. This rate varies greatly by race. Infant mortality for African Americans is 16.9 deaths per 1,000 live births compared to about 5.0 deaths per 10,000 live births for whites.¹³

The lack of adequate available health care is a major impediment to receiving preventive care and contributes to a delay in obtaining care when ill. Often common childhood illnesses and injuries are not treated among those children caught in poverty. In general, low-income children are 2.7 times as likely to have no regular health care.¹⁴ Since 2000, the percent of Delaware children not covered by health insurance has increased to where in 2008 it was slightly over 10 percent. There are approximately 7,242 children under age 6 who lack health insurance¹⁵.

Delaware Healthy Children Program. Beginning in 1999 Delaware initiated the Delaware Healthy Children Program (DHCP) with the goal of providing medical insurance for uninsured children under age 19 who were living in families below the poverty level. DHCP is implemented through Federal legislation that created the Children's Health Insurance Program (CHIP). The Federal program provides partial funding for state-operated programs of children's health care coverage. Subsequent to 1999, the program was expanded to include children in families with incomes at or below 200 percent of the Federal Poverty Level. In order to be insured under DHCP, there is a monthly premium ranging from \$10 to \$25 per child depending on income. There are no co-pays.

However, as Representative Schooley pointed out in her presentation, for families caught in poverty the required monthly premium is an obstacle to remaining in the DHCP and is a major factor why the 10 to 11 percent of children in Delaware are uninsured. This premium contributes to the large fluctuation in numbers of children in the program at any one time.¹⁶ Currently, there are only about 5,570 children under the age of 19 enrolled in the program. While the Delaware Child Poverty Task Force has reported the need to intensify enrollment efforts and Representative Schooley has introduced bills in the

¹¹ 2009 KIDS COUNT in DELAWARE Fact Book, pg 89.

¹² 2009 KIDS COUNT in DELAWARE Fact Book, pgs 25-29

¹³ 2009 KIDS COUNT in DELAWARE Fact Book, pg. 137.

¹⁴ 2009 KIDS COUNT in DELAWARE Fact Book, pg. 41

¹⁵ 2009 KIDS COUNT in DELAWARE Fact Book, pg. 145

¹⁶ Representative Schooley, January 2010 C-G AAUW Community Forum on Childhood Poverty, Health and Education.

legislature to eliminate premiums, neither efforts have gained much support in the Delaware State Legislature.

SECTION III: EARLY CHILDHOOD EDUCATION

“We have about 1,000 days to build a baby’s brain... to create a reader, a communicator, a learner and a thinker.”¹⁷ Cognitive development studies have shown that while a child’s cognitive development is correlated with income levels, the chances of success in school for children living in low-income families increases with early learning intervention. In her remarks, Ms. Crim discussed the processed of learning language and that most all children have a speaking vocabulary of about 6,000 words by age six.¹⁸ However, studies that compare the level of vocabulary between children living in poverty and their more affluent peers found that those in poverty began school with a vocabulary of about 6,000 words while those children not living in poverty had a vocabulary of over 20,000 words.¹⁹ This discrepancy between in-poverty and non-in-poverty children in the area of school readiness, points out how crucial early childhood programs are to the cognitive development of a child, particularly those living in poverty. Early childcare programs can include in-home care by a relative or non-relative, private preschool care, or Federal programs such as Head Start.

Along with the cognitive development of a child, early care and education also alerts staff and parents to the social and emotional needs of young children. Poverty is multifaceted; it often means lack of access to services needed. The Governor's Council on Children's Mental Health reported that poverty and its impact are often manifested in children by feelings of vulnerability, social and emotional immaturity or absence of self regulating behavior.²⁰ The sooner a child’s mental health needs are recognized and treated the better for the child's overall educational and personal performance.

Recent studies have shown that over 90 percent of teachers of infants and toddlers nearly 60 percent of teachers of children ages 3 to 5 have only a high school diploma. Additionally, Delaware’s 2002 Child Care Baseline Quality Study found that 30 percent of licensed programs were rated good or excellent while slightly more than one in four (27 percent) of programs were rated poor and developmentally harmful to children. All other programs were judged “mediocre”²¹ The level of teacher training and quality of care varies tremendously across child care facilities.

Sussex County. With approximately 8,500 children in Sussex under age six with all parents in the work force, the need for some type of care is crucial. Over the last decade there has been a decrease in smaller child care facilities in homes, with an accompanying increase in larger child care centers that offer more childcare spaces. This declining number of centers will most likely mean that transportation time and costs for some families will increase.

¹⁷ Center for Disabilities Studies, University of Delaware

¹⁸ Lisa Crim, January 2010 C-G AAUW Community Forum on Childhood Poverty, Health and Education.

¹⁹ Delaware Coalition for Early Learning.

²⁰ Lisa Crim, January 2010 C-G AAUW Community Forum on Childhood Poverty, Health and Education.

²¹ Delaware Coalition for Early Learning.

Along with declining number of centers, low income families face several other obstacles in trying to find quality childhood care in Sussex County. The high cost of early childcare and the lack of educational requirements and ongoing training for those working in the early childcare field contribute to low income families having fewer choices in terms of quality childcare options. The average weekly cost of child care for a child under the age of one is \$114. This decreases slightly for children one year and older, but the average cost of care for a three and four year old is still just slightly less than \$90 per week (Figure 4). This means that a single female headed householder living below the poverty level with one infant would have to spend approximately 30 percent of her annual income for childcare.

Figure 4. Weekly Child Care Costs, Sussex County, DE, 2008

Age Group	Minimum	Average	High
0-12 months	\$82	\$114	\$161
12-24 months	\$67	\$103	\$161
2 years	\$70	\$100	\$161
3 years	\$63	\$88	\$161
4 years	\$63	\$88	\$161
Kindergarten	\$58	\$82	\$116
School-age	\$39	\$73	\$122

Data provided by Kids Count DE 48

Source: KIDS COUNT in DELAWARE Fact Book.

Delaware Purchase of Care. The Purchase of Care (POC) program is a subsidy that supports early childhood and after-school education and care for children who live within 200% of the Federal Poverty Limits. However, the POC does not cover the entire cost of early child care in many areas and thus accredited ‘good’ programs will not be available to children in need. The reimbursement rates in Delaware are much lower than the rates for equivalent care in our surrounding states. For example, Delaware’s POC weekly reimbursement rates ranged from \$45.00 for in home/relative care to \$102.38 for a newborn with special needs obtaining care at a childcare center.

Delaware Stars Program. Delaware Stars for Early Success is a voluntary program used to assess, improve and communicate the level of quality in early care and education and school-age settings. It establishes quality standards for programs and provides technical assistance and limited financial support to programs involved in Stars as they engage in quality improvement efforts. The goal of Delaware Stars is for programs to work on improving quality by moving up the Stars levels. Delaware Stars was initiated by the Delaware Early Childhood Council with the Delaware Department of Education (DOE) ultimately responsible for Delaware Stars, through the Office of Early Care and

Education. As of November 2009 there were only about 150 programs enrolled in the Stars program out of 450 child care centers and 1,200 family child care homes.²²

Governor Jack Markell has stated “We pin our hopes for a better society and a stronger economy on our youngest citizens, so it is our job to ensure that each child has the resources they need to grow to their full potential.”²³ Data in this report has shown that many of our youngest citizens live in economic situations that do not bode well for them in terms of obtaining adequate health care and quality early educational opportunities. The fact that approximately 37 percent of children under the age of six are living in poverty or near poverty in Delaware, warrants action at all levels of government as well as by concerned community organizations to address the issues.

SECTION IV: NEXT STEPS

A list of priorities and goals for the next **three to five years** was developed, based on:

- the input from the January Community Forum speakers,
- from forum attendees who are stakeholders in the early childhood issues, and
- from written material published by organizations such as Children and Families First and the Delaware Child Poverty Task Force.

The majority of priorities that require substantial funding will need to be spread over several years due to the financial crises in the state of Delaware. This year’s State budget will contain little if any increased funding for areas affecting children; the challenge will be to maintain the funding for many of the programs that are currently available. Some recommended goals require minimal or no funding and those should be implemented sooner.

Priorities and Goals:

Convene a Planning Group of Stakeholders in Sussex County

C-G AAUW will work with stakeholders, including the Delaware Department of Education in forming a planning group to establish long term and short term goals for Sussex County.

Within a planning group, form three subgroups; one on health issues and one on early educational issues and one on parent education.

²² Representative Schooley, January 2010 C-G AAUW Community Forum on Childhood Poverty, Health and Education

²³ Kids Count in Delaware Fact Book 2009, College of Human Services, Education & Public Policy, Univ. of DE.

Early Health and Education Issue (requires little or no additional state-level funding)

- * Maintain the funding level on Purchase of Care (POC) funding.
- * Increase the number of STARS Programs for licensing childcare/preschool programs.

Provide monetary incentives for expansion of childcare facilities and extension of childcare workers training.

Require stricter preschool/daycare licensing requirements.

- * Explore working with higher education (University of Delaware, Delaware State University, Delaware Technical Community College) in developing programs to train early childcare workers. Explore scholarship programs for childcare workers

Explore and outline actions steps to increase parent's awareness of: Delaware Healthy Children's Program; Federal and State programs such as WIC and Child Development Watch; and problems associated with childhood obesity;

Explore developing programs to assist single parent families.

Explore ways to increase early childhood literacy.

Work to improve coordination of funding for programs.

Early Health and Education Issues with primary focus within the next 3 to 5 years (requires substantial state-level funding)

- * Continue Head Start funding with more county council & state government involvement.

Expand all-day kindergarten with 1 yr. preschool desired.

- * Support HB 331: An Act to Amend Title 31 of the Delaware Code Relating to Child Care Quality and the Establishment of Tiered Reimbursements Based on Quality of Care.

As suggested by the Coalition for Early Learning, increase Purchase Of Care funding to a minimum of 75 percent of the rate determined bi-annually by the state-wide market rate study.

Assure that all children who qualify for POC will receive quality early education.

- * Issues that will receive particular attention by Coastal-Georgetown AAUW.

Link POC reimbursement to Delaware Stars Program so that programs that achieve 3, 4, and 5 ratings are reimbursed at 85 percent, 93 percent and 100 percent of the market rate.

Increase childhood mental health funding

- * Support Senate Bill No. 18 An Act to Amend Title 16 of the Delaware Code Relating to the Delaware Healthy Children Program. This Act removes the provision that participants in the Delaware Healthy Children Program pay a premium to participate, while allowing the Department of Health and Social Services to consider instituting minimal co-payments for health services in order to recover a portion of the revenue that would be lost due to the absence of premium payments. Removing the premium payment may reverse declining enrollment in the Program and increase the number of children in Delaware who have health insurance coverage.

* Issues that will receive particular attention by Coastal-Georgetown AAUW.

APPENDIX I: COASTAL-GEORGETOWN AAUW

Since 1881, AAUW (formerly known as the American Association of University Women) has been the nation's leading voice promoting education and equity for women and girls. AAUW has a nationwide network of nearly 100,000 members, 1,000 branches and 500 college/university institution partners.

Coastal-Georgetown AAUW (C-G AAUW) is a branch of the national AAUW. C-G AAUW was founded in 1957, first as Georgetown Branch, then in 2007 as Coastal-Georgetown. Currently there are over 90 members.

The mission of AAUW is to promote equity for women and girls through advocacy, education, philanthropy and research. C-G AAUW does this through: a mentoring program at one of the local elementary schools; honoring 11th grade girls at an annual Excellence in Science & Mathematics Luncheon at U of D; judging and presenting awards at the Sussex Co. Science Fair; awarding a \$1,000 collage scholarship to a graduating senior from one of Sussex's high schools; and a \$1000 scholarship to a 2-year graduate from Del Tech who is continuing on to a 4-year school.

Within C-G AAUW, the Issue/Action Group is a subgroup of women who are actively involved with promoting the policy issues of AAUW. For the last 4 years this group has organized an annual January Community Forum that focused on; alternative energy, affordable housing, women in the Delaware prison system and most recently early childhood poverty, health and education. This group also advocates at the state legislature on issues such as children aging out of the foster care system, children's health insurance, pay equity, and other issues that relate to women and children.

C-G AAUW meets once a month with meetings open to the public. The organization sponsors several book clubs. ALA Notable Books meets once a month as does the NY Times Notable Books.

Membership is open to all graduates holding an associate or equivalent degree, baccalaureate degree or higher from a qualified educational institution.

For more information about C-G AAUW see
www.aauwdelaware.org/CoastalGeorgetownBranch.shtml