



People's Emergency Center

Nurturing Families, Strengthening Neighborhoods, Driving Change.

Testimony on

Pennsylvania's Child Care and Development Fund (CCDF) State Plan

By Kathy Desmond, President

May 8, 2018

Thank you for letting the People's Emergency Center provide comments to the Pennsylvania's State Plan for 2019-2021 to implement the Child Care Development Fund (CCDF). Thank you for listening to me and your consideration of my testimony. My name is Kathy Desmond. I am president of the People's Emergency Center. For 45 years, our mission has been to nurture families, strengthen neighborhoods and drive change, primarily to benefit women with children and parenting youth who experience homelessness. We created the Building Early Links for Learning project, better known as BELL in 2016. BELL forged linkages between homeless family advocates, early childhood educators, and developmental scientists to support young children experiencing homelessness. The two main goals are to enhance the developmental friendliness of emergency housing, and to better understand and remove barriers that keep young homeless children from reaping the benefits of early education. Among our findings from the first two years, we demonstrated a 26% proportional increase in homeless children ages 3-5 enrolling into early childhood education programs from 2016 to 2017. Our testimony is informed by our experiences.

Our testimony is extensive, but I only wish to highlight some key points.

- PEC encourages OCDEL to work with the PA Department of Human Services to require all emergency housing programs serving families who experience homelessness to use the ACF Self-Assessment Tool for Family Shelters. The Tool increases sensitivity and awareness of housing crisis settings to early childhood needs and concerns. We have demonstrated evidence that the tool can improve how shelters serve young children.

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- PEC recommends waiving co-payments for families experiencing homelessness. We recently worked with a 17-year old young mother with an infant; she has no income. The child care enrollment process almost derailed her application by asking for two fees (\$5 for subsidy co-pay, \$40 for the early learning program enrollment fee). PEC covered those fees, but has limited means to continue doing so for everyone. If we increase ECE participation of the city's 2,000 young children experiencing homelessness to 40 percent, costs for waiving fees would total \$4,000 to cover \$5 subsidy co-payments and roughly \$32,000 to cover \$40 enrollment fees.
- PEC advocates for the expansion of high quality infant/toddler care. There is a deficit of available slots for high quality programs serving young infants and toddlers. We know that rapid brain development occurs during these initial years of life, necessitating more opportunities for infants and toddlers, particularly those experiencing homelessness, to receive high quality structured educational care in order to support healthy brain development.
- PEC emphasizes the urgency for ECE providers to increase their awareness of the needs of young children and their families who experience homelessness. We recommend training ECE providers to recognize and respond more thoughtfully to the centrality of trauma in shaping the lives, choices, and behaviors of young children experiencing homelessness.

Thank you again for your consideration of our recommendations, and feel free to reach out with any questions.

Comments specific to OCDEL's testimony template

Section 1.4: Coordination with Partners to Expand Accessibility and Continuity of Care:

Response a: OCDEL should provide cross-systems trainings for DHS homeless service providers funded by the federal Emergency Solutions Grant program.

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Response b: In focus groups that we conducted in 2017, parents and staff of early learning education and homeless service providers revealed to us a lack of knowledge regarding where to search for high quality care and much more. An extensive list of our focus group recommendations includes the following:

1. Housing Crisis Services Providers

- A) These providers need to more actively work to address the needs of families regarding access to quality early childhood education options close to parent worksites, training sites, and/or places of residence.
- B) They should better address families' needs for access to more user-friendly, comprehensive, and up-to-date information about quality early childhood education alternatives and related resources, e.g.,
 - i. Bring local ECE providers into shelter and transitional housing settings to share critical information directly with families; and
 - ii. Develop informational materials that help to increase parents' understanding of enrollment requirements and systemic supports.
- C) They should create and implement ongoing staff development training for housing program administrators and case managers that enhances staff understanding of early childhood education issues, resources, and associated systems' requirements and entry protocols.
- D) They should help nurture parental competencies in working with their own children on cognitive learning and social-emotional development concerns, and expand family-friendly spaces in housing crisis settings that facilitate both positive parent-child interaction and more active parent-to-parent peer supports.
- E) They should regularly employ the Administration for Children and Families' Early Childhood Self-Assessment Tool for Family Shelters and other related assessment and referral protocols, in order to enhance the sensitivity of housing crisis settings to early childhood concerns and promote parental access to quality early childhood education.

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2. Early Childhood Education Providers

- A) ECE providers should address the multitude of practical challenges identified by parents in dealing with entry, enrollment, and sustained participation in the early childhood education system, including:
 - 1. Simplify required enrollment documentation;
 - 2. Expand flexibility in program scheduling to support access in “off hours”; and
 - 3. Increase the number of slots targeted for children aged 0-3, particularly infants.
- B) ECE providers should recognize and respond more thoughtfully to the centrality of trauma in shaping homeless families’ and children’s lives, choices, and behaviors, including:
 - 1. Enhance staff training that supports more effective trauma-informed care; and
 - 2. Increase attention to classroom structure, curriculum development, behavior management, and school security in creating more fully trauma-informed learning environments.
- C) ECE providers should enhance knowledge and skills of ECE staff to facilitate both childhood learning and family success in light of the challenges associated with participation in the housing crisis response system and the impacts of homelessness on families and children.
- D) Ensure more active ongoing communications with parents and strengthen supportive interactions with homeless families in ECE settings.
- E) Expand both general community outreach and targeted shelter in-reach activities to help inform homeless families of available ECE options and resources.

3. Continuum of Care (CoC) and Community-Wide Homeless Response System

- A) PEC has developed the Building Early Links for Learning project, known as BELL. BELL aims to build links between the Continuum of Care and citywide response system to homelessness and the ECE system with plans to increase the numbers of ECE slots available to homeless families. We serve as a model for the rest of the state. We encourage OCDEL to talk with funders from around the state to duplicate our service model.
- B) We hope to encourage the Continuum of Care system to discuss with the ECE system improving the apparent duplication of eligibility documentation and paperwork demands.

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Response c: PEC encourages the continued policy of waivers for certain verification and immunization requirements for families and children experiencing homelessness, including presumptive eligibility.

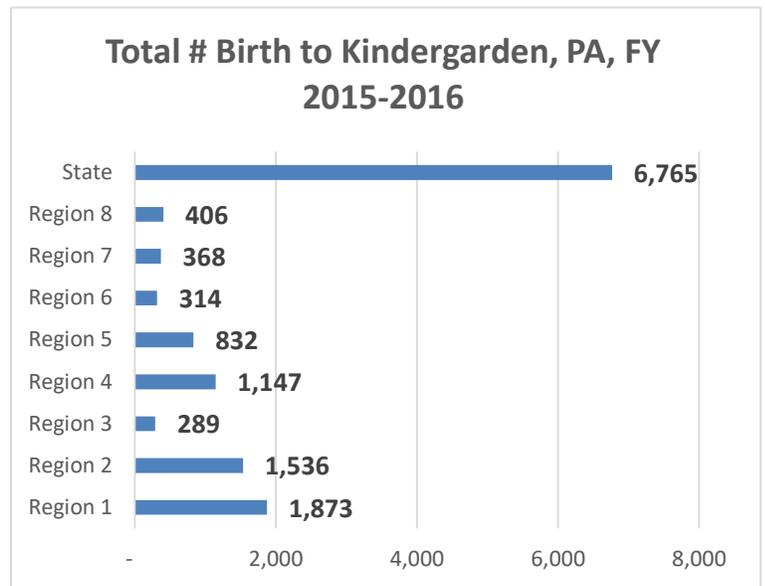
Response d: PEC encourages training for ECE providers to better understand the mental health needs of children in ways that would result in fewer expulsions.

Response e: PEC encourages OCDEL to create pilot projects that allow Early Head Start or other home visiting (VH) programs to work with families who experience homelessness in which the HV programs would follow a family who exits emergency housing but still retains risks that could harm the child and trigger another episode of homelessness. PEC further encourages OCDEL to use test pilot home visiting programs as funded by Maternal, Infant, Early Childhood Home Visiting (MIECHV) and IDEA Part C programs to provide home-based services to high-risk newborns who are in shelter, but preparing to enter the community.

Response f: PEC supports prioritizing providing high quality child care for foster care children.

For the record, in Philadelphia, an estimated 1,980ⁱ children ages 0-5 will spend at least one night in a homeless shelter. The School District of Philadelphia reportedⁱⁱ serving and identifying 1,873 children who experienced homelessness and who were in the age range of birth to Kindergarten. The fact that there are two different numbers in one region suggests that it might be useful for these two systems to come together to determine an exact figure. There may be overlap, but no one has compared the data.

In addition, the Pennsylvania Department of Education reported that that there were 6,765 children from birth to Kindergarten identifiedⁱⁱⁱ as being homeless. We do not know the number of young children who come into the shelter system because no one in Pennsylvania collects that data, and the United States Department of Housing and Urban Development (HUD) no longer makes it easy to get this information.



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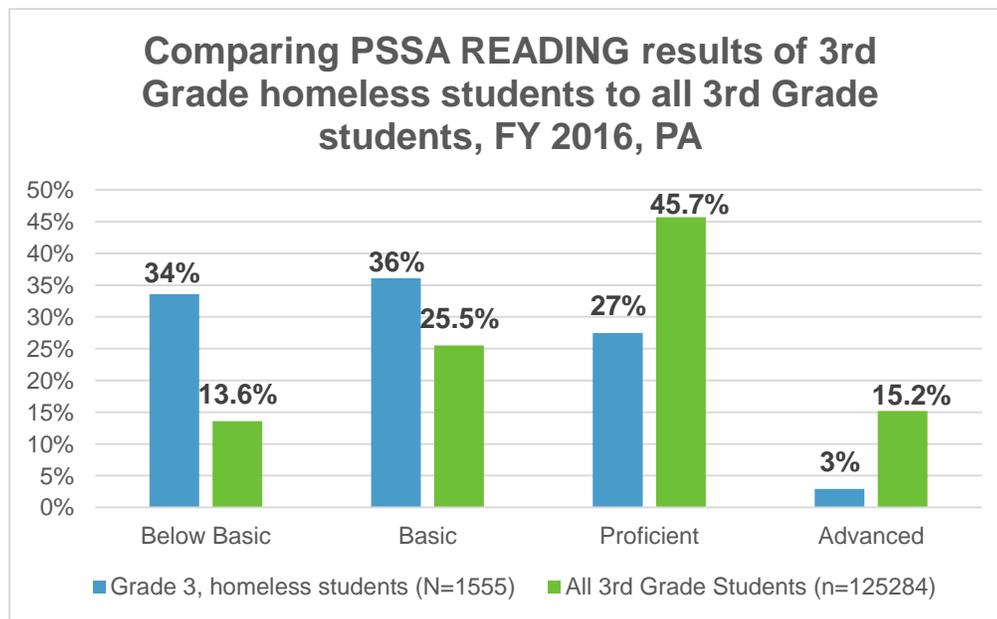


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We do know that these children are living throughout Pennsylvania and are not concentrated in only urban areas. In addition, these are all very conservative numbers because many families do not report themselves as homeless to the local schools.

Homelessness hurts the health, development, and education of young children. As evidence, look at the 3rd Grade reading and math scores on Pennsylvania's standardized testing.



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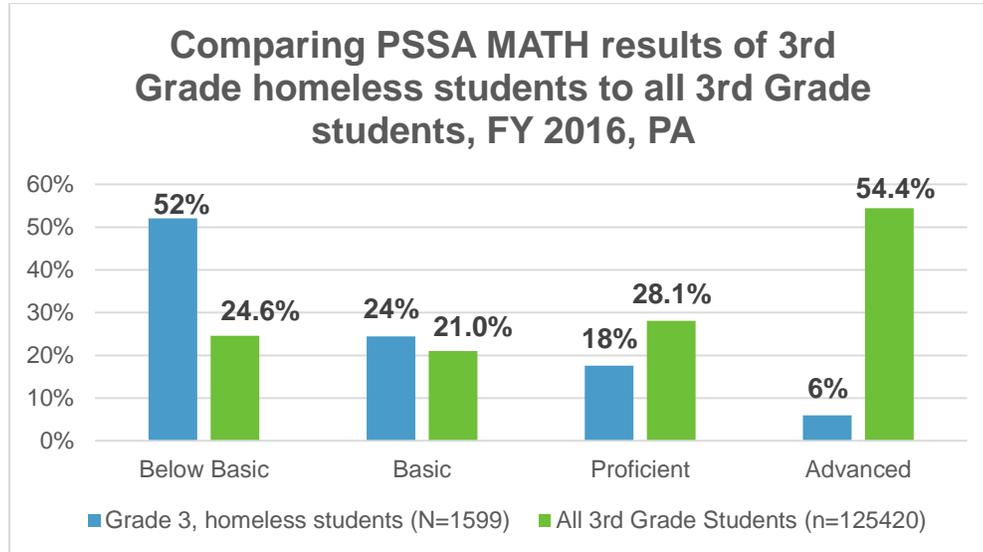


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Homeless 3rd graders are scoring Below Basic more than double compared to their peers in Reading and in Math, while the disparity of those who scored as “Advanced” are 6 percent for homeless students and 54.4 percent for their peers in Math, and 3 percent for homeless 3rd Graders versus 15 percent for their peers in Reading. These disparities continue for homeless 8th graders and high schoolers, suggesting that homeless students never catch up. Without the basics of a high school degree, these students face the continuation of the poverty cycle as their potential future.

Yet families experiencing homelessness confront more barriers to enrolling and participating in child care than impoverished families who have stable housing^{iv}.

In addition to the recommendations from the focus groups, PEC recommends the following set of ideas, some of which are encouraging the continuation of policies:

- Prioritize children who are homeless (under the McKinney-Vento Act’s education subtitle’s definition of homelessness) for child care services.
- Use CCDF funds to improve access to quality child care for children experiencing homelessness, including procedures to permit immediate enrollment of homeless children while required documents are obtained.

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- Establish a grace period for children experiencing homelessness to comply with immunization and other health and safety requirements. Homeless children must be allowed to receive child care services during the grace period, while families work to meet health and safety requirements.
- Provide staff and child care providers with training and technical assistance on how to identify and serve children experiencing homelessness.
- Coordinate child care services with: early childhood programs serving children experiencing homelessness; State Coordinators for Homeless Education; and, as practicable, local liaisons and Continuum of Care Grantees funded by the U.S. Department of Housing and Urban Development.
- Set aside funds for children experiencing homelessness by designating a portion of subsidies or through use of grants or contracts to build capacity in child care programs.
- Improving identification is one of the first steps to better serving this population, especially for families who are living doubled up, prior to entering shelter. Specifically, please consider:
 - Outreach activities in high-prevalence geographies and at high-traffic destinations—e.g., food pantries/soup kitchens, beauty parlors, barber shops, substance use treatment programs, and laundromats—may also help to better capture under-identified and underreported subpopulations of homeless families.
 - Conduct follow-up screening calls with families who apply for housing support at each county's centralized intake locations for emergency housing; and
 - Work with agencies involved in providing support to families at risk of eviction or who have recently been evicted, as this population may quickly transition into homelessness.
 - Awareness of homelessness among providers who are not ECE or emergency housing providers, and increasing their capacities to report information.
 - Consider supporting interest in a phone campaign to inform homeless families about pre-K programs, similar to what New York City does and showed success by a jump in enrollment.
 - Information about programs is important, but alone is insufficient. Follow-up contact, assistance with application and enrollment, and warm hand-offs to contacts at ECE providers may help to increase enrollment and retention in and utilization of services. In the context of ECE, this process must also

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include auxiliary services that support retention in care, such as coordinated transportation.

- Fund a pilot project that provides home visiting services for families with newborns who are leaving the shelter system. Such a pilot could anchor the family with the services needed by infants, and help avoid the family from becoming homeless again. There are such examples around the nation that seem to work and we encourage OCDEL to explore this option. We specifically encourage OCDEL to consider the Nurse-Family Partnership for serving infants, and the Parent-Infant program for serving families with older children.
- Waive co-payments for families experiencing homelessness. We recently worked with a 17-year old young mother with an infant; she has no income. The child care enrollment process almost derailed her application by asking for two fees (\$5 for subsidy co-pay, \$40 for the early learning program enrollment fee). We paid for the fees, but have limited means to continue doing so for everyone. If we increase participation to 40 percent of 2,000 young children needing fee assistance, the waiver might cost \$4,000 at \$5 and around \$32,000 at \$40.
- Allow a period of time for housing search or work search to fulfill TANF work and education requirements.
- Use tiered reimbursement with higher rates for providing child care for children experiencing homelessness.
- Encourage DHS-funded emergency housing programs to regularly employ the Early Childhood Self-Assessment Tool for Family Shelters and other related assessment and referral protocols, in order to enhance the sensitivity of housing crisis settings to early childhood concerns and promote parental access to quality early childhood education. PEC stands ready to provide technical assistance as we have two-years of experience with working with homeless service providers in Philadelphia on using the Self-Assessment Tool.

Thank you for listening to me and for your consideration of our recommendations.

ⁱ Email from Michele Mangan, Philadelphia Office of Homeless Services, to Joe Willard, PEC, dated October 2, 2017.

ⁱⁱ PA Department of Education: Educating Children and Youth Experiencing Homelessness Evaluation Report SY 2015-2016

ⁱⁱⁱ IBID

^{iv} PHMC's Best Practices in Early Care and Education for Young Children Experiencing Homelessness, dated January 6, 2017

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