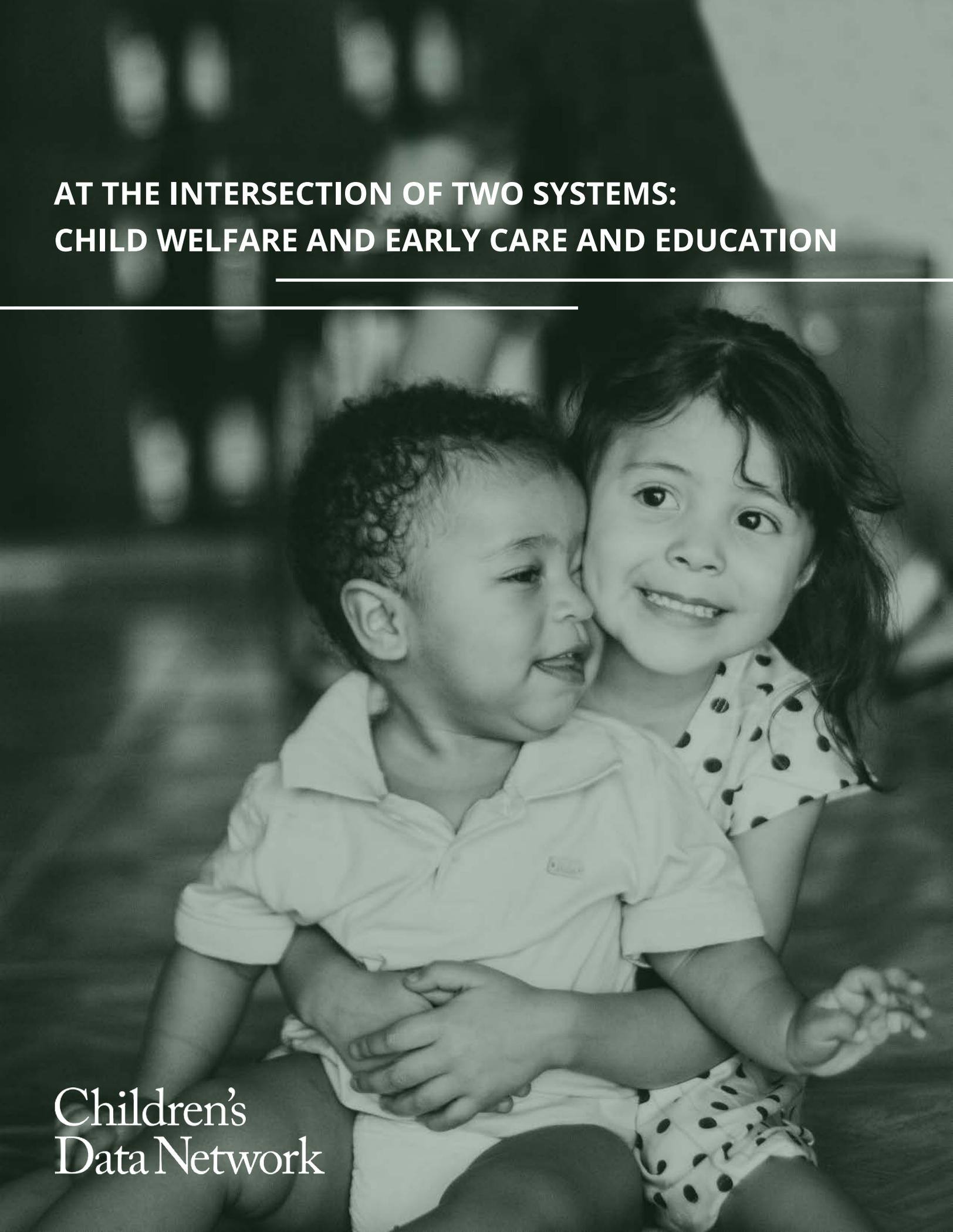


**AT THE INTERSECTION OF TWO SYSTEMS:
CHILD WELFARE AND EARLY CARE AND EDUCATION**



Children's
Data Network

AT THE INTERSECTION OF TWO SYSTEMS: CHILD WELFARE AND EARLY CARE AND EDUCATION

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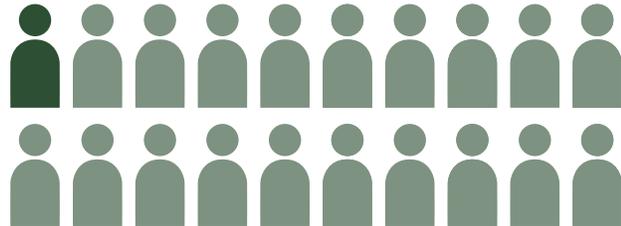
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INTRODUCTION

THE CHILD WELFARE CHALLENGE

EACH YEAR, 1 IN 20 CHILDREN BORN IN CALIFORNIA ARE REPORTED FOR SUSPECTED CHILD ABUSE OR NEGLECT DURING THE FIRST YEAR OF LIFE



BY AGE ONE

BY AGE 5, THE CUMULATIVE PERCENTAGE GROWS TO 1 IN 7



BY AGE FIVE

Among children born in California between 2006 and 2007, 14.8% were reported for alleged child abuse or neglect, 5.1% were confirmed as victims of maltreatment, and 2.2% were placed into foster care before they entered kindergarten.¹

Data from Los Angeles (LA) County reflects a similar picture. Of the 310,700 children born in LA between 2006 and 2007, 14.6% (45,297) were reported for maltreatment before the age of 5, 5.2% were confirmed as victims of abuse or neglect, and 2.4% were placed into foster care.²

Every year a large number of young children in LA come to the attention of the Department of Children and Family Services (DCFS) through reports to the LA Child Protection Hotline. Responding quickly and appropriately to these reports poses significant challenges, but it also represents an opportunity for improved collaboration between Child Protective Services (CPS) and aligned organizations that provide resources, activities, and services to support families with young children as well as those that provide early intervention, child care and child development services. This study provides information from Northern LA County on all families and children born between 2010-2012, all children who interacted with DCFS

¹Children's Data Network. (2015). *Cumulative risk of child protective service involvement before age 5: A population based examination*. <http://www.datanetwork.org/research/cumulative-risk-of-child-protective-service-involvement-before-age-5-a-population-based-examination/>

² Ibid



between 2010-2016, as well as those under 5 years of age who received subsidized Early Care and Education (ECE) services between 2010-2012 through the Child Care Resource Center (CCRC), the lead child care resource and referral agency in that area.³ Findings also explore the intersection between the two systems by examining service patterns for families involved with both systems, ECE and CPS. For study purposes, involvement in ECE means that children received subsidized child care and support through CCRC in Service Planning Areas 1 and 2,⁴ the San Fernando, Santa Clarita, and Antelope Valley regions of Los Angeles County.

THE EARLY CARE AND EDUCATION OPPORTUNITY

Research shows that developmentally appropriate care and supportive relationships between children and the adults around them is critically important in the early years of life.⁵ High quality ECE provided in child care centers and in family child care homes can deliver consistent, developmentally sound, and emotionally supportive care and education.⁶ Research has also⁷ shown that ECE programs can enhance cognitive and social-emotional development for children, and provide support for parents and caregivers while they are at work or participating in educational programs. ECE can provide respite care, facilitate understanding of child development and behavioral challenges, and serve as a bridge for families to services in other sectors.⁷ This combination of child development and family support has been shown to have long-lasting positive effects for children in the areas of behavioral/emotional functioning, school readiness, academic achievement, and educational attainment.⁸

³ CCRC serves as lead organization in Northern Los Angeles and San Bernardino Counties, offering Child Care Resource & Referral, subsidized child care, Early/Head Start, Home Visitation, quality improvement and workforce development, communications, government relations and policy as well as research and evaluation services. While they are not the only “door” through which families can access ECE services in the region, they serve a large number of those who qualify for subsidized child care services.

⁴ Service Planning Area (SPA) boundaries were developed in the 1990s by the Children’s Planning Council to align or consolidate the multiple set of service boundaries in place at that time (i.e., one set of boundaries for mental health services, another for health regions, another for public social services, etc.); community groups were also consulted to assure that boundaries reflected prevailing travel and utilization patterns. SPAs were designed to support regional consultation in a large and diverse County, guiding cross-sector collaboration and information sharing.

⁵ See Center on the Developing Child at Harvard University, www.developingchild.harvard.edu. It should be noted that most of the available research focuses on licensed child care centers or family child care homes where programs are designed around principles including adequate staff: child ratios, caregiver preparation and training, curriculum standards and other factors known to contribute to high-quality care. There is little known about the kind of provided by family, friends and neighbors that is generally unlicensed and unregulated.

⁶ Karoly, L. A., Kilburn, R. & Cannon, J. S. (2005). Proven benefits of early childhood interventions. RAND Labor and Population Research Brief. https://www.rand.org/pubs/research_briefs/RB9145.html

⁷ Small, M. L. (2009). *Unanticipated gains: Origins of network inequality in everyday life*. New York, NY: Oxford University Press.



The benefits of participation in high-quality ECE are particularly pronounced for children from low-income families and for those already involved with or at risk of entering child welfare.^{9,10} Specifically, high-quality subsidized ECE has been shown to promote child safety, permanency, and well-being for children – potentially helping to achieve the overarching goals of the child welfare system. For that reason, collaboration between ECE and CPS is considered a major opportunity for primary and secondary prevention of child maltreatment.¹¹ However, in general, subsidized ECE programs may be underutilized by children and families known to CPS.¹² Not having adequate resources to serve all families who qualify for subsidized child care programs is clearly a primary factor,¹³ but there may also be other contributing factors including confusion about how to navigate the ECE system, mismatch between ECE eligibility processes and the CPS system’s need for immediate services, and limited ability to “translate” and collaborate across sectors to assist families who face multiple problems and challenges.

IS LOS ANGELES COUNTY SEIZING THE OPPORTUNITY?

Los Angeles has a strong history of cross-sector collaboration. A number of partners, including the LA County Department of Children and Family Services (DCFS), Office for Advancement of Early Care and Education, Policy Roundtable for Child Care and Development, Education Coordinating Council (ECC), Los Angeles County Office of Education (LACOE), the Child Care Alliance of Los Angeles (CCALA) and First 5 LA, have been laying the groundwork for collaboration between the ECE and CPS systems for some time. Achievements to date include a countywide Quality Rating and Improvement System (QRIS) system; an early “Head Start and Early Education Referral System” designed by DCFS, LACOE and other Head Start providers; the Linkage program designed to co-locate DPSS staff in DCFS regional offices in

⁸ Klein, S. (2016) *Benefits of early childhood education for children in the child welfare system*. Office of Planning, Research and Evaluation Research-to-Practice Brief #2016-68, Administration for Children and Families.

⁹ U.S. Department of Education. (2015). *A matter of equity: Preschool in America*. Retrieved from: <http://www2.ed.gov/documents/early-learning/matter-equity-preschool-america.pdf>

¹⁰ Klein, S. (2016). *Benefits of early care and education for children in the child welfare system*. Office of Planning, Research and Evaluation Research-to-Practice Brief #2016-68, Administration for Children and Families; Reynolds, A. J., Mathieson, L. C., & Topitzes, J. W. (2009). Do early childhood interventions prevent maltreatment? A review of research. *Child Maltreatment*, 14(2), 182-206.

¹¹ Los Angeles County Office of Child Protection. (2017). *Paving the road to safety for our children: A prevention plan for Los Angeles County*. Primary prevention refers to support for families before they are referred to the CW system; secondary prevention refers to support for families who have received one or more referrals to the Child Protection Service Hotline but do not currently have an open case.

¹² Klein, S. (2016). *Benefits of early care and education for children in the child welfare system*. Office of Planning, Research and Evaluation Research-to-Practice Brief #2016-68, Administration for Children and Families.

¹³ Learning Policy Institute. (2017). *Understanding California’s early care and education system*. <https://learningpolicyinstitute.org/product/understanding-californias-early-care-education-system-report>



order to share information on benefits and eligibility issues for DCFS families; and pilot testing of the Emergency Child Care Bridge concept in the Van Nuys community by DCFS and CCRC, with support from Ralph M. Parsons and W. M. Keck Foundations, and First 5 LA. Current efforts include:

1. Launch of the LA County Emergency Child Care Bridge Program on August 15, 2018;¹⁴
2. Strategic planning by the Office for Advancement of Early Care and Education (newly located in the Department of Public Health) on behalf of the Policy Roundtable for Child Care and Development and the Child Care Planning Committee; and
3. Collaboration between the Policy Roundtable and the Office of Child Protection to assure efficient use of existing ECE resources and expand access to high-quality services.

Despite this firm foundation for cross-sector collaboration – and renewed interest in collaboration sparked by the Office of Child Protection’s emphasis on enhanced access to ECE as part of a countywide effort to prevent child maltreatment¹⁵ – Los Angeles still has a long way to go in making the promise of access to subsidized ECE a reality for all of those who need it, including families involved with CPS. Specifically, a 2017 Child Care Needs Assessment drew attention to several important trends in LA County’s ECE system including the shortage of infant and toddler care, the decline in family child care homes, the increased participation in transitional kindergarten, and the high cost of child care.¹⁶ A recent Advancement Project report highlighted the gap between family need for subsidized child care for babies and toddlers and current availability.¹⁷ This study was designed to explore the extent to which the families of children born in SPAs 1 and 2 between 2010 and 2012—and especially those who became involved with the CPS system—managed to access and enroll young children in subsidized ECE services, and to provide preliminary observations on how families interact with these two complex service systems.

¹⁴ California’s Emergency Child Care Bridge Program includes time-limited monthly payments for emergency child care services, child care navigation to identify permanent child care resources, and trauma-informed care training and consultation for participating child care providers. LA County’s program is based on partnership between DCFS, CCALA, and the eight Resource and Referral agencies that serve the county; it focuses on young children ages birth to five who are placed with relatives or non-related resource families and DCFS-supervised parents with young children (whether or not they are also under DCFS supervision).

¹⁵ Los Angeles County Office of Child Protection. (2017). *Paving the road to safety for our children: A prevention plan for Los Angeles County*.

¹⁶ Los Angeles County Child Care Planning Committee. (2017). *The state of Early Care and Education in Los Angeles County*. Office for the Advancement of Early Care and Education, Child Care Planning Committee & First 5 LA. The “decline” in this report refers to decreases in the number of family child care homes available to serve children.



STUDY METHODS

The Children’s Data Network, in partnership with CCRC, DCFS, and the Los Angeles County Department of Public Social Services (DPSS), linked records for all children born in Service Planning Areas (SPA) 1 and 2. The records included:

- Birth records (2010-2012);
- Records for children up to age 5 served by CCRC between 2010 and 2016 through key subsidized ECE programs -- CalWORKs Stage 1, Stage 2, Stage 3, Alternative Payment, Family Child Care Home Education Network, and Early/Head Start; and
- Child protection records (2010-2016, up to age 5) statewide.¹⁸

Linkage of these administrative records provided an initial look at patterns of involvement with CPS, the subsidized ECE system, and with both systems for families in the Northern part of LA County whose children were born between 2010 and 2012. This analysis uses linked administrative data to look at overall service usage and interactions at the intersection of the two systems. Additionally, it explores demographic differences and similarities that may exist between family groups using characteristics known to be associated with CPS-involvement that are captured on the birth record.¹⁹

The primary limitation of administrative data is that the data reflect operations of existing systems and may be subject to missing or inaccurate data. The limitations of the data sets included in this study are as follows. First, although birth records are reasonably comprehensive, they do not include babies born outside of the state whose families may later move to California. Second, state CPS records include those who were reported for allegations of child maltreatment, investigated or had open cases in California, but they do

¹⁷ Pleitez, K., Watson, E., & Lara, A. (2018). *Babies and toddlers in Los Angeles County, prioritizing high-quality early care and education to set children on a path to success, recommendations for decision makers*. Los Angeles, CA: Advancement Project.

¹⁸ Only children born in SPAs 1 and 2 were included in the analysis. Receipt of subsidized ECE is limited to only CCRC clients in SPAs 1 and 2, but child protection data was statewide. For that reason, children born in SPAs 1 and 2 who received subsidies through another provider or who moved to a different area of California and received ECE in that new location would be counted as not connected to ECE. Those who became involved with the child protection system, however, would. DCFS-funded ECE is not included in the analysis.

¹⁹ Children’s Data Network. (2015). *Cumulative risk of child protective service involvement before age 5: A population based examination*. <https://www.datanetwork.org/research/cumulative-risk-of-child-protective-service-involvement-before-age-5-a-population-based-examination/>



not include families who left or moved into the state during this time period and may have interacted with CPS in another state.

ECE records included in this analysis are limited to the children who participated in subsidized child care programs offered through CCRC between 2010-2016. Because CCRC works with DPSS to help CalWORKs eligible families access ECE services, these data should reflect the entire group of families receiving subsidies through the CalWORKs (or Temporary Assistance to Needy Families, TANF) system, including Stage 1, Stage 2 and Stage 3. Services funded through the California Department of Education's Alternative Payment, General Child Care and Family Child Care Homes Education Network programs include only those families served by CCRC. Records also include children enrolled in the Head Start and Early Head Start programs through CCRC, but do not include those served by other providers. While CCRC is not the only "door" through which families can access subsidized ECE services, they serve as the resource and referral agency for the northern part of the county, providing access to subsidized ECE programs for a large number of those who qualify for subsidized child care services. The data do not reflect the full universe of subsidies available, nor do they include families who use alternative or unsubsidized resources, decline the offer of child care subsidies, do not meet eligibility criteria or do not choose to use the subsidized child care system.

Despite these limitations, the findings provide information heretofore unavailable that suggests patterns of family involvement across these two important systems.



FINDINGS

INVOLVEMENT IN EITHER SUBSIDIZED ECE OR CPS

Over 100,000 children (n=102,649) were born in SPAs 1 and 2 between 2010 and 2012. A substantial number touched each of these systems – ECE and CPS – before age 5.

ABOUT 1 IN EVERY 9 OF THE CHILDREN BORN IN THIS REGION BETWEEN 2010 AND 2012 (N=11,450 OR 11.2%) RECEIVED SUBSIDIZED ECE THROUGH CCRC BEFORE THE AGE OF 5



ABOUT 1 IN EVERY 9 OF THE CHILDREN IN THE 2010-2012 BIRTH COHORT (N=11,976 OR 11.7%) RECEIVED A REFERRAL TO CPS FOR ALLEGED ABUSE OR NEGLECT BEFORE THE AGE OF 5, AND A NUMBER OF THESE ALLEGATIONS WERE DETERMINED TO REQUIRE INVESTIGATION OR CASE MANAGEMENT SERVICES



SUBSIDIZED ECE

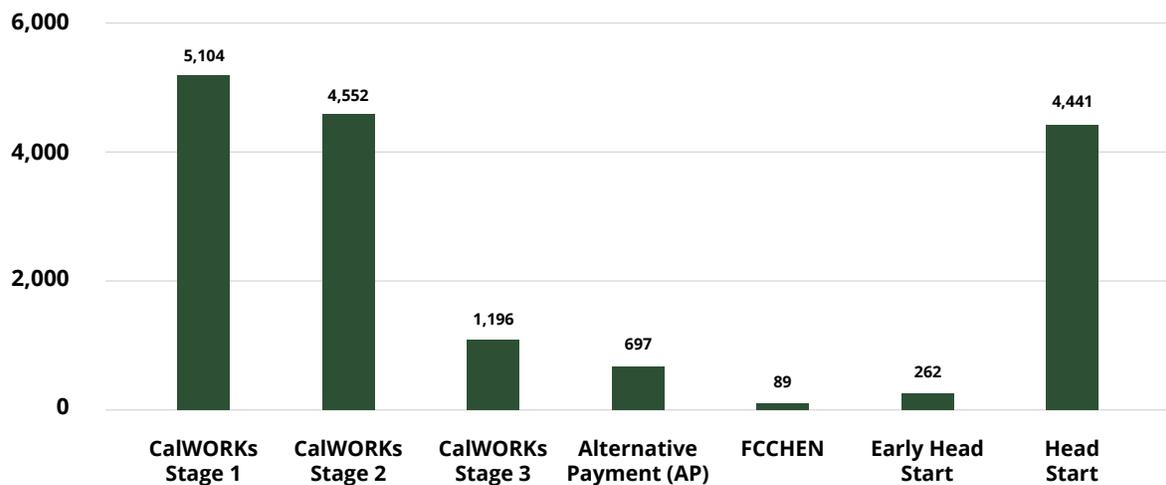
A variety of subsidized ECE programs exist to serve children and families, each with different eligibility requirements. In California, the subsidized child care system relies on a blend of federal and state funding through both Proposition 98 and the State General Fund. Federal contributions are found in Head Start and Early Head Start Programs, and infused throughout the California subsidized child care system in CalWORKs Stage 1 child care through TANF funds administered through the California Department of Social Services. The balance of the subsidized child care system is administered through the California Department of Education, which infuses state and federal funds from the Child Care and Development Block Grant into CalWORKs Stage 2 and 3, Alternative Payment, and General Child Care. Programs such as Head Start and California State Preschool have designated funded spaces. As one child leaves



the program, another child is pulled from a waiting list to fill that space. Other programs are voucher-based where parents who qualify for the program are allowed to “purchase” a space in a child care facility or with an individual who meets their needs. This could be a licensed center, a licensed home, or with a legally license-exempt individual (e.g., often referred to as Family, Friend, and Neighbor care). The parent might have a full-time or a part-time need due to employment or training. They may have an infant, toddler, preschooler, or school age child.

The number of children served in these different programs between 2010 and 2016 are illustrated below. The total number of children across the different ECE programs sums to greater than the 11,450 served because children who are served by multiple programs (e.g., part day Head Start supplemented by part day care in a family child care home) and those who transition between programs are counted more than once.

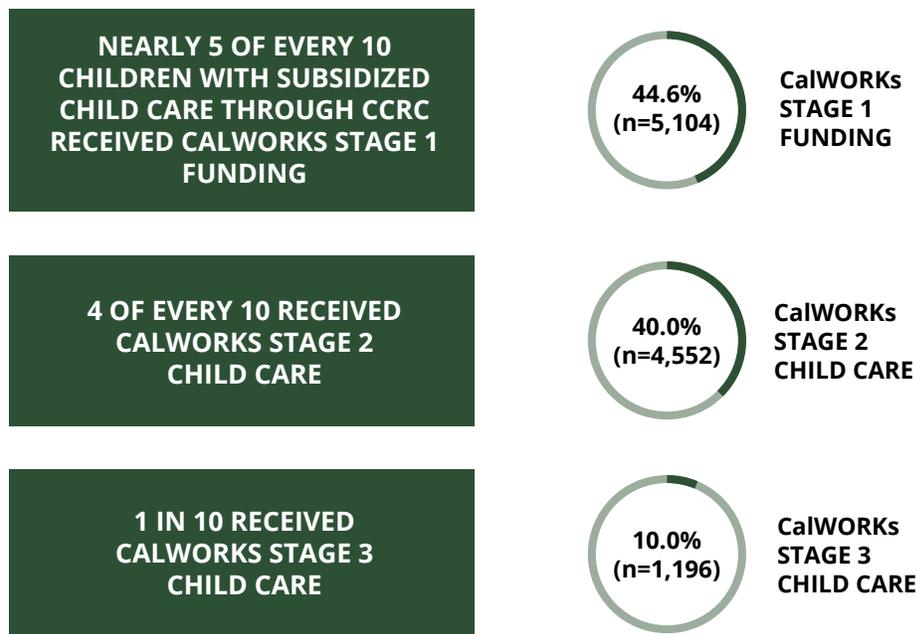
NUMBER OF CHILDREN AGES 0-5 SERVED IN CCRC’S SUBSIDIZED ECE PROGRAMS FROM 2010–2016



Participation in CalWORKs Child Care: CalWORKs Stages 1, 2, and 3 child care are voucher-based child care programs that serve families with children from birth through age 12 (up to age 18 for children with special needs). Current or former CalWORKs (“cash aid”) recipients are eligible to receive assistance with paying for child care if they are employed or participating in a county approved Welfare-to-Work activity, increasing their ability to move away from cash assistance. Care may be provided by a licensed or license-exempt home based provider or in a licensed child care center. Children often move from one funding stream to another.



For example, families who are deemed “stable” (e.g., a participant who is CalWORKs-approved, employed at least six months and/or in an approved Welfare-to-Work activity that has been continuous for at least six months, and who has an approved Stage 1 child care case) may transition from Stage 1 to Stage 2 child care. Additionally, any family whose cash aid is terminated is transferred to Stage 2. As long as the family continues to meet the eligibility and need requirements in Stage 2, the family can remain in Stage 2 for 24 months from the date of their cash aid termination.²⁰ Once families exhaust the 24 month period after their cash aid terminates, they are eligible to be transferred to Stage 3 as long as they continue to meet the eligibility and need requirements of the Stage 3 program.

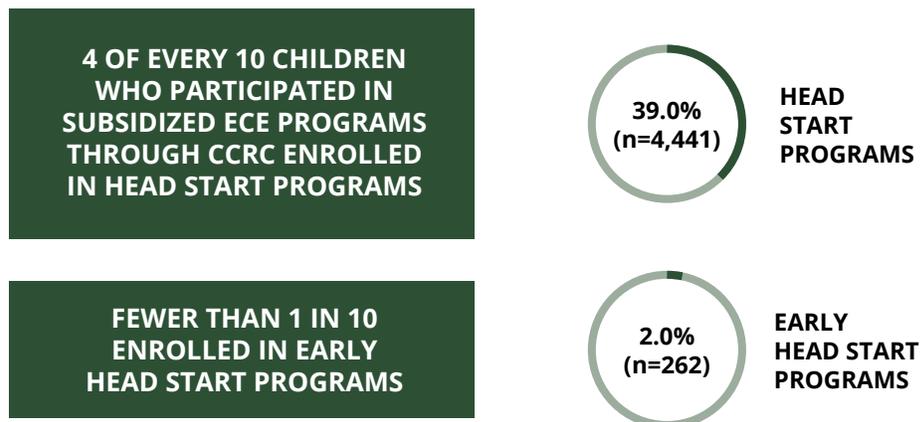


Participation in Early Head Start and Head Start: Early Head Start serves infants, toddlers (from birth up to age 3 years) and pregnant women and their families. Head Start serves families of preschool-age children (from 3 through 5 years). Families with incomes below

²⁰ An additional way families may continue accessing Stage 1 child care is when they choose to have the child care provider provide care in the child’s home. These families may request a waiver to retain these services in their home because there is a medical reason to do so. These families can continue with Stage 1 child care until the end of their 24 months after termination of cash aid.



the Federal Poverty Level or who meet other eligibility criteria such as homelessness, foster children, TANF recipients, etc. are served in these programs. These programs promote school readiness and family well-being by providing learning environments that support children's growth in areas such as language, literacy and social-emotional development. These holistic programs also emphasize the role of parents as their child's first teacher and support the entire family's medical, dental, health, employment, and other needs.



Participation in Alternative Payment (AP) Programs: The Alternative Payment (AP) program is a voucher-based program that serves families with children birth through age 12 (21 years for children with special needs) and is funded by the California Department of Education. Families must meet need and eligibility requirements in order to receive funding to pay their child care providers. The program allows parents to select from licensed center-based, licensed home-based, or license-exempt home-based providers (e.g., Family, Friends and Neighbors) to care for their children.



Participation in Family Child Care Home Education Network (FCCHEN) Programs: The Family Child Care Home Education Network program combines the parent choice model of a voucher program with a quality enhancement component. Eligibility requirements are the same as for the AP program. Parents select from a group of licensed, home-based providers who attend quality improvement activities such as training, coaching, or cohort sessions and receive assessments of their child care environments. Child development assessments, parent conferences and opportunities for parent involvement are also components of this program.



Points of Entry: The entry point for the 11,450 children served in subsidized ECE was predominantly through Stage 1 child care (35%), followed by Head Start (27%), Stage 2 child care (15%), Alternative Payment (5%), Early Head Start (2%), Stage 3 child care (1%), and FCCHEN (0.5%). The most common (62%) age of entry was preschool age (2-5 years), rather than as infants.

Indicators Associated with Participation in Subsidized ECE: Indicators of increased participation in subsidized ECE programs offered by CCRC included: having an African-American or Hispanic mother, having a younger mother, having a mother with a High School Diploma or less, having public insurance at the time of birth, and being born without declared paternity. Also, most were born into families with three or more children except for those served by Stage 1 CalWORKs child care. This is likely due to the fact that this program serves as the entry point for many young families into subsidized ECE programs.

²¹ Group differences were statistically significant at $p < .05$.



Specifically, of all children in this cohort:²¹

- 32.1% (1,835) of children born to an African-American mother and 14.4% (7,311) of children born to a Hispanic mother were served by ECE programs compared with 5.7% (1,892) of White children.
- 27.0% (1,742) of children born to mothers age 19 years or younger were served by ECE programs. In general, the percentage served declines with mother's age.
- 16.6% (7,036) of children were born to mothers who had a high school diploma (HSD) or less, compared with 7.2% (4,087) whose mothers had more than a HSD.
- 19.2% (9,092) of children were covered by public insurance at birth compared to 4.2% (2,333) of children covered by private insurance.
- 13.2% (3,676) of children were born into families with three or more children, more than those born into families with one or two children. This trend was similar for children served by CalWORKs Stage 2 or 3 child care, AP/FCCHEN child care and Early/Head Start. However, a greater percentage of children born into families with one child were served by Stage 1 child care (5.9%) than children born into families with two or three children (4.3% and 4.6%, respectively).
- 28.2% (2,342) of children without declared paternity at birth were served by ECE programs compared with 9.7% (9,107) of children with declared paternity.

CHILD PROTECTIVE SERVICES

More than 1 in 5 (22%) of the nearly 12,000 referrals to the Child Protection Hotline between 2010-2016 were shown to meet the legal criteria of child abuse or neglect required for substantiation of the allegations (n=2,637). 37% of the referrals were investigated and had CPS cases opened (n=4,409), and 18% were removed from their homes and placed into out-of-home foster care (n=2,139).

Points of Entry: Overall, the vast majority of children born in California between 2010 and 2012 and later served by the CPS system (82.6%) experienced their first referral prior to 2 years of age, with more than half (57%) before the end of their first year.



Indicators Associated with Involvement in Child Welfare: Indicators associated with involvement with CPS included: having an African-American mother, having a younger mother, having a mother with a High School Diploma or less, having public insurance at the time of birth, having low birth weight, being born into a family with three or more children, and lacking declared paternity at birth. Specifically, statistically significant²² group differences were found for children referred to CPS:

- 27% (1,545) of children born to an African-American mother and 14.8% (7,517) of children born to a Hispanic mother, compared with 6.8% (2,259) of the White children in this sample, were referred to CPS.
- 25.3% (1,632) of children whose mothers were 19 years old or younger were referred to CPS, a higher percentage than older age groups. In general, older mothers had fewer instances of their children referred to CPS.
- 18.1% (7,646) of children whose mothers had a high school diploma (HSD) or less were referred to CPS compared with 6.8% (3,870) of children whose mothers had more than a HSD.
- 18.8% (8,906) of children who had public insurance at birth were referred to CPS compared with 5.5% (3,032) of children covered by private insurance who were referred to CPS.
- 14.2% (1,057) of children who had low birth weight were referred to CPS compared with 11.5% (10,919) of children born at expected birth weight.
- 18.9% (5,278) of children who were born to families with three or more children were referred to CPS (approximately double the percentage of those born into families with one or two children).
- 28.3% (2,345) of children without declared paternity stated on their birth certificate were referred to CPS compared with 10.2% (9,631) of children who had declared paternity.

Each of these trends were also found for children who had substantiated case status, a case opening, and placement in foster care.

²² Group differences were statistically significant at $p < .05$.



GEOGRAPHIC DIFFERENCES

The characteristics associated with involvement in either system were similar, and included having an African-American mother, having a mother under age 25, having a public insurance at the time of birth, having a mother with 3 or more children, and not having paternity declared. Those indicators were more prevalent among children born in SPA 1 than SPA 2 and the county, as a whole.²³ Specifically:

- 13.9% of infants born in SPA 1 had an African-American mother, compared to 3% of infants born in SPA 2, and 7.6% of infants born in LA County during the same time period.
- 34.3% of infants born in SPA 1 had a mother under age 25, compared to 20.2% of infants born in SPA 2, and 27.5% of infants born in LA County.
- 54.1% of infants born in SPA 1 had public insurance at the time of birth, compared to 43.8% of infants born in SPA 2, and 53.3% of infants born in LA County.
- 34.7% of infants born in SPA 1 had a mother with 3 or more children, compared to 24.8% of infants born in SPA 2, and 28.9% of infants born in LA County.
- 12.3% of infants born in SPA 1 did not have declared paternity, compared to 6.8% of infants born in SPA 2, and 7% of infants born in LA County.

INVOLVEMENT IN BOTH ECE AND CPS

Of the 102,649 children who were born in SPAs 1 and 2 between 2010 and 2012, 2,873 (2.8%) touched both of these systems – ECE and CPS – before age 5.

- A full one-quarter (25.1%) of all children receiving subsidized ECE through CCRC had a history of alleged or substantiated maltreatment. Nearly 500 children (4% of all children born and 16.9% of all children with a history of alleged maltreatment) experienced an out-of-home placement.
- Almost one-quarter (24%) of all children known to the CPS system before age 5 received subsidized child care through CCRC.

Points of Entry: Of the 2,873 children served by both systems, 62% were first served by CPS. Most (83%) of the children age 0-5 years served by both systems were first served as infants and toddlers.

²³ Group differences were statistically significant at $p < .05$.



Of the subgroup (1,078) who entered ECE prior to CPS, 90% entered through CalWORKs-based child care with the majority (58%) entering through Stage 1 child care and 32% entering through Stage 2 or 3 child care. The remainder entered through Early/Head Start or Alternative Payment/Family Child Care Home Education Network.²⁴

Funding Stream: Roughly 1 in 3 children in this cohort who received CalWORKs Stage 1 and CalWORKs Stage 2 and 3 funding had a history of alleged maltreatment (31.4% and 29.5%, respectively), compared to 1 in 5 children receiving AP/FCCHEN and HS/EHS (22.1% and 18.6%, respectively). Out-of-home placement rates among children in those funding streams, however, were relatively consistent (i.e., CalWORKs Stage 1 = 18.9%; CalWORKs Stage 2 and 3 = 14.5%; AP/FCCHEN = 17.3%; and HS/EHS = 17.0%).

DISCUSSION AND IMPLICATIONS

This study began as a proof of concept project designed to demonstrate the potential for linking administrative records across ECE program funding sources and with CPS and birth records for one region of LA County. Study findings demonstrate that it is possible to link birth and CPS records with records for children served by Head Start and Early Head Start, CalWORKs child care and key CDE programs (Alternative Payments and General Child Care).

It should be noted that the patchwork nature of ECE in California makes it quite difficult to develop a community level view of all children enrolled in programs supported through multiple funding streams. In this case, partnership with one of the leading Resource and Referral programs in the state enabled integration of data from most of the key funding streams, providing preliminary information about how families actually use the system, moving across programs over time as family conditions change and children develop. A key limitation of this study is that it does not include information on all children enrolled in subsidized ECE programs in SPAs 1 and 2, only on those enrolled through CCRC.

This initial analysis of involvement in ECE and CPS services for the cohort of children born in the Northern region of LA County between 2010 and 2012 also suggests directions for cross-system planning. The implications of study findings are described briefly below.

²⁴ 1,781 experienced CPS first, 1,078 experienced ECE first, 14 entered ECE and CPS at the same time.



THE LIKELIHOOD OF INVOLVEMENT IN ECE AND CPS SYSTEMS IN THIS SAMPLE WAS ALMOST EQUAL—1 IN 9

The finding that almost the same number of children in this sample touched each of these systems is unexpected. Participation in subsidized ECE programs should be a consideration for most low-income families with working parents. Current estimates show that 31% of children in LA County live in low-income, working families, but only 11.2% of the cohort in this study was connected to subsidized ECE through CCRC, one of the primary service agencies in the Northern region of the county. The proportion of children connected to subsidized ECE is smaller than what might be expected based on population estimates, but these findings reflect only the children who accessed ECE services through CCRC as described above.

However, the prevalence of child protection involvement in this cohort was larger than might be expected. We generally think of child protective services as a relatively small system touching only those families whose children are most at risk of child maltreatment. However, 12% – 1 in every 9 – of all children born in the region received a referral to the LA County Child Protection Hotline for alleged abuse or neglect before the age of 5.

Policy Implications: A collaborative process led by the Policy Roundtable for Child Care and Development and the Office of Child Protection is currently underway to develop a comprehensive financial analysis of the funding landscape for subsidized ECE services in LA County. The results of this analysis should help to answer key questions about availability and utilization of funding for subsidized ECE in communities across the county, including: total annual expenditures across funding streams; unspent resources; opportunities for improving coordination and ensuring efficiencies in the system; and streamlining and maximizing available resources. This information should assist decision-makers in determining next steps toward expanding access and improving quality of ECE services.

At the same time, there is a good deal of work going on under the leadership of the Office of Child Protection. For example, county departments and many community partners are working help families find support and services before they come to the attention of CPS and to diminish the need for intensive CPS services. Increasing ECE resources overall and helping all families find the right child care is another piece of the complex puzzle of supporting families before children are at risk of intensive CPS involvement. The findings suggest that a broad and inclusive perspective will be needed to better meet the needs of



young children and their families in communities throughout the county.

THE SUBSIDIZED ECE AND CPS POPULATIONS HAD A LOT IN COMMON

The families who depend on subsidized ECE programs to enhance child development and/or to provide child care while parents are at work or in school are often thought of as being different from those who are the subject of referrals to the CPS system. Analysis of data from this sample shows, however, that the two groups were similar in terms of background characteristics and having limited incomes and assets.

Policy Implications: Although it is equally important to understand the strength and resiliency of most families, despite their economic situations, administrative data generally do not provide much information on strengths and characteristics that are most likely to help families nurture and keep their children safe, and successfully negotiate our complex health and social service systems in order to do so. Many families with young children who live in under-resourced communities throughout LA County have similar needs for social support, healthy child development, education, employment, and opportunities for community participation and family fun.²⁷ Investing in supporting these families early on will help to prevent child maltreatment and lay the groundwork for healthier communities. These data also reinforce the potential value of trauma-informed supportive learning environments for children and families regardless of CPS-involvement.

CHARACTERISTICS ASSOCIATED WITH SYSTEM INVOLVEMENT WERE MORE PREVALENT AMONG CHILDREN BORN IN SPA 1 VERSUS SPA 2

Even in this initial analysis, it was clear that demographic characteristics indicating family needs for additional support were more prevalent in some areas than others. Specifically, in SPA 1, children were more likely to have mothers under age 25, have an African-American mother, have public insurance at the time of birth, have a mother with 3 or more children, and not have declared paternity.

Policy Implications: The higher risk of system involvement among children born in SPA 1 warrants a careful examination of how ECE and other community-based service resources can be better aligned to address the specific resource challenges of families in the Antelope Valley.

²⁷ These kinds of supports and services are currently offered through the community-based Prevention and Aftercare Networks (P&A) to all community members, as well as to families referred by DCFS. Funded under contract with DCFS, with assistance from the Department of Mental Health and other county departments, there are 8 SPA-based P&A networks and two additional networks serving Asian Pacific and American Indian families countywide.



ENTRY POINTS CAN BE OPPORTUNITIES FOR PREVENTION

CalWORKs was often the first ECE service encounter for children served by CPS. Just as the CalWORKs Home Visiting Initiative established in the 2018-19 California State Budget gives counties the opportunity to help CalWORKs families enroll in home visiting programs, decision makers in LA may want to explore additional supports for the CalWORKs child care program as well as linkage to other services for families who rely on CalWORKs child care.

Policy Implications: As LA County considers expanding its emphasis on family strengthening and support, new partnerships may be needed to support families and prevent the need for involvement with the child protective services system. For example, an innovative partnership between DPSS, First 5 LA, DCFS, and Shields for Families created a pilot project for Family Stabilization households served by the GAIN Region V Office in November 2017. The purpose of the pilot was to strengthen CalWORKs families, promoting early childhood well-being and preventing child maltreatment by connecting families to intensive home visiting and other community-based services. Development of the CalWORKs home visiting program may also provide opportunities for ECE and home visiting partnerships

Early/Head Start also emerged as a common ECE entry point for children, but mostly among those not served by the CPS system.

Policy Implications: This program's access to additional supports for disabilities, mental and physical health, and parenting could provide important – and possibly preventative— holistic supports for children and families. Some Head Start programs may only offer part-day care and therefore assistance in ensuring parents have access to wrap-around child care may be critical to support families who work fulltime or non-standard hours.

THESE SYSTEMS CAN WORK TOGETHER TO CONNECT THE DOTS FOR FAMILIES

Given the overlap in and similarities of the populations served, strengthening the service connections between the CPS and ECE systems could increase enrollment in ECE and help to align eligibility criteria and requirements across the various ECE funding streams; better support children who interact with both systems; and potentially prevent CPS involvement among ECE families. Study findings also underscore the importance of providing trauma-informed services and strengths-based family supports for all families in ECE.



Policy Implications: Many center and family child care home providers are not familiar with recent advances in neuroscience that could inform their work, helping them understand the impacts of trauma on young children and their families, and they may need additional information on local resources that could provide additional support for the families they serve. Training and consultation programs designed to assist providers as questions on child development and community resources arise could improve child care quality and support families during their children’s earliest years.²⁸ For example, the Department of Mental Health (DMH) is exploring the possibility of engaging some of the community-based contractors that provide prevention and early intervention services as providers of training and consultation for local child care providers. Additionally, the new statewide Child Care Bridge program funds the Child Care Resource and Referral agencies to offer training and consultation on Trauma-Informed-Care for child care providers. By proactively addressing individual and family needs, such initiatives could help to prevent initial and subsequent involvement with the child protection system, and also support families and child care providers who care for our young children to enhance child development, strengthen families and increase local capacity to support families and their children.

DATA ALREADY AVAILABLE THROUGH BIRTH AND OTHER ADMINISTRATIVE RECORDS CAN HELP MAKE THE CASE FOR CONNECTING FAMILIES TO SUPPORTIVE SERVICES AND CROSS-SYSTEM COORDINATION

Los Angeles County has a long way to go in ensuring access to subsidized ECE for families, especially for those involved with the CPS system and those at the intersection of the ECE and CPS systems. In that sense, it has not yet fully seized the opportunity to align and improve some of the key systems that deal most directly with young children. With a number of new initiatives being started or already underway, it does have the advantage of existing partnerships, shared purpose and lessons learned from previous efforts. LA has a firm foundation on which to build, and is working to leverage existing resources (including data) to make sustainable progress in creating lasting connections between the ECE and CPS systems.

²⁸ Harris, N. B. (2018). *The deepest well: Healing the long-term effects of childhood adversity*. Boston, MA: Houghton Mifflin Harcourt.

