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ABSTRACT

This booklet summarizes results of a 1975 telephone survey of the 50 states, Puerto Rico and the Virgin Islands to determine state priorities for young children, present problems and future predictions. Presented is a composite of responses from officials in state departments of education and human resources, governors' offices, and governors' legislative liaisons. In most cases, major concerns of governors' offices reflected similar concerns in state agencies. From one to three persons were interviewed in each of the states, Puerto Rico and the Virgin Islands. Officials seemed to concur on certain factors impeding improvement of state performance in meeting children's needs. Included were factors connected with: service delivery systems; minority and impoverished target populations; administrative coordination; staffing shortages; training and public education needs; federal paperwork demands; and data collection deficiencies. Among top priority areas listed by respondents were: abused and neglected children, the handicapped, day care and kindergarten screening for developmental disabilities, upgrading of basic learning skills, and maternal and infant care. (Author/BF)

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STATE TRENDS AND PRIORITIES IN SERVICES FOR CHILDREN AND THEIR FAMILIES

PS 008939

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Foreword

As you read this report, there are some between-the-lines issues that deserve greater visibility because these are the issues that prevent us, as a nation of states, from developing an integrated, comprehensive delivery system of services to children and their families that is both economical and effective.

Our respondents have indicated that in many states there is a business-as-usual level of activity—often more of a burden than existing staff and resources can effectively deal with—with an undertow of federal funding and regulations providing both leadership on the one hand and confusion and frustration on the other. In this melee, it is abundantly clear that the federal government is setting the top priorities for children in the United States. Child abuse, the handicapped, early screening, day care, deinstitutionalization, bilingual education, maternal/infant care, nutrition, and on and on, all owe a great deal of their existence as "priorities" to activity at the federal level and to federal funding.

In our conversations with state officials, it was also clear that the priorities listed here would not necessarily have been the same, or ranked in the same order of importance, had adequate funding been available to meet the across-the-board needs of children. How has this state of affairs come about?

Generally, there seems to be a marked lack of communication and knowledge about

attitudes between state agencies and state legislatures. Liaison, communication, planning and program development are seldom a cooperative effort on the part of those who provide services and those who legislate them. This places the legislature in a position of being buffeted by public passions rather than by the facts and figures that document children's needs. It places state agencies in the position of planning in an uncertain atmosphere, where there is apt to be little or no follow through on the part of the legislature. Planning in some states is often an exercise in futility or a simple rubber stamping of the status quo.

When failure to communicate, plan and lead takes place within state government, state officials are put on the defensive when it comes to communicating with the federal government. It forces, to some extent, the federal government to act in a well-intentioned vacuum. But federal priorities, while undoubtedly legitimate, are not arrived at systematically and they are far from comprehensive.

The ad hoc approach of the federal government in meeting the needs of children is compounded by the strong tendency of federal agencies to bypass the states and work directly with localities. This tendency prevents state planners from coordinating existing services and, in fact, promotes additional fragmentation, duplication and overall inefficiency. One can easily envision

the vicious circle: lack of state planning, due in part to the short federal lead time for planning of new federally mandated programs; federal intervention at the local level; further deterioration of state planning reinforcing additional federal intervention, etc.

The above comments are not intended as criticisms of the states or the federal government but as observations of our current national predicament. They, too, have the purpose of once again reminding the reader that this is a cycle that can and should be broken if the needs of children are to be met. The ability of the states to plan—to strengthen their overall capacity to meet the needs of children—has been amply demonstrated. In a bare-bones outline, state capacity building has included, in a number of states, the following elements:

- Formulation of an approach, normally through the establishment of a task force, a commission, an interagency council, etc.
- Conduction of a needs assessment to provide basic facts and figures that document existing needs for day care, bilingual education, health and diagnostic screening, special education, etc.
- Development of a consensus on the part of state decision makers, parents and concerned citizens about what needs to be done, in what order and by whom.
- Follow through to obtain needed funds, legislation and programs.

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- Establishment of a permanent state mechanism to update information, to respond to new needs and, in short, to assure that the state continues to provide the necessary leadership for planning and coordinating child and family services and programs.

As states continue to develop their capacity to plan and coordinate children's services, they will be increasingly able to carry on a reasoned dialogue with the federal government on the needs of children. Federal support for state capacity building has been demonstrated, but a greater commitment is needed. The increasing sophistication of state planners must be recognized and incorporated into a much greater effort at the federal level to meet the needs of children in a sustained, comprehensive and responsive fashion.

A solid alliance of federal and state government, working in behalf of children, is needed and deserved by both levels of government and by the nation's children. While the forging of such an alliance will require forbearance on the part of both state and federal leaders—and the "getting there" is not likely to be half the fun—the end result of support for our future—our children—will more than justify the effort.

*E. Robert LaCrosse
Director, Early Childhood Project
Education Commission of the States*

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Introduction

Identifying children's needs to assure their healthy development during the crucial years from birth through age 12 is only part of the challenge of the 1970s. Efficient, equitable, cost-effective delivery systems must be available to provide the follow through to meet those needs.

This report by the ECS Early Childhood Project summarizes the results of a telephone survey of all 50 states, Puerto Rico and the Virgin Islands. The survey was conducted in the fall of 1975 to determine what the

priorities for young children were, some of the major barriers to meeting those priorities and predictions of future trends.

This report represents a composite of the responses from officials in state departments of education and human resources, governors' offices and governors' legislative liaisons. In most cases, the major concerns of governors' offices reflected similar concerns in state agencies. From between one and three persons in each of the 50 states, Puerto Rico and the Virgin Islands, were interviewed.



Structural/Procedural Concerns

Before turning to the programmatic areas of greatest concern, it is helpful to review those concerns that tend to cross programmatic lines. In interview after interview, state officials pointed to the following factors as impediments to improving the overall performance of their state in meeting children's needs.

- **The Service Delivery System**

In 46 states, service delivery systems, in the eyes of those who work with or within them, need to be made more efficient and cost effective. Uneven population, inadequate public transportation and vast differences between urban and rural needs make service delivery to young children a tough challenge in a majority of states.

- **Target Populations**

Additional services are required in two-thirds of the states to meet the needs of migrant, refugee, non-English-speaking and impoverished children. New program approaches are required to cross language and cultural barriers.

- **Coordination**

With as many as seven separate departments serving children and families in some states, the fragmentation and duplication of services continues to be a major concern. Lobbying, advocacy and simple communication, along

with statewide comprehensive planning for children, are among the major casualties of existing systems in many states.

- **Jurisdiction**

Although questions about departmental jurisdiction go hand in hand with the coordination problem described above, there are some exceptions. In states with Indian reservations and/or military bases, local autonomy stands as a barrier to the provision of child and family services.

- **Staffing**

The rush to obtain federal dollars in programmatic areas has led to staffing shortages in state agencies. Particularly in the area of child abuse and neglect, increased case loads, resulting from improved reporting laws, have not necessarily been offset by either state or federal funds for additional staff. Similar problems, although often less extreme, have been experienced in the areas of early screening, special education and day care licensing. In many states, the result has been service cutbacks (fewer children and families served) and watered-down services.

- **Training**

A trend toward improving the quality of existing children's programming has highlighted the need for additional training programs for in-house staff, the community at



large and all child care providers in order to assure that children will receive the highest quality care possible.

- **Public Education**

Lack of public awareness of the complex needs of children was mentioned by virtually every state as a major barrier to program implementation. Sometimes this takes the form of misinformation on an issue relating to children, while other times it is indicative of public apathy, which is harmful to lobbying efforts in behalf of children. Every respondent who said his or her agency had a good rapport with the legislature believed it was the result of placing a heavy emphasis on educating legislators on the issues and supplying them with good persuasive data.

- **Federal Regulations**

In spite of recent trends to reduce and simplify federal paperwork, many respondents listed "paper work" resulting from federal regulations as an obstacle to improving state delivery of services to children.

- **Inadequate Data**

The majority of states do not yet have efficient data collection mechanisms in operation and, as a result, are unable to accurately assess the needs of young children—particularly in rural areas.

Programmatic Priorities and Trends

Our survey respondents listed 42 separate priorities, reflecting the wide range of concerns, since 1970, that constitute the day-to-day responsibilities of states to their youngest citizens and their families. We have selected the top 14 priorities mentioned, in an effort to emphasize areas of greatest need. The number to the right of each listed priority indicates the number of states or territories that mentioned it.

1. The Handicapped Child (49)

This category includes emotionally disturbed and physically or mentally handicapped children. Federal legislation combined with court orders have resulted in the enactment of legislation in 39 states. In more than one-half of the states, special education mandates are involving the public schools with preschoolers for the first time.

Frequently mentioned concerns included: costs, including the need for additional staff and training; the unevenness of population distribution and the difficulty of providing programs in isolated school districts; and lack of understanding on the part of parents as to the purpose of screening programs.

Future trends that were listed included: the inclusion of gifted children in special education programs, programs for the 0-5 age

group, more emphasis on screening for all children (not just Medicaid-eligible children), community-based treatment for emotionally disturbed children, adoption of handicapped children and day care for handicapped children.

2. The Abused and Neglected Child (49)

The mentally, physically or sexually abused, or neglected child is included in this category. Also an area of heavy legislative activity, 31 states and territories have passed legislation during the past five years in an attempt to achieve compliance with federal requirements (i.e., P.L. 93-247, the Child Abuse Prevention and Treatment Act).

Staff and funding shortages, however, have made it difficult for state agencies to handle the additional caseloads resulting from the improved reporting systems authorized in updated legislation. Inadequate foster care settings or other community-based facilities makes placement extremely difficult for abused/neglected children who cannot be returned to their homes.

Future trends indicated continued emphasis on conforming with federal requirements; more involvement from departments of education, in terms of both the detection and prevention of child abuse and neglect; and a

greater emphasis on day care, family counseling, parent education and homemaker services as preventative measures.

3. Day Care (39)

The emergence of child abuse and neglect as a major issue, in addition to the increased number of working mothers and single-parent families, have highlighted the need for day care in a majority of states. The school-age "latch-key" child with working parents is a major concern. Developmental versus custodial day care is also a major area of debate.

Licensing is also a major issue. According to a separate ECS survey,¹ 11 states passed new licensing laws and 24 have amended existing laws during the past five years. During the same period, approximately 40 states revised licensing regulations and, in all but 6 states, public hearings are held periodically to review regulations on a regional or statewide basis.

An obstacle, however, to increased funding for day care was the reported reluctance of some legislators to authorize programs that might "take the child away from the home." A mother's right to work is still not accepted

by some legislators. They, of course, are reflecting the attitudes of their constituents. In this area, it was frequently noted that staffs were often too limited to be able to follow through on licensing regulations once they were finalized.

In terms of future trends, respondents mentioned more day care in rural areas, for latch-key children and for infants; extension of the school lunch program into group day care homes; and a greater emphasis on licensing and regulation.

4. Screening (33)

Although the federal Early Periodic Screening, Diagnosis and Treatment program (EPSDT) is the major program here, the area concerns all programs that are aimed at the detection, diagnosis, treatment and prevention of developmental disabilities. Early screening has not been a high legislative concern due to a general lack of public awareness of the importance of early detection and, in part, to fiscal conservatism.

The barriers facing advocates of early screening for all children are vast: inadequate staff; reluctance of the medical profession to deal with federal red tape and to work in isolated, rural communities; inadequate transportation to bring children to screening centers; and public apathy.

¹ *Day Care Licensing Policies and Practices: A State Survey July 1975*, Report No. 72 (Denver, Colo.: Education Commission of the States, August 1975).



Many respondents, however, were optimistic about future legislative support, state leadership and increased public concern leading to increased efforts in this area. At least one state is involving transportation officials in an effort to increase the accessibility of screening programs for all children.

5. Kindergarten (31)

Thirty-one states have initiated, or continued to phase in, state-funded kindergarten. In some states where kindergarten has traditionally been funded at the state level, the emphasis has switched from offering kindergarten on a local option basis to mandatory statewide kindergarten. ("Mandated" kindergarten does not mean that children are required to attend kindergarten; it simply means that school districts are required to offer it.)

The phasing in of kindergarten has been a major legislative activity in a majority of the states and is expected to continue as a major concern until programs are available in all or most school districts. Reluctance to fund kindergarten programs appears to be based on a mix of attitudes and fiscal realities ranging from an inability to recognize the need for schooling prior to the first grade to a concern that existing elementary/secondary programs remain inadequate and that, therefore, new programs cannot be justified.

However, the increasing support for early education has resulted in optimism on the part of many respondents. Many indicated that they expected increased funding to permit the continued phasing in of statewide programs and a greater emphasis on mandatory rather than permissive legislation. Respondents felt that funding would also make early education programs possible for the preschool-age child in some states.

6. Basic Skills (28)

Included in this priority are all efforts to upgrade basic skills, including math, writing and reading. Reading improvement is a particular concern with more than one-half of the states indicating participation in the federal Right to Read program. Changes in teacher training and a shift to individualized instruction were mentioned as primary areas of emphasis in improving basic skills development.

7. Foster Care (26)

Increased awareness of child abuse and neglect and the current trend toward deinstitutionalization has placed a heavier emphasis on all aspects of foster care. Of particular concern is the training of foster parents, subsidized foster care, interstate placement of foster children and alternatives to the costly foster care arrangements that now are in common use. Also mentioned was

the need to periodically review all placements to avoid prolonged institutionalization.

8. Maternal/Infant Care (20)

Care for high-risk mothers and infants, nutrition programs for pregnant women, midwife programs, prenatal care, programs for unwed mothers and teenage parents, control of infectious diseases, well baby clinics and eradication of the sudden infant death syndrome are included in this category.

Insufficient funding is a major concern in this area. Health department staffers, who often bear primary responsibility for these programs, have found it difficult to compete with other education/human resources programs for funds. Listed as priorities were an increase in programs/funding for high-risk mothers and infants, more programs for unwed mothers in cooperation with departments of education, increased emphasis on nutrition education for parents and parents-to-be, and increased efforts in rural communities.

9. Nutrition (19)

This closely related priority focuses on improving the nutritional value of the food eaten by young children and pregnant women. Heavy emphasis is being placed on improving public awareness and on making

nutrition a regular part of the school curriculum.

10. Career Education (19)

At the elementary school level, promoting awareness of the world of work and possibilities for participating in it has been a major priority. Respondents predicted a continued awareness and an emphasis on the elementary school as a foundation for vocational/career education at the secondary level.

11. Parenting (18)

The recognition that adults sometimes need help to become good parents has made family-life education a major priority in many states. Part of the current interest in parenting stems from the increase in the incidence of child abuse and neglect, resulting in a relatively limited understanding of the concept of parent education. Parent education should be a support system for all parents who wish it, not merely a means to correct parental deficiencies. However, a lack of public awareness is the major barrier to the statewide implementation of parenting programs.

Survey respondents indicated that there would be an increase in the awareness of the value of parenting courses and that school systems would continue to expand family-life education studies for their students.

12. Adoption (18)

The concerns mentioned here were very similar to those described under the foster care heading. Specifically, the concerns most frequently noted were: interstate placement, adoption subsidies and the placement of handicapped and older children. The number of infants available for adoption is relatively small, the major reason cited being the impact of legalized abortion.

Future predictions included an increased emphasis on adoption of handicapped children, more subsidized adoption legislation and more discussion of interstate compacts for placement of children.

13. Deinstitutionalization (17)

Finding alternative treatment programs close to the home environment is a major activity. Large state-affiliated institutions are being closed and community-based treatment centers tested as possible alternatives.

Revision of juvenile codes to remove "status offenders" from the juvenile delinquent category is also a thrust of the

deinstitutionalization movement, and at least 10 states have revised, or are in the process of revising, their codes.

These trends are expected to continue. Some of the more specific predictions: increasing emphasis on home-based, community-based care; continued revision of juvenile codes; redefinitions of status offenders; day treatment centers for formerly institutionalized status offenders; in-house training of staff members responsible for referrals; and periodic reviews of institutionalized children to prevent prolonged institutionalization.

14. Bilingual Education (13)

States with Spanish-speaking populations, including migrants, have traditionally been concerned with bilingual education and continue to be. A growing number of states expressed concern about the need for better communication with Indian populations and with the refugees from Southeast Asia. Funding for bilingual/bicultural programs is provided, in large measure, by the federal government rather than by the states.

Postscript

States wishing assistance in planning and coordinating program priorities may contact E. Robert LaCrosse, director of the ECS Early Childhood Project, for further information.

Also, for planning and coordinating information about abused and neglected children, contact C. D. Jones Jr., director of the ECS Child Abuse Project.

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