

OHIO'S SCHOOL READINESS GOAL:

Starting Early to Close the Achievement Gap

*Summary of Findings from the
Financing High-Quality Early Care and
Education for Ohio's Children Project*

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A) Introduction

The early years of a child's development are critical to establishing a foundation for success in school. Recent research into brain development has created a great deal of excitement as it has revealed the importance of early relationships and experiences to building social, emotional, intellectual and academic skills that individuals rely on throughout their lives. Preparing young children to acquire early literacy and other fundamental academic skills and abilities is now seen as critical to achieving the high educational expectations we have for Ohio's students.

At the same time, there is a growing concern about the quality and equity of early care and learning opportunities experienced by many children and their readiness to enter kindergarten. Many of the 60 percent of Ohio children who are five years or younger and in child care on a regular basis are in programs of substandard quality (Quality Counts 2002). The growing emphasis on high educational standards and achievement for all students and the increasing attention to the importance of early literacy development both lead to questions of whether we are meeting the diverse needs of all of our young children in ways that adequately prepare them for academic success. Educational disparities start before kindergarten – low-income children are found disproportionately in the less formal, less enriched settings, which have been found by research to yield lower school readiness and lower achievement throughout the school years. Higher goals for educational achievement, including boosting early literacy, require new investments in teachers, schools and special programs with an expected payback in the latter years of students' education.

Ohio early care and education (ECE) expenditures for 2001 were about \$615 million, of which \$338 million was the federal contribution and \$277 million was state funds. The major components of the state funding included:

- \$99 million for state Head Start;
- \$20 million for public preschools;
- \$78 million for preschool special education;
- \$79 million for Child Care Development Fund (CCDF) state match and TANF;
- \$1.5 million for child care licensing.

For context, Ohio's 2002 K-12 public education expenditures are about \$15 billion; the current \$615 million expenditures for ECE are about 4 percent as large as the K-12 spending. The number of Ohio children in the preschool population (birth through age five) is about 44 percent as large as the numbers of those children who are of school age (ages six through 18).

Early Childhood Education as a Funding Strategy

Investment in early childhood education has been shown to be one effective strategy for closing the academic achievement gap for low-income children. Studies also have shown a great return of monetary benefits of providing high-quality early care and education to



low-income children. These returns to government, to program participants and their mothers, and to crime victims have exceeded the cost-per-child by a factor of 4-to-1. A more conservative estimate of benefits, limited to government savings from the reduction in education services needed, taxes from increased employment, reduction in Medicaid and welfare costs and reduction in criminal justice cost still showed benefits of high-quality interventions for low-income exceeding costs by a factor of more than 2-to-1 (Karoly et.al., 1998; Barnett, 1995).

Healthy Development. Research has shown the importance of a child's early years to lifelong development and well-being. High-quality research (Karoly et.al., 1998; Barnett, 1995; NICHD Early Child Care Research Network, 2003; National Research Council, 2000) has tracked children for as long as 20 years and found that higher quality ECE settings and interventions lead to better cognitive skills immediately and through the critical elementary school years, better social interaction, higher graduation and employment rates and lower rates of involvement with violence and delinquency.

Supporting Work. The nature of family life for those with very young children has changed dramatically over the last 30 years. The proportion of Ohio families where both parents, or a single parent, work outside the home has doubled to more than 60 percent of all families with very young children. These shifts have had a profound impact on how preschool-age children are cared for as well as the nature of the workforce. These demographic changes require transformations to how government supports those young children.

Providing Opportunities. There are growing disparities in the development and well-being of children across the state, with many of these differences reflected in early life opportunities. Some children entering kindergarten today are more advanced and prepared than ever before, while others appear to lag further behind. The disparities in K-12 outcomes start with disparities in access to high-quality early learning experiences.

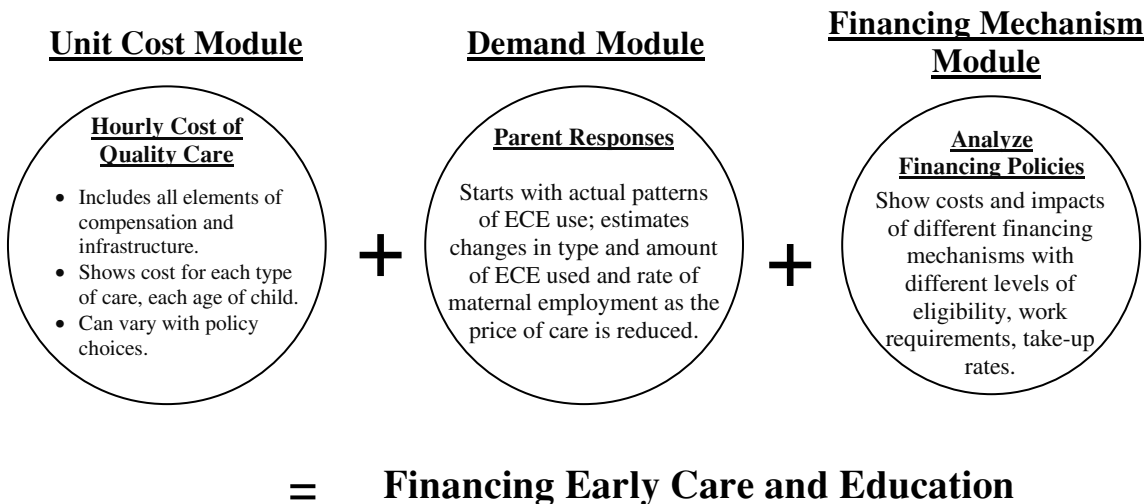
B) The Ohio Early Care and Education Finance Project

ODE joined with Richard N. Brandon and Sharon Lynn Kagan, two of the nation's premier experts on social policy and child care, to put a price tag on what it would cost to create a system of universal access to high-quality early care and education, for children from birth to age five in Ohio. The project explored many options that might help low- and middle-income parents afford the cost of high-quality ECE, using everything from tax credits to public subsidies to inclusion in future K-12 spending. The goal of this project is to help state policy makers understand alternative costs and potential cost savings, as well as impacts of financing a system of high quality early care and education based on state-specified policy parameters. Ohio's participation in this effort provides a rational way to arrive at the true costs of early care and education, which makes for better policies, programs and with an ultimate outcome of better early learning experiences for Ohio's youngest citizens. It allows policy makers and stakeholders to consider difficult tradeoffs and arrive at the most cost-effective approaches to assuring access to early learning for all Ohio children.



Project Objectives

- To specify in detail, the key policies leading to high-quality early learning are staff qualifications and compensation; child/adult ratios; investments in professional development; and monitoring and promoting quality through regulatory and governance structures.
- To estimate the hourly cost-per-child of a high-quality system of early care and education based on alternative policy specifications.
- To estimate the total costs to the state of high-quality ECE by incorporating parental responses in cost estimates, including changes in type and amount of ECE used and levels of maternal employment that yield additional tax revenues.
- To compare alternative financing approaches that apply lessons from other U.S. social benefits (K-12 and higher education, health, retirement, transportation, housing) and consider the impact of these different approaches on budgetary costs, equity of funding for different population groups and affordability of high-quality early learning opportunities for both lower- and middle-income families.



C) High-Quality ECE for Ohio’s Children: Policy Specifications and Analysis

1) Key Features of the ECE Market in Ohio

The early care and education market, nationwide and in Ohio, is characterized by a high degree of parent choice among a variety of caregiving options and settings. (Parents choose many different types of care for many different reasons). Infants and toddlers are more likely to be in less formal care arrangements, with Family, Friends or Neighbors (FFN), or licensed Family Child Care (FCC). Children from three to five years of age are



more likely to be in center-type care, including Head Start and pre-Kindergarten programs (Brandon et.al, 2002; Maher et.al, 2003, Brandon, 2003). The Human Services Policy Center (HSPC), with sponsorship from ODE and the Cleveland Foundation, conducted a survey of ECE utilization patterns in Ohio (HSPC, Survey Highlights, 2002).

- Chart 1 shows the percent of Ohio children in each type of care.
- Chart 2 shows the average (median) hours per week that Ohio children of each age spend in each type of ECE.

The importance of these charts is that center type and licensed family child care account for a small percent of the time very young children spend away from their parents. However, for children age three to five years, center care becomes dominant and children average 30 hours a week in care, with half spending more than that amount of time. Achieving good child development outcomes and the right start for educational success therefore requires policies that address the quality and affordability of each type of ECE setting.

Chart 1: Percent of All Non-Parental Hours in Each Type of Setting by Detailed Age Groups (Survey of Ohio Parents)

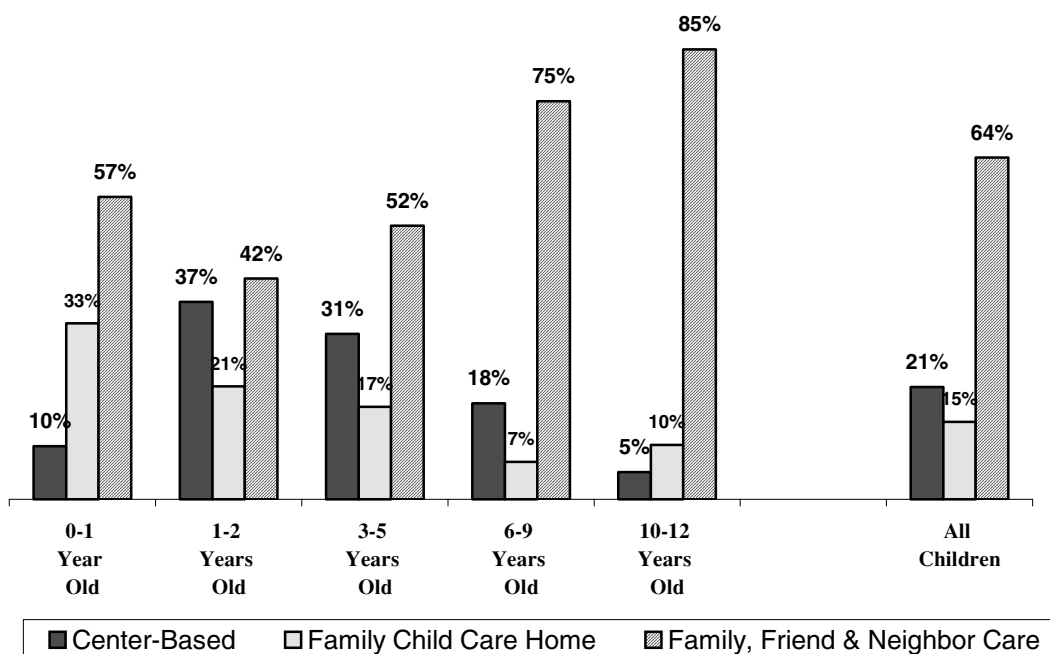
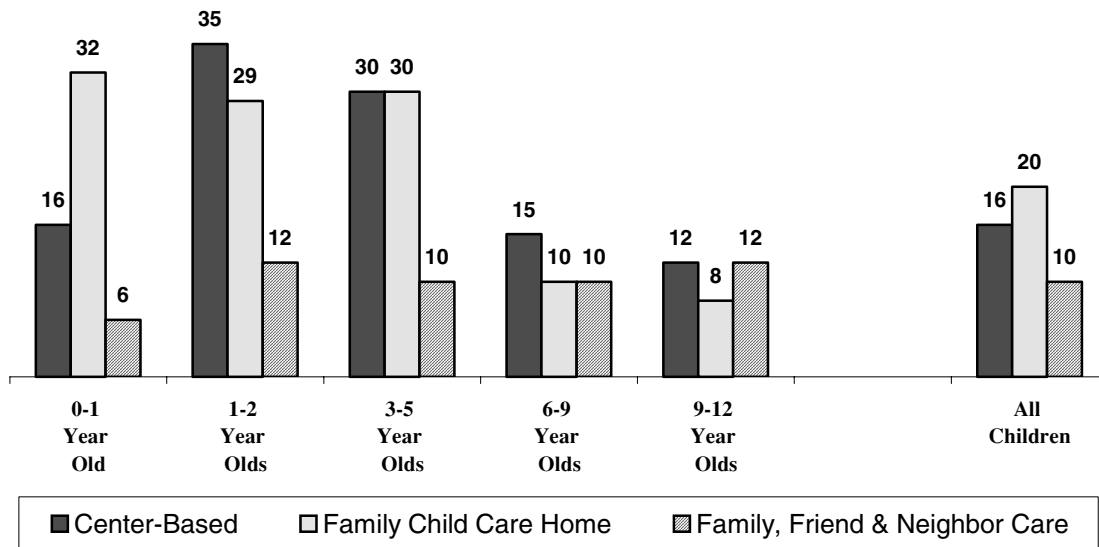




Chart 2: Average Hours per Week in Each Setting by Detailed Age Groups (Survey of Ohio Parents)



Key to Types of Care: *CB* = Center-Based Care including Head Start. *FCC* = Family Child Care, usually licensed. *FFN* = Family, Friend & Neighbor Care, license-exempt.

2) Hourly Costs of High-Quality ECE

a. Moving the Market Toward High-Quality ECE

A central proposition in our analysis is that high-quality ECE requires sufficient compensation to recruit and retain qualified staff. In addition, central to our approach is a recognition that parents will choose among different sectors of ECE (centers and preschools, FCC and relative care) for many reasons and that achieving quality means making appropriate investments in each sector. The Advisory Council agreed with the recommendations of a nationally recognized expert panel (Kagan et.al, 2002) that it would be desirable to set ECE teacher compensation equivalent to that for elementary school teachers of comparable qualifications, but to also include staff with lower formal credentials and commensurately lower pay, particularly for younger children.

Some key policy specifications for high-quality ECE agreed to by the Ohio team were:

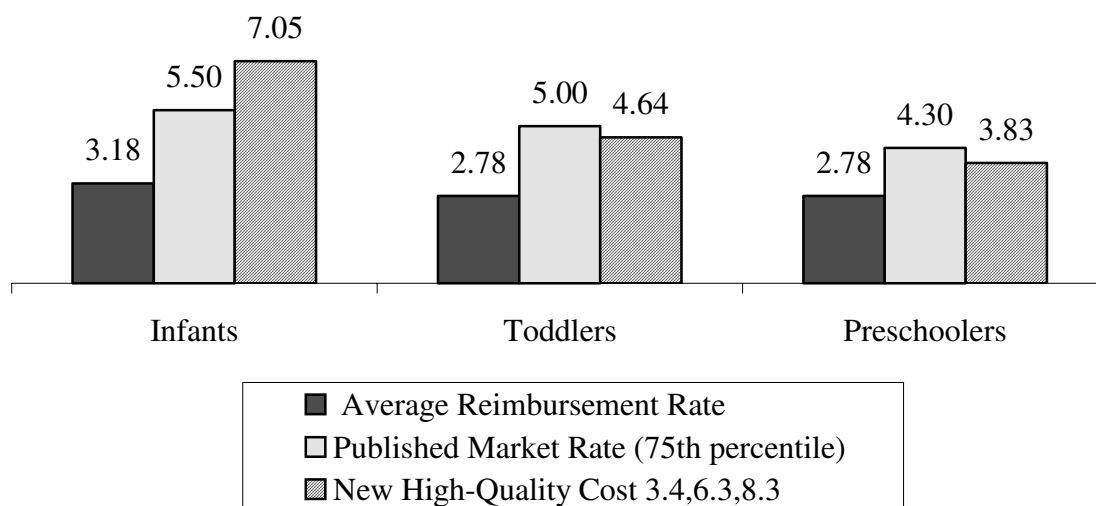
- Average child-to-adult ratios will be: 8.3-to-1 for children from three to five years of age; 6.3-to-1 for toddlers, and 3.4-to-1 for infants.



- For preschoolers, 59 percent of teachers will have bachelor’s degrees, 25 percent will have associate’s degrees; for toddlers, 44 percent will have bachelor’s degrees; for infants, 31 percent will have bachelor’s degrees.
- Salaries will be linked to those of elementary school teachers, with a starting bachelor’s degree level teacher paid the same in ECE or elementary school; benefits will be at the level provided for public school teachers.
- A professional development allotment of \$1,800 per staff member will be provided, with an assumption that during the initial periods, about half of staff members will participate.
- About \$1,600 a year per child will be provided for non-personnel costs.

Chart 3 shows what the hourly costs resulting from these policies would be, and compares them to current public and private payment rates in Ohio.

**Chart 3: Hourly Costs For Ohio
Current vs. High-Quality Options**

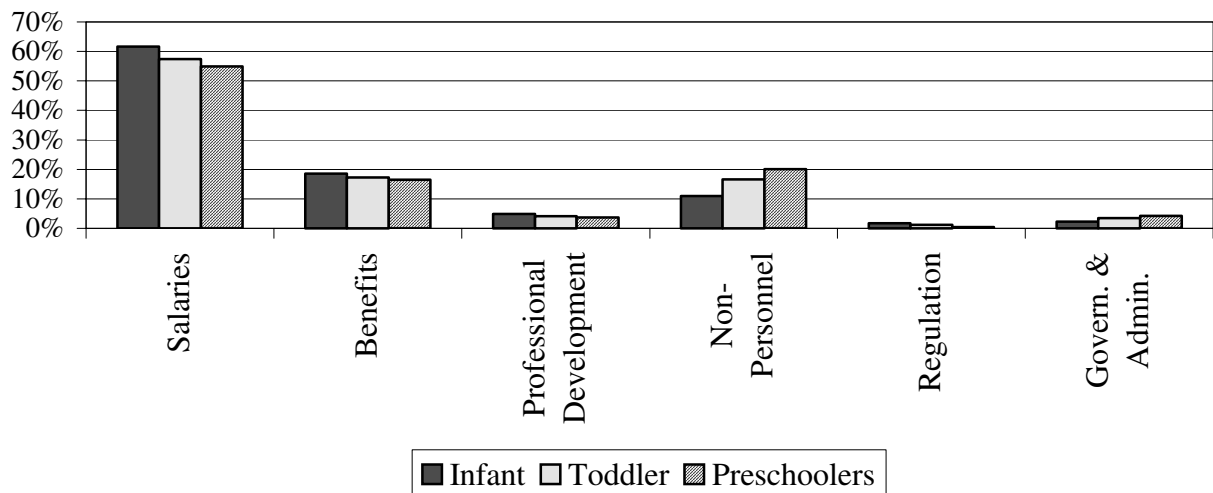


b. Components of the Cost of High-Quality ECE

The Human Services Policy Center (HSPC) model builds the total cost of high-quality ECE from the bottom up, including both personnel and non-personnel costs to the direct provider. We also include systems-level costs for promoting and assuring quality, including professional development, regulation, governance and administration. Chart 4 shows that while investments in professional development, regulation and governance are essential to effective use of funds, they represent only about 10 percent of the hourly costs. An important lesson from such other systems as K-12 education and health care is

that it is important to embed quality promotion in hourly costs so that it is funded commensurate with benefits.

Chart 4: Components of High-Quality Center Costs, Ohio Specifications



c. Appropriate Services for Children with Special Physical or Emotional Needs

The Ohio team asked HSPC to explore a special center care rate for children with special physical or emotional needs, essentially lowering the child-to-adult ratio by one and paying for additional training for lead teachers and directors in centers with concentrated numbers of special needs children. Itinerant consultation services would be provided to centers with a small percentage of such children.

d. Relationship of Family Child Care (FCC) and Center Care Rates

Since we know that parents' choice of type of care is sensitive to prices, it is important to examine what these recommended hourly costs imply for the ratio of center-to-FCC prices. The Ohio team recommended equivalent salaries based on qualifications, but a lower set of qualifications for FCC providers than for center teachers. Basing FCC payments on an average child-to-adult ratio of 5-to-1 would allow adequate quality and stabilize the relationship between FCC and center rates.

e. The Need to Assist Middle Income Families to Afford High-Quality ECE

These hourly costs of high-quality ECE are beyond the ability of average working families in Ohio to afford without help. For example, if a toddler were in full-time center care at a cost of \$5 an hour, the annual cost would be \$10,400, equivalent to more than a quarter of the average after-tax income of Ohio families with children.

f. Policy Options for Helping Families Afford High-Quality ECE



HSPC's exploration of other major U.S. social benefits revealed that they are all composed of combinations of certain financing mechanisms. These include strictly income-related benefits, assistance offered on a non-income-related basis through the provider of service, tax preferences to families or employers and combinations of the above (see Brandon et.al, 2000). Therefore, the Ohio team decided to explore several of these approaches to help families. The following are the final options explored.

- *Baseline*: HSPC replicated the costs to the state for services under the current Child Care Development Fund subsidy system, which has an income-related benefit with a maximum eligibility of 1.85 federal poverty level (FPL). Costs for other policy options were then estimated as a ratio change to current policy.
- *A hybrid system with a 25 percent of high-quality cost, non-income-related subsidy to providers, combined with an income-related voucher for the remaining costs*; for the income-related component, the co-payment schedule replicates current Ohio co-pays up to current eligibility limits, then has a straight line reduction to zero benefit at maximum eligibility. Only the voucher component is applied for payments to relatives, since they do not bear the provider transition-to-quality costs experienced by centers or FCC.
 - *Maximum eligibility set at 400% FPL* (covers two-thirds of Ohio children). This option is the standard against which other policy considerations are compared.
 - *Maximum eligibility set at 800% FPL* (covers 95 percent of Ohio children)
- The same hybrid subsidy system as (2a) above, but with the current *parental work requirement removed* as a condition for receiving a subsidy.
- *Infant care stipend for parents*. The same hybrid subsidy system as (2a) above, but with employed parents of infants offered the option of a stipend of 75 percent of the FCC rate to remain home with their child.
- *A hybrid tax credit and income-related voucher*: combines a refundable tax credit for center and FCC care with an income related voucher for all types of care. Maximum eligibility set at 4FPL; same co-payment schedule as in (2a) above.
- *Free care for all*: modeled as a 100 percent subsidy regardless of income for all children in all types of care.

g. Moving From Hourly to System-Wide Costs of High-Quality ECE

While hourly costs of ECE are a critical building block, they do not reflect the full cost to the state of a high-quality system of care. The key elements of developing a system-wide cost impact include:

- Estimating current use (in hours per week) of different types of care by children in households representative of the state population on key characteristics.
- Applying the relevant hourly costs of high-quality ECE for the relevant type of care and age of child to current utilization patterns;
- Specifying alternative policy options that will assist parents to afford care, and estimating the reduction in price experienced by parents under each policy scenario. Key parameters of policy scenarios include the maximum income level at which

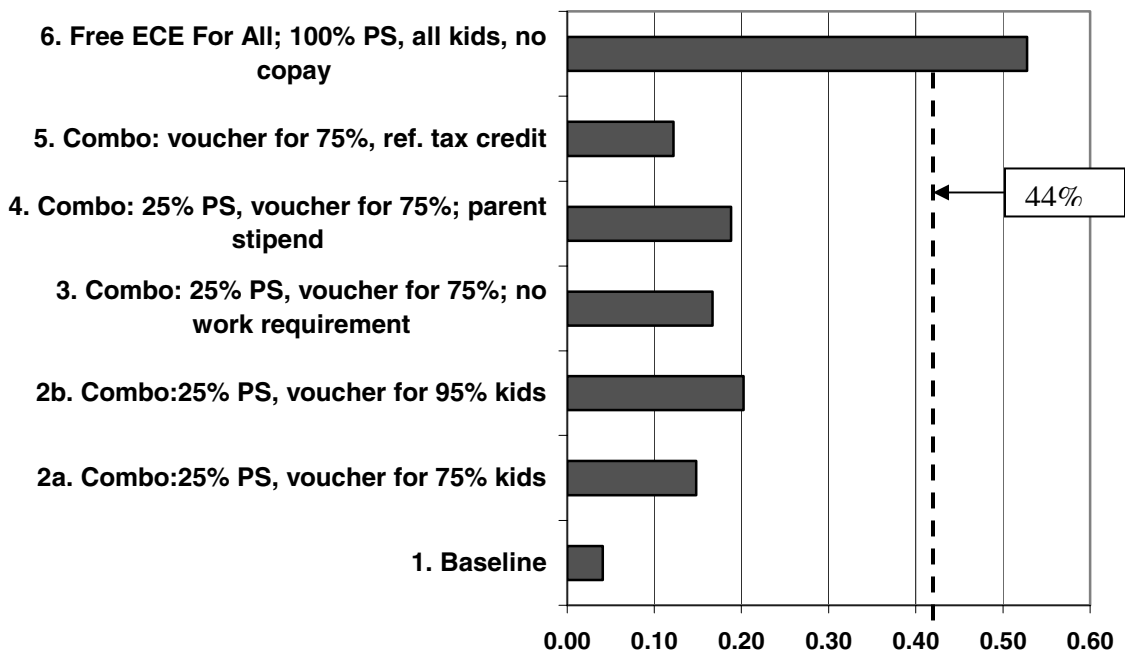


families will be eligible for assistance, the co-payment schedule, whether there will be a direct subsidy to providers, and whether there will be tax credits offered in addition to direct payments for care.

- Estimating the changes in the types and amounts of care parents are likely to use as a result of increased financial access (reduced price), and adjust cost estimates to reflect these changes in demand.
- Estimating the likely increases in paid work because of the greater financial access to high-quality ECE and the amount of federal and state taxes likely to be generated by the increase in paid work.

Chart 5 shows the total costs of the various options specified by the Ohio Task Force, expressed as a percentage of total K-12 public education spending. For this comparison, both ECE and K-12 costs include federal, state and local contributions. While the illustrative “Free ECE for All” option would make a major increase in total education spending, the options specified by the Ohio team are much more moderate. Their costs are equivalent to 15-20 percent of K-12 spending and could be achieved by offsetting other expenditures or phasing-up an increase. It should be noted that in Ohio, the population of children aged birth to five years is 44 percent as large as the population of children aged six to 18 and that the ECE costs are year-round, not just nine months. The costs presented here reflect both the increases in demand from greater affordability of high-quality ECE and the revenue offsets due to greater employment and earnings of mothers.

Chart 5: Total Costs of High-Quality ECE as a Percentage of K-12 Spending

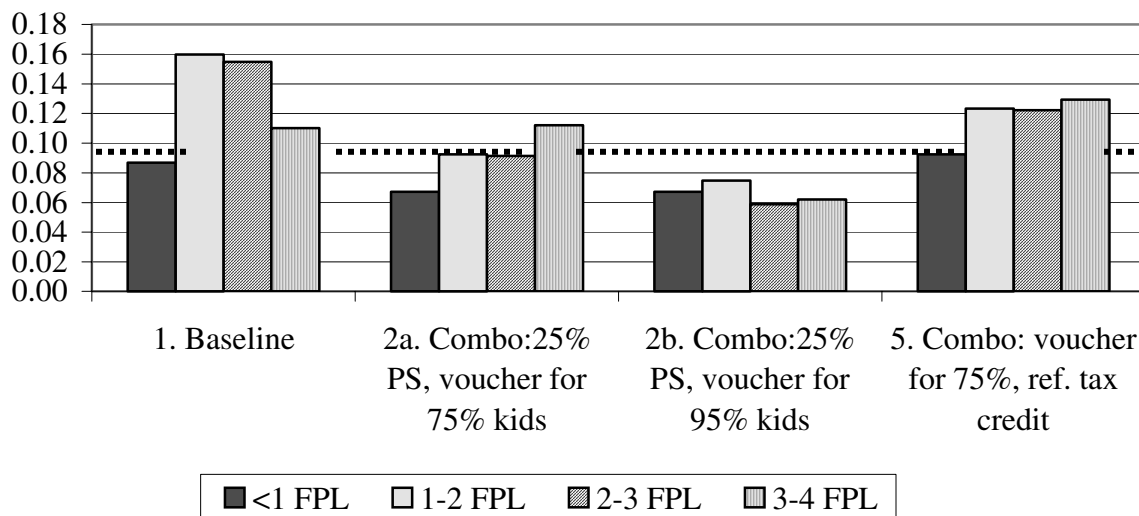


Key: PS = Parent Subsidy, ref. = Refundable



Chart 6 shows that the combination of a 25 percent of cost provider subsidy and an income-related voucher successfully addresses the issue of middle income affordability. Covering 95 percent of children greatly improves affordability, but at the cost of greater budget impact and targeting a smaller percent of funds to low and moderate income children, who are at greater risk.

**Chart 6: Family Payments Net of Subsidy as a Percentage of Family Income
Current Baseline vs. Ohio Options**



Key FPL = Federal Poverty Level

Chart 7 compares the various options with regard to the three major criteria: budgetary impact, affordability for all families and targeting funds to the most at-risk children. While several of the options produce desirable results, none is the best on all three criteria. Ohio policy makers will therefore have to either face some difficult tradeoffs or make appropriate adjustments to some of the options. For example, moderating the increases in staff salaries while limiting eligibility to 75 percent of children would improve affordability and reduce budgetary impact, while maintaining targeting of funds.



Chart 7: Comparison of Ohio ECE Financing Policy Options

	Budget Impact: % K-12 Spending	Affordability: Cost as % Middle Income	Targeting: % to Low-Moderate Income (<30K)
Baseline Voucher	4	15	100
PS+Voucher, 75% of Children	15	9	76
PS+Voucher, 95% of Children	20	6	57
PS+Voucher, no work requirement	17	9	78
PS+Voucher, parent stipend	19	-----	78
Voucher + Tax Credit	12	12	81
Free ECE for All Children; no copay	53	-0-	48

Key: PS = Parent Subsidy

Key Policy Findings for Financing Early Learning in Ohio

The HSPC analysis showed that it is possible to design a partially subsidized early care and education system that provides high quality at prices parents can afford. This sliding scale approach costs far less than a kindergarten, everyone-attends-for-free approach, with a total budget cost of one-fifth to one-third as much as the no-parent payment approach.

The approaches considered by the Ohio Task Force are akin to a K-12 financing approach in which there is a foundation payment on behalf of every child without regard to income, then additional assistance to parents with low incomes or children with disabilities.

Parent-payment schedules have been developed that would leave parent net costs affordable at low-, moderate- and middle-income levels, as well as for more affluent families.

Hourly rates for children with special needs would be 25-35 percent higher than overall rates, but would only add five to six percent to the total budgetary cost.



Universal access to high-quality early learning for children age birth to five could be added with additional spending equivalent to a 15-20 percent increase to total public education spending.

Costs could be phased-in or reduced by setting less ambitious salary goals, gradually scaling ECE teacher salaries up toward elementary teacher salaries, and/or being phased in by age of child.

D) Considerations for Phasing-in High-Quality Early Learning Finance

1) Compensation and ratios


An important feature of the high-quality system of ECE being considered here is that it requires moving the entire ECE market, not just public reimbursement rates. That is, it is intended that a mixture of regulations and financial incentives will lead to more highly qualified and adequately compensated staff for all providers that parents of all income groups are using. Given the current low levels of education and pay for ECE staff, it will take a long time to change the mix of professional qualifications. It also will take time to establish the support and tracking mechanisms to assure that providers and teachers make the necessary changes. One aspect of phasing that is automatically required, therefore, is to phase-up reimbursement rates gradually, and tie the changes in rates to specified improvements in staff qualifications and competency.

Tiered reimbursement mechanisms may not achieve this objective, since there is a strong possibility that they will simply reward the providers who are currently hiring the best staff and paying the highest salaries and benefits. While rewarding the current best providers may seem fair, it does not accomplish the goal of system-wide improvement. Rather, we must establish a policy that gradually requires all providers to upgrade qualifications and compensation. It is the level, not the breadth of change that should be phased-in. This could be accomplished in a tiered reimbursement system by focusing on changes in quality as well as levels, and increasing the quality requirements for the lowest tiers year-by-year.

2) Coverage of age and income groups

It should be noted that the dynamics of phasing-in staff qualifications and compensation on a system-wide basis interact with the implementation of policies to cover middle-income families. If the financial incentives are available only for those providers serving low-income families, the quality in the overall system cannot be increased (because without help, middle-income families would be hard pressed to pay the estimated increases in cost required to achieve high-quality ECE. Providers, therefore, would not be able to enact rate increases or compensate their staff as projected.)

Phasing-in by income also presents a challenge to shifting public perception of ECE from a welfare program for low-income children to an education program for all children. If, as in New York, the early phases of implementation reach only low-income children, it is



still likely to be perceived as welfare-oriented. This perception could limit both its acceptability and later, its ability to encompass more groups. A potential middle ground is to cover some, but not all, middle-income children in early phases. Thus, most options specified by the Ohio team provide coverage up to four times the federal poverty line (FPL), or 75 percent of children. If the initial phase covered about 50-60 percent of the children, up to about 2.5-3 FPL, then the program could be considered middle-income, and families up to 4 FPL could be covered in a later phase. The phasing-in of middle-income assistance can be linked to the phasing-up of staff qualifications and compensation – the higher the hourly cost of ECE, the greater need for assistance to assure that middle-income families can afford ECE. When qualifications and compensation are at an intermediate stage between current and desired levels, then fewer families will require assistance.

Phasing-in by age of child has positive and negative aspects. Serving only older or younger children of a broad income range in the first phase preserves the perception of universality regarding benefits to all income groups. It may, however, foster the bifurcation of services to children from birth to age three and children who are four to five years old, ignoring the benefits to families and siblings of keeping these services integrated, and that affordability of high-quality ECE is more difficult for younger families with younger children, who tend to have lower incomes, yet are faced with higher prices.

3) Participation rate

The cost estimates are quite sensitive to the rate of participation by potentially eligible families. HSPC has estimated a 66 percent participation rate, based upon analysis of current benefit participation rates and judgments about the accessibility of the options considered. There is not much analytic literature on participation rates in ECE subsidy systems. What we have gleaned from studies by HSPC and others of participation in other social benefit programs is that participation is largely a function of policy choices, rather than completely inherent in the benefit structure. That is, if a public agency desires a high rate of participation in a program, it can be achieved through investments in outreach and the attitudes and behavior of case workers. Note the high participation rates in programs like Medicaid, where medical providers assist families to obtain coverage, and the Earned Income Tax Credit, where a concerted outreach effort over a period of years greatly expanded public awareness and acceptance of the benefits.

One way that Ohio can phase-in costs, therefore, is to modulate its investments in outreach, keeping them minimal in early years as policies and procedures are developed, then expanding them in future years as additional funding becomes available. It would be necessary, of course, to do this in a way that does not undercut general public acceptance of making the investment in universally financed ECE.



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Project Team – *Brilliance in the development of a comprehensive approach to financing a system of early care and education.*

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