





What is Public Policy and What is its Connection to the Budget?

The Governor, the Legislature and the Board of Elementary and Secondary Education have the joint responsibility of setting public policy for the children of Louisiana. Public policy for children includes courses of action, regulatory measures, laws, and funding priorities to address their needs.

Ideally, public policy will be a principled guide to address the needs of children and ensure they mature into productive citizens. It should identify a need and direct resources to meet the need in a way that will assure the desired outcome. Good public policy will provide for investments in evidence-based programs that have been shown, through studies, to provide desired results and deliver a real return on investment.

The executive budget is the primary public policy document for the state. Laws and resolutions that identify needs and responses will not be effective if funding is not provided.

As elected officials, the children of Louisiana are your constituents. The future of Louisiana requires elected officials to make children their top priority to guarantee a vibrant Louisiana in the future.

The term, Evidence-Based Practice (EBP), originated in the medical community in the 1990s. An EBP is the current best practice that has been subjected to strong scientific research and interpreted using a very narrow set of methodological criteria. Since the 1990s, the EBP concept has been adopted in many other fields, including child and family services.

Dear Elected Officials, Candidates for Office:

Serving in public office is both a demanding and rewarding experience. As an elected official or candidate, you are no doubt being contacted by the many special interest groups that participate actively in the political process. There is one group of constituents that do not have political action committees and representatives attending your campaign events – the children of our state.

Children represent 25% of the population of Louisiana and have very specific needs that demand your attention. Financing programs to meet their needs has a high return on investment. This Platform will help you identify needs and gaps in services, understand evidence-based practices and allow you to determine where to provide scarce State dollars for maximum return on investment (ROI).

This resource was developed with the assistance of child well-being experts who have extensive knowledge of both research and practice from the organizations listed below. An initial draft of the document was widely circulated among child-serving agencies and community leaders across the state for review. It was vetted by numerous people and continues to gather support and comment.

- Agenda for Children (www.agendaforchildren.org)
- Louisiana Budget Project (www.labudget.org)
- Louisiana Center for Children's Rights (www.laccr.org)
- Louisianachildren.org (www.louisianachildren.org)
- Louisiana Partnership for Children & Families (www.louisianapartnership.org)
- National Association of Social Workers-Louisiana Chapter (www.naswla.org)
- One Voice Louisiana (www.uniteonevoice.org)

We welcome your questions, opportunities for meetings, and to assist in any way in your decision making as you address the needs of our children.

The following summary has highlights of eight specific areas affecting the children of Louisiana. For greater detail on a particular topic and additional recommendations you may refer to the comprehensive version of Louisiana Platform for Children. The full publication can be found on the websites of the organizations listed above. For more information, email platform@louisianapartnership.org.



Physical Health and Development

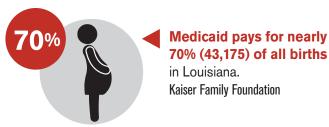
All children require health providers from many disciplines to ensure that they develop healthy bodies, minds, emotions, and attitudes to prepare them to be competent and contributing adults. This is best accomplished through a medical home *that addresses both acute health needs and appropriate childhood development*. In this approach, a partnership evolves between patients, clinicians, medical staff and families to assure access to preventive, health promoting, therapeutic, and rehabilitative medical, mental health, and dental care.



Since 1990, infant mortality in LA has decreased by 32% from 11.8 to 8.2 deaths per 1,000 live births. However, despite such improvement LA still ranks 47th in infant mortality among the states. KIDS Count

731,114 children are enrolled in Medicaid, representing 52% of the total Medicaid population. LA DHH





In the past 20 years, low birth weight increased by 15% from 9.4% to 10.8% of all births.

Louisiana ranks 49th for low birth weight infants.

KIDS Count



Policy Recommendations — Physical Health and Development

To ensure children have access to needed health services, the following steps must be taken in the Medicaid Program:

- Create accountability measures, other than health plan reporting, to ensure children receive access to needed acute care and appropriate immunizations and to determine that required developmental screens are performed as required.
- Require that health plans (medical and dental) demonstrate that they have provided a minimum of one preventive encounter per year for each child assigned to them.
- Establish a reimbursement floor for physicians that is no less than 100% of Medicare in order to ensure adequate participation in the program.
- Reinstate mobile dentistry to reach chronically underserved children and establish accountability measures to ensure children are actually being treated and not just assigned to a dental provider.
- Assure that there is aggressive outreach so that all eligible children are enrolled and assigned a medical home.

To ensure healthy environments for children, the following programs are recommended:

- Expand the Nurse Family Partnership program providing licensed trained nurses to work with high-risk first-time mothers throughout pregnancy and continue to follow the children until age 2 while ensuring all eligible families have the option to receive this service.
- Expand school-based clinics as a proven way to reach underserved children, address mental and physical health needs, and keep them in school.
- Develop programs addressing childhood obesity to prevent the onset of adult chronic diseases.
- Ensure that parenting education curricula include emphasis on developmental issues for children.
- Encourage efforts to assure that all new mothers have information about the benefits of breastfeeding and the support needed to be successful.

Early Care and Education

Parents are their child's first teacher. Nurturing caregiving in the first three years of life impacts academic achievement and social relationships during childhood, through adolescence, and into adulthood. A child's brain doubles in size in the first year and by age four, it has reached 90% of its adult volume. Early experience determines the quality of the brain architecture and either builds a sturdy or a fragile foundation for future learning, health, and overall well-being.

Nearly 70% of Louisiana's children age 5 and under have both or their only parent in the workforce and are regularly cared for in a setting outside the home for some part of the day.





KIDS Count

Over the last five years, the Child Care Assistance Program – the major source of child care funding for low-income working parents of infants and toddlers – has been cut by almost 60%. LA DCFS

Policy Recommendations — Early Care and Education

- Increase state investment for early childhood education, with particular focus on increased funding for infants and toddlers (6 weeks through 3 years of age).
- Require legislative oversight on the transfer of early education programs including the Federal Child Care Development Fund (CCDF) from Department of Children and Family Services (DCFS) to Louisiana Department of Education (LDE) to ensure that more children have access to affordable, high quality child care, and that changes in licensing provides safe, quality care for all children, not only those in publicly funded programs.
- Mandate that small home-based child care businesses be licensed and regulated, ensuring they meet basic health and safety standards.
- Ensure continuation of the long-established network of Child Care Resource and Referral organizations that support parents in finding care and promote the development of quality child care.
- Enact criminal penalties for the illegal operation of child care businesses. Current law allows for civil penalties of \$1000 per day but fines have rarely been assessed.

Social/Emotional

The impact of early childhood social-emotional problems are reflected in child and family distress and suffering or interference with learning and play, problematic relationships with parents, caregivers, peers, and siblings, and future mental health problems. A significant number of children will develop disabling mental health problems like PTSD, anxiety, mood problems, disruptive behavior disorders, and relationship disorders as a result of trauma from natural disasters, community violence, domestic violence, neglect and physical and sexual abuse. Without adequate mental health care, problems can escalate and contribute to school disruptions, substance abuse and juvenile delinquency.

In 2011, the state contracted with Magellan Health Services to provide behavioral health services for 50,000 children. Magellan was to address the need for additional providers and was paid on a fee-for-service basis. New service providers have not materialized requiring out-of-state placements for children who need psychiatric residential treatment. In November 2014, the state announced that the five Bayou Health Medicaid providers will take over behavioral health services on a capitated basis. This change will result in a predictable cost for these services.

Between 9.5% and 14.2% of children between birth and five years old experience social/emotional problems that negatively impact their functioning, development and

functioning, development and school readiness.

National Center for Children in Poverty



Policy Recommendations — Social Emotional

- Reinstate funding for the Early Childhood Supports and Services (ECSS) program, eliminated in 2012. The program provided a coordinated system of screening, evaluation, referral services and treatment for infants and very young children. Recognized as a model program for addressing the social-emotional needs of children, the program previously operated in 13 of the 64 parishes. Operation of ECSS in each region of the state would allow Medicaid reimbursement for covered services.
- Monitor the transition from Magellan to the five Bayou Health Companies to ensure that children receive needed behavioral health services with a quality assessment process in place to prevent gaps in services.

- Maintain a specialized program for children at-risk of out-of-home placement, guarantee that short-term respite, crisis stabilization, and youth and parent support services are available to all participants, and allow Bayou Health private provider agencies to offer these services in order to expand access to services and reduce the costs for out-of-home care.
- Fund and support evidence-based practices and programs, such as Children's Advocacy Centers, that serve 64 parishes without any state funding.
- Expand the mental health component of the Nurse Family Partnership Program and specialized infant mental health programs for children in foster care.

Developmental Disabilities

Children (birth to 22 years old) with developmental disabilities require quality services in their homes to be active members within their families and communities. Louisiana must support and fully fund an individual and family-centered, comprehensive system, with a coordinated array of culturally competent supports and services designed to promote self-determination, independence, productivity, integration, and inclusion into the community for individuals with developmental disabilities.

The eligibility criteria for Early Steps changed in 2012, resulting in 1100 fewer children receiving services. LA DHH





Early Steps provides services for 4,335 children,

from birth to three years, who have developmental delays or a medical condition likely to result in a delay. LA DHH

Policy Recommendations — Developmental Disabilities

- Appropriate adequate funds for Early Steps to restore eligibility criteria.
- Appropriate adequate funds for new home and community-based waiver slots for people with developmental disabilities and for the state-funded Individual and Family Support and Flexible Family Fund programs.
- Increase the appropriation for home and community based waivers for people with developmental disabilities

- to provide for a \$2.50/hour provider rate increase for direct support.
- Ensure quality and compliance with Act 833 of 2014 providing alternative pathways for certain students with disabilities to graduate from high school.
- Ensure that parenting education programs and statesupported training for child care include topics specific to caring for children with developmental disabilities.

Child Welfare

Child abuse and neglect and child maltreatment cross all socio-economic lines. In fiscal year 2015, there were 8,515 validated cases of child abuse in Louisiana. Child maltreatment exists in a complex web of family interactions and research suggests co-morbidity is present with issues related to domestic violence, substance abuse, and medical/behavioral health issues. Louisiana's Department of Children and Family Services (DCFS) investigates reports of abuse that occur within the family.

Child welfare encompasses child protection investigations, in-home services to families with a valid case of abuse/neglect, out-of-home placement (foster care) and adoption. The Louisiana Children's Code and federal legislation reinforce the service model with state statutes and regulations providing legal guidance and protection. Children placed out-of-home and in foster care are wards of the state; in essence, the state is the child's legal parent.

Total estimated lifetime financial costs associated with just one year of child maltreatment is \$124 billion. CDC





1 in 4 children in the US experience some form of maltreatment.

CDC

In fiscal year 2015, there were **8191 children in the state's custody** during the course of the year.

LA DCFS



Policy Recommendations — Child Welfare

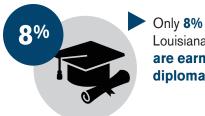
- * Integrate systems that currently operate parallel to one another—mental health, substance abuse, domestic abuse, homelessness, and health care. These systems must be enhanced to effectively develop a service continuum focused on safety for children.
- Recruit, train and retain a skilled and culturally competent child welfare workforce to ensure child welfare cases are managed professionally, in the child's best interest, with reasonable caseloads, according to nationally established standards to allow child welfare workers to provide competent and effective services.
- * Restore funding for a program for youth aging-out-of foster care (at age 18).
- Provide sufficient funding for foster care and adoption services to ensure quality needed services to these atrisk children, youth and families.
- * Continue state support for the local Court Appointed Special Advocate (CASA) programs that support and speak for children in the foster care system.

Juvenile Justice

One thousand youth are held in Louisiana's juvenile prisons each year costing up to \$424 per day; nearly 60% are adjudicated for offenses which involved neither violence nor weapons; 47.5% of youth released from Louisiana's custody return to custody within three years; and only 8% of children in Louisiana's juvenile prisons earn high school diplomas. Meanwhile, Louisiana is one of only nine states that prosecutes all 17 year olds as adults, excluding them from the juvenile justice system entirely. Prosecuting children as adults increases recidivism by as much as 34%, according to a study by the Centers for Disease Control. Pushing children into the criminal justice system hurts our future workforce, and it's bad for public safety.

A safer, smarter, and more cost-effective juvenile justice system starts with investing in programs and practices that are proven to work – including finding age-appropriate ways to hold youth accountable; serving youth in their own homes, rather than in jails or prisons, wherever possible; providing the right support to vulnerable youth in custody and in the community; and ensuring that every child is treated fairly and with dignity.

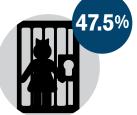
Nearly 1,000 youth are held in Louisiana's juvenile prisons each year – at a cost of up to \$424 per day.
Louisiana Legislative Auditor



Only 8% of children in Louisiana's juvenile prisons are earning high school diplomas. CDC

47.5% of youth released from Louisiana's juvenile justice custody return to custody within three years.

Louisiana Office of Juvenile Justice



Policy Recommendations — Juvenile Justice

- Raise the age of juvenile jurisdiction to 18, joining 41 of Louisiana's sister states.
- Right-size juvenile prisons, ensuring youth are not imprisoned when they do not represent a threat to public safety. Imprisoning nonviolent youth increases recidivism, wastes valuable public resources, and damages their prospects for graduating from high school and entering the workforce. Limit the duration of sentences and implement data-driven policies to ensure juvenile sentencing is calibrated to objectively determine the risk of recidivism and severity of the underlying offense.
- Develop pathways out of the juvenile justice system by providing high-quality legal counsel as a guide through the maze of the justice system.
- Provide high-quality education for youth in custody, putting them on track to post-secondary education and career success.
- Insist on accountability for conditions of confinement.
 Louisiana's short-term detention centers and group homes are decentralized and inadequately monitored.
 Enforce quality standards and insist on best practices in programming and supports for out-of-home youth.

Family Economic Stability

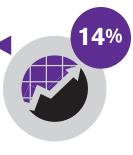
Louisiana has the nation's third highest poverty rate in 2013; one in five Louisianans or 888,019 people (19.8% of the population), lived below the Federal Poverty Level last year falling well above the national rate of 15.8%.

Even worse for the children, Louisiana had the fourth-highest (28%) child poverty rate in the U.S. in 2013 resulting in children being much more likely than adults to live in poverty. In some regions of the state, 4 in 10 children live below the federal poverty level, and many more live in households that are only slightly above the poverty level.



"In 2000, 9% of children lived in census tracts where the poverty rate of the total population was 30% or more.

That figure rose to 14% for the period from 2009 to 2013." **KIDS Count**



The federal poverty definition consists of a series of thresholds, commonly referred to as a percent of poverty, and is based on family size and composition. The 2015 Poverty Guidelines show that a family of two (one adult, one child) is counted in the poverty category if the annual income is below \$15,930.

Family Size	100%	150%	200%
2	\$15,930	\$23,895	\$31,860
4	\$24,250	\$36,375	\$48,500

healthcare.gov

Policy Recommendations — Family Economic **Stability**

- Expand Medicaid coverage under the Affordable Care Act to working-age adults below 138% of the federal poverty line.
- Establish a state minimum wage of at least \$10 per hour that is indexed to the consumer price index.
- Increase the state Earned Income Tax Credit to at least 7% of the federal credit.
- Restrict predatory lending by capping annual interest rates for small-dollar loans at 36%.
- Expand the Equal Pay for Women Act to include all workplaces, not just state employees.

Louisiana's Budget for Children

In fiscal year 2008-09 Louisiana's budget realized an increase of 37% (adjusting for inflation) and state government began running large annual surpluses. While some new money was invested in children's programs, the surplus dollars generated by posthurricane reconstruction activity also provided the impetus for the two largest tax cuts in Louisiana history. In 2007 and 2008 the Legislature cut taxes on middle and upper-income households, which reduced Louisiana's tax base by roughly \$800 million per year. Then, the national economy cratered, the hurricane recovery slowed and oil prices fell from a record high of \$140 per barrel to \$30 per barrel in the span of a few months. The combination of these factors – an economic slowdown and two massive tax cuts – had profound effects on the budget, reducing the state general fund revenues by 31% over the next three years.

The Louisiana Legislature addressed the shortfalls in three ways that affected children: making cuts to various programs, swapping out state dollars for federal money ("means of finance substitutions"), and filling gaps with non-recurring "one-time" revenue from various sources. Louisiana does a better job than most states of tracking the money that's spent on children's programs. The Children's Budget, which tracks spending on children of all ages across state agencies, and the Early Childhood Systems Integration Budget, which focuses on children 5 and under, provide valuable information for policymakers and the public. Unfortunately, making this information available has not been enough to stave off cuts during budget downturns.

Programs once funded with a mix of state and federal dollars are now financed entirely with federal money, and are smaller as a result. The child-care assistance program (CCAP) which helps low-income families pay for child care while working or attending school was substantially reduced. The program once served more than 38,000 children from low-income working families, who received an average of \$2,870 annually to defray the cost of child care. Five years later, the program served fewer than 15,000 children, and the average benefit dropped to \$2,354 per year even as the cost of care had risen along with inflation. That translates to a 68% drop in total funding and almost 60% fewer children served over the past five years. And this is only one example.

Overall funding for children's programs dropped nearly 12% from 2010 to 2015. **ECSIB**



Policy Recommendations — Louisiana's Budget for Children

- Eliminate or minimize the use of non-recurring dollars for ongoing expenses in state government, including for programs that support children.
- Commit to a balanced approach to solving future budget shortfalls that includes new revenues.
- Implement the recommendations in the April 2014 Legislative Auditor's report on child welfare services, including reducing caseloads to the levels recommended by the Child Welfare League of America.
- Fold the LA-4 pre-K program into the Minimum Foundation Program for public schools, to free up federal block-grant dollars for other early care and education needs.

- Require each budget unit in state government to provide an annual report to the Legislature by Feb. 1 of each year that details the following:
 - Amount of federal block grant or entitlement funds available to the state that is not being accessed and the reason for that action;
 - Amount of federal competitive grant funds that are not being sought through grant applications and the reason for that action;
 - Amount of federal competitive grant funds that are applied for but not awarded;
 - Amount of unused federal funds at the end of the federal fiscal year for the last five periods that have been returned to the federal government.



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