



New York State Profile of Young Children in Deep Poverty

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The National Center for Children in Poverty (NCCP) is a non-partisan public policy research center at Columbia University's Mailman School of Public Health. Founded in 1989 with endowments from the Carnegie Corporation of New York and the Ford Foundation, NCCP is dedicated to promoting the economic security, healthy development, and well-being of America's low-income children and families. Using research to inform policy and practice, the center seeks to advance family-oriented solutions and strategic use of public resources at the state and national levels to produce positive outcomes for the next generation.

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Overview

Young children whose families face economic hardship are more likely than their peers in financially secure families to experience a range of adversities that may greatly limit their opportunities for success as adults. Parents of these children show a higher prevalence of health and mental health problems and often reside in communities where they do not feel safe or supported.¹ Young children in poverty have higher rates of chronic health conditions such as asthma and diabetes, and a greater incidence of developmental delays, learning difficulties, and behavior problems.² Poverty's harmful effects even extend to changes in parts of the brain that govern language, memory, and behavioral control — capacities that are critical for school success.³

While these conditions pose long-term risks for the healthy development and school success of all young children in poverty, early adversities appear even more severe for children in deep poverty. Families in deep poverty have an income below 50 percent of the federal poverty level (FPL). For a single mother with two young children, deep poverty means surviving on an annual income of less than \$9,669.⁴ A recent analysis found that blood levels of lead, a toxin linked to serious learning and behavior problems, were three times higher for children in deep poverty compared to children in poverty.⁵ The parents of children in deep poverty had higher rates of self-reported health and mental health conditions and parenting stress than parents of children in poverty, and were less likely to see their child as “flourishing” (i.e., showing behaviors such as smiling, curiosity, and affection). Other research suggests that families in deep poverty often fail to access public benefits for which they are eligible, such as Supplemental Nutrition Assistance Program (SNAP) and Temporary Assistance to Needy Families (TANF), leaving them without even basic supports.⁶

Our knowledge about the most effective forms of assistance for families with young children in deep poverty is limited. However, available

research suggests that these families may need more intensive and individually tailored supports, even within certain existing evidenced-based programs. For example, a national evaluation of Early Head Start found that a subgroup of families with characteristics associated with deep poverty (unemployed parents with the lowest education levels) did not show the positive outcomes, such as child language gains and improved parenting, found for other families.⁷ Among families that dropped out of an Early Head Start home visiting program, similar factors linked to deep poverty — low maternal education and high residential mobility — were key factors that predicted drop-out.⁸ In a study of young mothers' participation in the Nurse-Family Partnership Home Visiting Program, the poorest and least educated mothers and their children had the worst outcomes despite having relatively high attendance rates.⁹ One program, Child First, described in a later section, has shown positive outcomes with young children and parents in deep poverty by offering a range of two-generation supports and interventions tailored to family needs.¹⁰

This profile offers information about young children, age birth to nine, living in deep poverty in New York State, and about policies that could support their healthy development and success. The profile presents the following:

- » Information about the prevalence and characteristics of young children in New York State who are living in deep poverty
- » Intelligence about how state policies are currently supporting the well-being of young children and families in deep poverty, and opportunities to strengthen these policies
- » Recommendations for two-generation policies that could improve the education and health outcomes of children in deep poverty, while helping parents achieve education and employment goals, providing families with a pathway out of poverty



Prevalence and characteristics of young children in deep poverty

Figure A shows that 11 percent, or 226,359 children, under age nine live in deep poverty in New York State. Most, 68 percent, are part of single-parent families, and slightly over half are in households headed by one or more parents lacking employment (Figure B). Figure B also highlights other circumstances that pose risks for the early learning and development of young children in deep poverty, including:

- » low parental education (lack of a high school degree), affecting about one-third of children
- » living in a household with no English speakers, affecting 16 percent of children
- » having a large family (four or more children), affecting 29 percent of children
- » residential mobility (changing residences one or more times in the last 12 months), affecting 18 percent of children
- » having a teen mother (at time of child's birth), affecting 5 percent of children

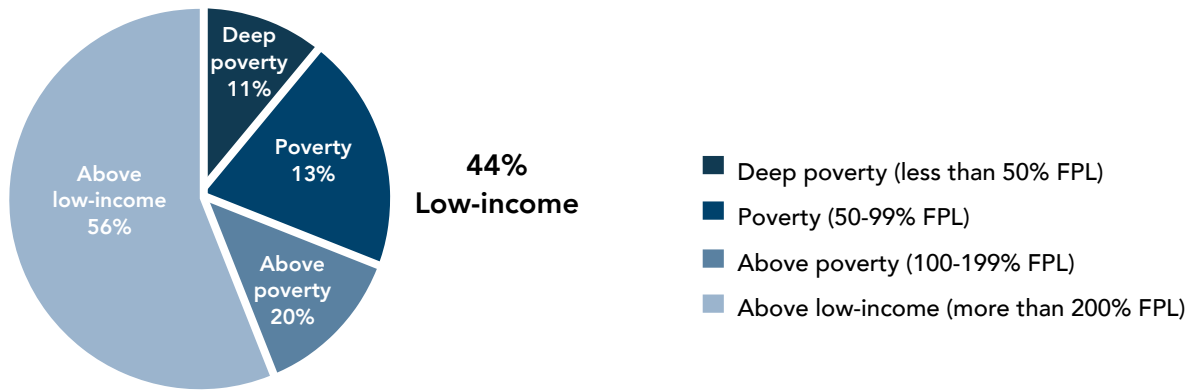
Table 1 lists the five counties in New York that have the highest percentages of young children in deep poverty, and Table 2 shows these percentages for counties in which five key New York cities are located — Syracuse, Rochester, Buffalo, Albany, and Binghamton. The map of New York (Figure C) shows variation in the percentages of young children in deep poverty across all counties in the state. County-level data were reported by age group. Because the under nine age group was not available, data for children under six years were used (shown in Tables 1 and 2, and Figure C).

For a single parent of two children, annual income for families in each low-income group in 2016 was:

Above poverty (low-income): below \$38,674
Poverty: below \$19,337
Deep poverty: below \$9,669

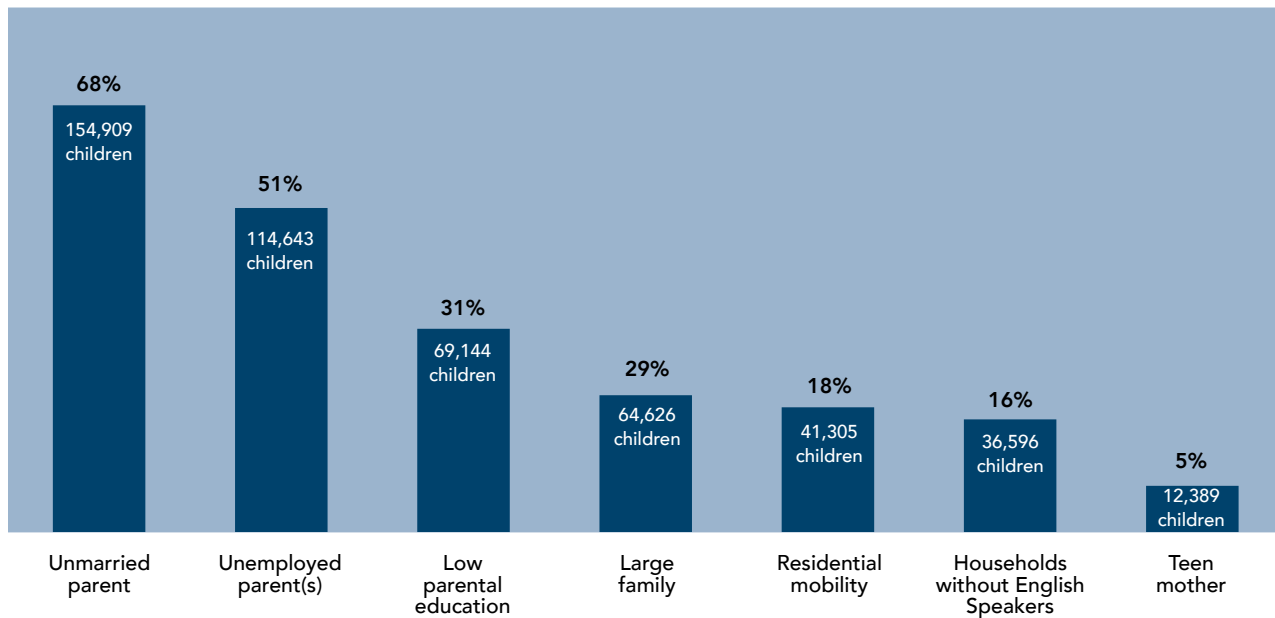
Source: U.S. Census Bureau. Poverty thresholds for 2016 by size of family and number of related children under 18 years.

Figure A: Children under 9 years in New York State by income level (n=2,057,808), 2011-2015



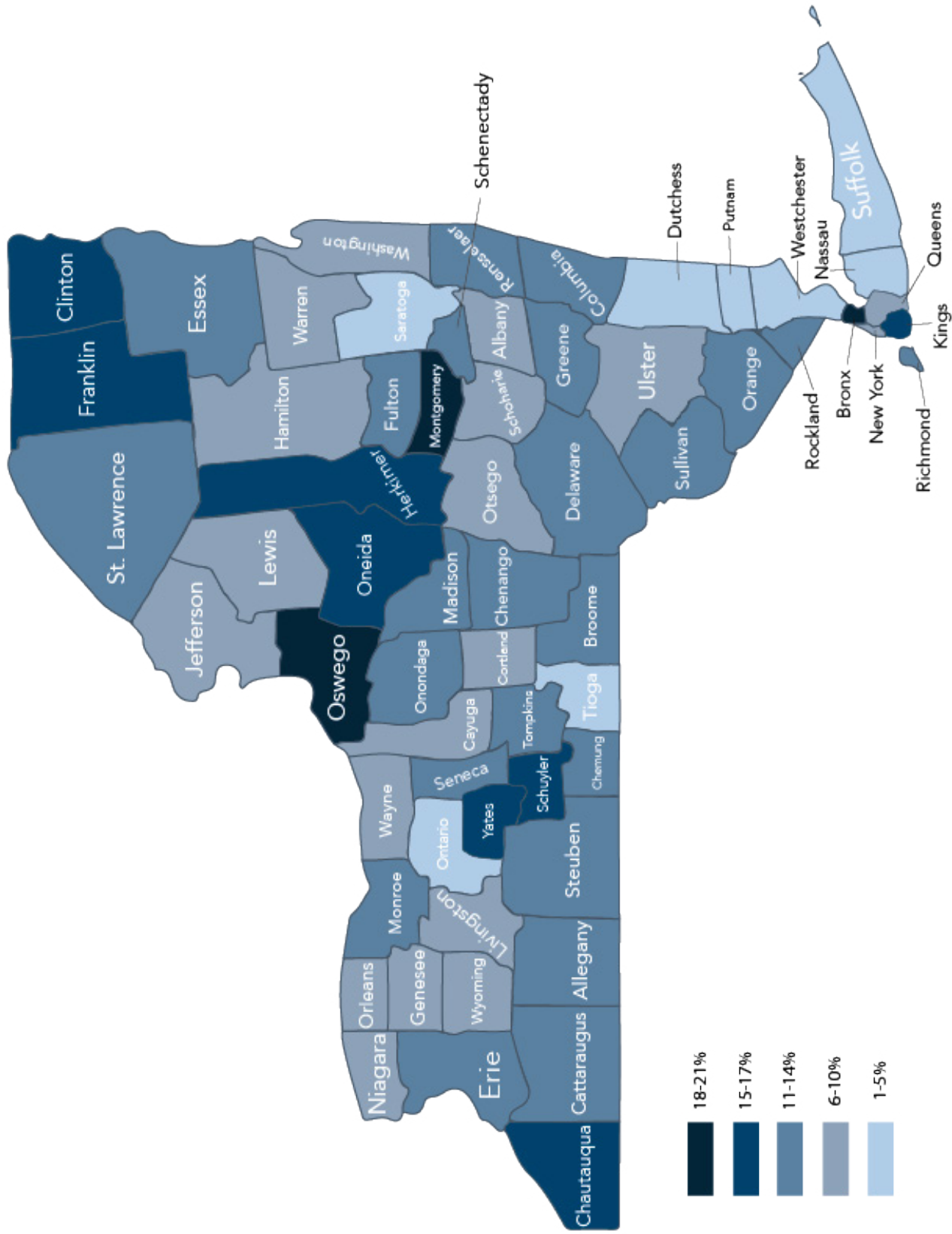
Source: The National Center for Children in Poverty calculated NY state data from the 2011-2015 American Community Survey.

Figure B: Children under 9 years in deep poverty experiencing selected risk factors in New York State (n=226,359), 2011-2015



Source: The National Center for Children in Poverty calculated NY state data from the 2011-2015 American Community Survey.

Figure C: Percent of children under 6 years in deep poverty across New York State counties



Source: U.S. Census Bureau, 2011-2015 American Community Survey. Percentage ranges based on data that may be unreliable for some counties due to small sample size. See source.

Table 1: Counties in New York State with the highest percentages of children under 6 years in deep poverty, 2011-2015

County	Percentage of children under 6 years in deep poverty	Number of children under 6 years in deep poverty	Total number of children under 6 years
Bronx County	21%	25,355	123,517
Oswego County	19%	1,531	7,897
Montgomery County	18%	612	3,455
Franklin County	17%	552	3,251
Oneida County	17%	2,625	15,626

Source: The National Center for Children in Poverty calculated NY state data from the 2011-2015 American Community Survey.

Table 2: Percentages of children under 6 years in deep poverty in counties in which five key New York cities are located, 2011-2015

County	Key NY city within county	Percentage of children under 6 years in deep poverty	Number of children under 6 years in deep poverty	Total number of children under 6 years
Onondaga	Syracuse	14%	4,375	32,138
Erie	Buffalo	14%	8,124	58,769
Monroe	Rochester	13%	6,831	50,892
Broome	Binghamton	13%	1,592	11,946
Albany	Albany	10%	1,708	17,792

Source: The National Center for Children in Poverty calculated NY state data from the 2011-2015 American Community Survey.

State policies that support young children in deep poverty

New York State has several policies related to family economic security, child development, parenting, and health that support families with young children in poverty. Some of these policies could be strengthened to provide critical supports for the state's poorest young children. There are also opportunities to advance *two-generation policies* for families experiencing extreme hardship that offer parents pathways to work and financial security along with parenting and child development supports to help children thrive.

NY's policies that promote Family Economic Security (FES)

New York's refundable state Earned Income Tax Credit, set at 30 percent of the federal credit, can provide extra cash to families, even when earnings are very low. For example, a single parent at 50 percent of the federal poverty level (FPL) with one child can receive \$819 per year.¹¹ The state's refundable Empire State Child Credit is available to families with children age four and older. The Empire State Child Credit is set at 33 percent of the federal child tax credit or \$100 per qualifying child, whichever is higher. The maximum amount of the credit is \$330 per qualifying child.¹²

For families in deep poverty, New York's current minimum wage of \$9.70 can also help reduce hardship; this rate is scheduled to rise to \$15 per hour by 2021 for most of the state.¹³ New York State's TANF benefits are among the highest in the country, although families may still remain in or near deep poverty unless they obtain other benefits (e.g., SNAP, discussed below).¹⁴

Strengthen NY's FES policies for families in deep poverty

New York should provide critical support to families with young children in deep poverty by making them eligible for the Empire State Child Credit (ESCC). Eligible families with children birth to age

four, including families in deep poverty, should not be excluded from the ESCC. Further, the amount of the per child credit should be doubled for children under age four to help relieve family stress at a time when young children's brain development and early learning depend on responsive parenting.

NY's policies that support child health, development, and parenting

New York currently supplements federal [Maternal Infant and Early Childhood Home Visiting](#) (MIECHV) funding that supports home visiting programs, currently operating in ten counties.¹⁵ However, the 2017 state budget cut funding to the Nurse-Family Partnership Home Visiting Program by \$500,000, worsening the high level of unmet need for home visiting in the state.¹⁶ Home visiting programs in New York include a range of evidence-based and evidence-informed models that vary in the specific outcomes they address, but typically include children's healthy development and parenting skills.¹⁷ New York also operates a prekindergarten program that serves a higher percentage of four-year-olds than most other state prekindergarten programs in the country, and also meets seven of ten quality indicators set by the National Institute for Early Education Research.¹⁸ The state will also invest 22 million in early prekindergarten for 3-year-olds in 2017.¹⁹ New York prioritizes TANF recipients for child care subsidies, offering children in deep poverty additional opportunities to participate in a center-based early care and education program. Some weaknesses in the state's child care regulations (e.g., failure to meet recommended ratios and group size) and limited implementation of the state's Quality Rating & Improvement System (QRIS) suggest that the quality of child care programs may be variable.²⁰

In 2016, New York joined ten other states in allowing pediatric health care providers to screen for maternal depression under the child's Medicaid.²¹ Providers are expected to refer mothers who screen positive for depression to their own physicians or other settings where they can obtain

further evaluation and treatment, if necessary. This new policy has the potential to identify and support mothers with depression who, without intervention, might experience serious challenges in their parenting role.²²

Strengthen NY's policies that support child health, development, and parenting

The state should significantly increase investment in evidence-based home visiting programs that target the youngest children in the poorest families and maintain supports through school entry. This investment would expand highly effective supports for parents' critical role in keeping children safe and secure while promoting key areas of learning that help children succeed in school. There are more than 150,894 children under age six in deep poverty in New York who could benefit from evidence-based home visiting programs, but only about 13,085 program slots are available throughout the state.²³ In three of the five counties with the highest percentages of children in deep poverty (Oswego, Montgomery, and Franklin), there are no evidence-based home visiting program slots available to serve families.²⁴ Ongoing efforts to monitor outcomes for the most vulnerable families and enhance services to improve these outcomes should be part of program expansion.

A further increase in the state's efforts to expand the supply of high quality early care and education (ECE) programs in high-poverty communities is critical for ensuring that young children in deep poverty have early learning opportunities that can help them succeed in school. Additional investment in high quality ECE programs is urgently needed, including programs that serve infants and toddlers (e.g., through state supplementation of Early Head Start). Expansion of the state's QRIS would promote quality assessments of programs and on-site coaching to support the use of evidence-based practices that promote language and social-emotional skills, and other key school readiness competencies, as well as family engagement. Enhanced resources should be available to organizations that conduct

outreach and enroll families in deep poverty in ECE programs and that provide effective supports to increase the quality of these programs.

The state should invest in training and ongoing support for maternal depression screening and response in pediatric settings to ensure the success of NY's new policy. Minnesota's department of health offers an exemplary model of training that provides guidance on conducting maternal depression screening, discussing results with parents and making effective referrals, and providing enhanced screening of young children whose mothers screen positive for depression.²⁵

Two-generation policy options

Young children in deep poverty need financially secure families and strong supports for their healthy development. Two-generation approaches integrate a range of programs that help parents move toward employment and economic security, gain parenting skills, and promote young children's early learning and social-emotional growth.²⁶ The following examples illustrate this approach.

- » **Develop policies and make targeted investments that integrate safety net supports, ECE programs or home visiting programs, and workforce preparation.** An example would be a state grants initiative that allows home visiting programs to incorporate an enhanced workforce development component and a family coach to assist with benefits and transitions (e.g., the family's child care needs when the parent increases work effort). Another example would be public-private investment in a workforce model that trains parents for good-paying jobs and ensures affordable high quality early care and education to participants for multiple years.
- » **Establish Family Benefits Centers.** This approach would create Family Benefits Centers where families could obtain a range of safety net benefits (e.g., TANF, SNAP, Medicaid, workforce development services); and assistance in accessing child health and

development services (e.g., home visiting, Head Start, Women, Infants, and Children (WIC) Program) and family mental health services. Family Benefits Centers could be created through regulations or legislation, and with the support of public-private partnerships to conduct demonstrations to develop effective models. A recent analysis suggests that families in deep poverty may be under-enrolled in key public benefits such as TANF, SNAP, and health insurance.²⁷ Box 1 shows the advantages of ensuring that families receive benefits for which they are eligible, plus the recommended child credit.

- » **Invest in statewide implementation of an evidence-based two-generation program that has demonstrated positive benefits for families in deep poverty.** Child First is a model that has shown exceptionally positive impacts on families in deep poverty. This model provides home visiting and an evidence-based parent-child interaction component that supports positive parenting, along with supports that link families to early childhood education, adult learning, safety net benefits, and other services tailored to the family's needs. Outcomes include more positive parenting and maternal mental health, reduced child welfare involvement, and improved language outcomes for children.²⁸

Box 1: Accessing multiple benefits to reduce poverty

A single parent with two children and no income in NY could receive the following combination of benefits:

- » TANF: \$789 (monthly benefit)²⁹
- » SNAP: \$471 (monthly benefit)³⁰
- » Empire State Child Credit: \$330 (maximum annual per child credit for children four years and older)³¹

Annual income rises to \$15,780

Conclusion

Too many of New York's youngest children are living in families experiencing severe economic hardship, facing adversities that reduce their chances of succeeding in school and beyond. While New York has some of the strongest policies that can help support financially struggling families, stronger policies and investments, including two-generation strategies, are needed to improve the odds for young children in deep poverty. The information and strategies presented in this brief are intended to be useful to diverse stakeholders with an interest in promoting the well-being and life opportunities of these exceptionally vulnerable young children.

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