

## Building Back Better

### Policy Priorities for New York's Recovery

As New York inches toward reopening its economy and plans for recovery, it is more urgent than ever to focus on the health and well-being of low-income children and families and all who are living on the margins. While all New Yorkers have faced challenges associated with the pandemic, the challenges are not borne equally. Those already facing poverty, disability, ill-health, and racial discrimination are far more likely to contract COVID-19, and fall severely ill, or even die. Those same New Yorkers are more sharply impacted by school closures, layoffs, supply shortages, social distancing, and other measures being implemented to address the COVID-19 pandemic – due to longstanding structural inequities.

Emerging [data](#) shows just how racially disproportionate are the impacts of this virus. Outside of New York City, 33% of New Yorkers who have died from COVID-19 have been Black or Hispanic, while they represent 21% of the population. Similarly, in New York City, 62% of fatalities have been suffered by Black and Hispanic residents, while they represent 51% of the NYC population. ([Data reported as of 5/15/20](#)). The underlying reasons for these disparate fatality rates, according to the [Centers for Disease Control and Prevention](#), are likely social and economic conditions. New Yorkers of color are disproportionately employed in jobs on the frontline, making them more likely to become infected with COVID-19. In New York City, according to a recent [report](#) by the NYC Comptroller, “**75 percent** of all frontline workers are people of color, including **82 percent** of cleaning services employees. More than **40 percent** of transit employees are black while over **60 percent** of cleaning workers are Hispanic.” Nearly one-quarter of these frontline workers are earning less than 200% of the poverty level (or an income of less than \$50,000 for a family of four).

New York families with young children are also being hit hard by the impacts of the pandemic, particularly the economic fallout. In a [survey](#) of New York families with babies and toddlers, undertaken in late April by Global Strategy Group on behalf of the Raising NY coalition, more than one-third of parents reported having skipped or reduced the size of their meals due to financial insecurity caused by the coronavirus; 11% reported having skipped or reduced the size of meals for their children. Nearly 60% worried they would be unable to cover basic expenses like rent, health care or food, if the crisis continued.

We urge New York leaders to stand firmly with our children and families, particularly families of color, and take these steps in the weeks and months of recovery that lie ahead. At the same time, at this moment in which New York pivots to recovery, let's seize this critical opportunity to rebuild New York's systems to be stronger and more fair than before the pandemic.

#### **Include child and family perspectives at any table or workgroup focused on reopening and rebuilding.**

The needs of children, of families with young children, are too often overlooked at the tables where decisions are made. Children cannot represent themselves and parents with young ones are often young themselves, spread thin, and not in seats of power. This is particularly the case when children are not in

## New York’s refundable tax credits—among the most effective strategies for reducing poverty—exclude some of the very New Yorkers most likely to live in poverty

Empire State Child Credit, 2017	State Earned Income Tax Credit (EITC), 2017
 <b>1,418,452</b> Total number of families receiving credit	 <b>1,548,212</b> Total number of EITC claims
 <b>\$443</b> Average claim amount	 <b>\$1,113</b> Average credit for family with 2 children
 <b>\$0</b> Excluded: children under age 4	 <b>\$0</b> Excluded: young childless adults 18 thru 24

the headlines, as was the case with COVID-19 until mid-May, at least. Across New York though, children are being hit hard by food insecurity, learning loss and other disruptions, and family violence; without intervention, many will suffer negative consequences of these traumatic experiences for years to come.

The COVID-19 crisis has exposed our interconnectedness and the interconnectedness of the systems on which we rely. Parents cannot go back to work if there is not someone to care for the child(ren). Child care providers cannot care for children of essential workers and others if they do not have access to food, personal protective equipment, and enough money to cover expenses. Children may (and are) missing essential immunizations and screenings at critical points in their young lives because parents are scared and health facilities are unavailable. And those health facilities – community health centers, pediatricians – also are at risk of financial insolvency and the inability to recover.

An intentional focus on the unique needs of children and families, from the start, is critical to building back better.

### Place children at the center of COVID-19 recovery, prioritizing reducing child poverty and strengthening family economic security in building back better.

- ▶ Commit to holding children harmless in budget cuts, implement tools to track rates of child poverty as a dashboard to measure overall impacts of policy decisions, and adopt targets to sharply reduce child poverty by 2030. As New York plots out its recovery, it should prioritize investments in strategies proven to reduce child poverty and move families into economic security, including a robust, fully refundable young child tax credit that is widely available including to very low-income and immigrant families; and expanding access to high-quality, affordable child care.
- ▶ Ensure that New York’s immigrant families, many of whom are excluded from federal and state unemployment benefits, emergency federal stimulus checks, and other benefits, have access to essential supports they need to weather this crisis. Among the immediate steps New York should consider is making emergency payments to excluded immigrant New Yorkers as has been done in New York City and California. Longer term, New York should expand and strengthen the state’s Empire State Child Credit, which is available to many immigrant families, and reform the state’s EITC so that it is available to New Yorkers who are ITIN filers, and is adjusted in coordination with New York’s rising minimum wage.

## Should Budget cuts become necessary, they must not be across-the-board, and must spare low-income New York children and families, and communities of color disproportionately impacted by the pandemic.

The 2020-2021 Enacted Budget affords the Executive unprecedented authority to reopen the budget several times during the budget year to make adjustments (or cuts). While no cuts have yet been proposed, the Governor has publicly discussed pursuing steep, across-the-board cuts. Across-the-board cuts do not cut equitably. They would deeply harm people who are already injured and services that have been underfunded for years, like child care, child welfare, public health – the very services needed most by New Yorkers hit hardest by the pandemic. Across-the-board cuts would further entrench and even strengthen long-standing inequities, burdening the very New Yorkers least able to withstand cuts in services.

Cost shifts to local government are cuts by another name that will harm New York's poorest communities the most. Local government /county public health departments are on the front lines of this battle against COVID-19. They need all the resources possible to enable them to meet this public health challenge.

At the same time, we recognize the dire fiscal challenges facing New York State. The budget shortfall New York State is facing is reported to be \$60 billion – and growing. New York State cannot recover from this crisis alone. It is simply not possible. Rebuilding will require substantial, sustained federal support; we are diligently working – often hand-in-hand with state government partners – to secure essential federal emergency support for New York.

## Ensure access to health coverage and care now and beyond.

The State and its localities face severe and growing budget crises and New York's governor, like others, is looking at Medicaid reductions. Yet now, more than ever, it is critical that everyone has access to health coverage. The way to effectively respond to a pandemic is to make sure that everyone can get the screening, care, and treatment they need to get and stay healthy. A [May 2020 study](#) funded by the Robert Wood Johnson Foundation and conducted by the Urban Institute highlights Medicaid's critical importance. It estimates the impact of increases in unemployment on health coverage among non-elderly individuals. Researchers estimate how 20 percent unemployment – expected in the coming months – could affect health insurance coverage and find:

- An estimated 1.5 million New Yorkers could lose their employer-sponsored insurance.
- More than half (923,000) of these newly jobless New Yorkers will obtain coverage through Medicaid; 315,000 will obtain coverage through the Marketplace; and 282,000 will be newly uninsured.

Steps New York should take now:

- ▶ Maintain Medicaid spending to protect health coverage and access and ensure New York maximizes the increased federal match. Medicaid is a state-federal partnership, with the federal government matching a portion of state expenditures, so cuts to Medicaid at the state level result in reduced federal funds to the state. Cuts to Medicaid in the midst of a pandemic are dangerous and likely to exacerbate the significant inequities in health outcomes that COVID-19 has amplified.
- ▶ Protect our youngest children against coverage losses and reduce the [intense stress](#) being experienced by families with young children by implementing continuous Medicaid eligibility for infants in their first three years of life.

# 1 in 3 parents of infants and toddlers are skipping or reducing meals

Have you done any of the following as a result of the coronavirus crisis?



Skipped or reduced the size of their own meals



Reduced or skipped the size of meals they provide for their children

Survey conducted by Global Strategy Group on behalf of Raising NY. The survey was conducted from 4/18–4/22 and had a confidence interval of +/-4.9% Learn more at [RaisingNY.org/Coronavirus](https://RaisingNY.org/Coronavirus).

- ▶ Prioritize making sure children get the in-person care they need, such as recommended immunizations against life-threatening diseases and preventive dental services. There are ways of doing this that minimize social interaction, such as drive-up immunizations and fluoride varnish applications.
- ▶ Ramp up telehealth as much as possible and appropriate; ensure providers are adequately compensated for services; and consider which services can/should continue virtually beyond the crisis and what resources (devices, technology) families need to facilitate it. Maternal, infant, and early childhood home visiting programs are engaged in supporting families with young children virtually during this crisis; policy and payment should facilitate it.
- ▶ Ensure every single postpartum mother benefits from one or more telehealth consultation that includes mental/social emotional screening following delivery/discharge. New mothers, already at risk for perinatal mood disorders, are being discharged to lonely and stressful situations without the support of grandparents, siblings, and friends.
- ▶ Shore-up the primary care safety net, especially in underserved communities. COVID-19 has cut off the routine procedures and check-ups that are the bread and butter of primary care. The primary care safety net, already beleaguered before the pandemic, is now under threat as community health centers and other primary care safety net practices that are not owned by hospitals have lost revenue, laid off staff, and question how and whether they will resume operations.
- ▶ Build and strengthen cross-system relationships, coordination, and data exchange to address social determinants of health.
- ▶ Implement health workforce data reporting to inform and improve health planning and emergency preparedness (A.7213/S.5093). The COVID-19 crisis has made clear there is an urgent need for workforce data and analysis that can help us better understand the supply and distribution of the state's health professionals as the State works to respond to public health threats.

## Safely scale-up child care to support reopening and rebuilding of the economy and build equitable access to high-quality child care for all New Yorkers who need it.

Reopening is not possible without child care, particularly given that workplaces are on track to reopen before schools, and likely, camps. At the same time, families are relying less on older relatives and neighbors for caregiving support due to health concerns. This means that the demand for child care

could skyrocket in the coming weeks and months. Many (25%) child care providers shuttered during the pandemic, and those presently open are operating at low capacity, causing providers to face significant financial challenges. Without substantial support, many providers will not have the means to stay open (or reopen) to meet the needs of working parents.

- ▶ In April, New York State received more than \$164 million in federal funds for child care from the CARES Act, and has dedicated \$20 million of it to a promising CARES Act Scholarship Fund to provide low- and middle-income essential workers with free child care in a streamlined, simple process, along with another \$10 million for PPE and cleaning supplies. This is an excellent first step. Much more needs to be done, and quickly, to meet current needs and shore-up a system on the verge of collapse. Short-term steps New York should take:
  - Expand access to affordable quality child care equitably across New York State as an essential component of New York's recovery: As businesses re-open and demand for child care increases beyond essential workers, the State should use federal CARES Act funding, subsidy dollars unused during the pandemic, and other appropriate funding, to make child care subsidy eligibility levels and co-pays more fair and equitable across the state. Specifically, these funds should be used to raise eligibility levels for subsidy so they are more equitable across the state; subsidize parent co-pays for those who do not qualify for CARES Act Scholarships; and set a consistent statewide co-pay maximum and eligibility minimum making child care affordable for all working families receiving assistance now and serving as a bridge to longer-term reforms of the child care system.
  - Prioritize child care access for families experiencing unemployment and families involved in the child welfare system. The State should provide additional funding to enable all counties to:
    - ✓ provide child care subsidy for eligible parents who are unemployed and seeking work, retraining, or pursuing higher education during the crisis and after;
    - ✓ provide child care subsidy to families receiving preventive child welfare services as a critical support for struggling families, and to all kin and foster families, many of whom are facing the unexpected demands of caring for foster children while schools, and likely, camps, are closed.
- ▶ **Give child care providers an enhanced subsidy rate and supplement private pay tuitions to cover the increased costs associated with providing care safely during the pandemic.** The CARES Act scholarships, and all subsidies should be enhanced during this period to cover the increased costs child care providers are facing, including that providers are operating at significantly reduced capacity to allow for social distancing and because many families are keeping their children at home. Without enhanced rates, many child care providers will not be able to reopen or stay open.
- ▶ **Pay child care providers premium pay.** Child care providers who are now being asked to work on the frontlines are often paid little more than minimum wage and receive no benefits. They must be ensured comprehensive health coverage, access to COVID-19 testing, and premium pay.
- ▶ **Collect data on the number of providers and children attending child care who become ill, how many programs are forced to close due to the virus, and what other support they need to keep their doors open safely.** To keep the essential child care workforce and children in their care safe, the State must constantly monitor the health impacts on this sector, and constantly revise safety practices as the data dictates.

## Expand and improve health and public health supports, particularly for families and children.

As the COVID-19 pandemic has powerfully demonstrated, a strong public health system is integral to government's responsibility for keeping residents and communities safe and healthy. Public health must have a central role as the state recovers from the pandemic but it must also be able to manage

# More than half of parents who rely on family child care providers and child care centers expect to need additional support to help their children return

When day care and child care centers re-open, do you anticipate your child needing extra support when transitioning back to the child care/pre-school setting? Select all that apply.

50%



**Yes, I anticipate my child will need additional support to transition back to school routines after time away**

14%



**Yes, I anticipate my child will need counseling or other social-emotional supports**

42%



**No, I don't think my child will need extra support**

Survey conducted by Global Strategy Group on behalf of Raising NY. The survey was conducted from 4/18-4/22 and had a confidence interval of +/-4.9% Learn more at [RaisingNY.org/Coronavirus](https://RaisingNY.org/Coronavirus).

other health threats, such as a potential increases in vaccine preventable diseases, substance abuse, and maternal and child health. The pandemic also brings into crystal-clear focus that the social determinants of health and inequities, as well as social factors like racism and poverty, create risk for the entire population. Public health is uniquely positioned to provide population and community-based strategies to address these underlying conditions.

The public health system is frayed at the edges from years of underfunding and workforce loss. Right now, New York's public health capacity is not as robust as it must be to protect the health of the population during COVID and through recovery.

- ▶ Dramatically increase funding for local public health agencies to respond to the pandemic. COVID funding should not come at the expense of other public health programs.
- ▶ Invest in the public health workforce by implementing education and training incentives to retain employees and attract new talent to local health departments.
- ▶ Remove funding and regulatory silos that inhibit public health programs from fully connecting with other parts of the health care system.
- ▶ Invest in maternal and child health programs to strengthen family supports, including maternal mental health.
  - Ensure that screening and referral for maternal mental health is conducted from pre-conception to post-partum.
  - Create affordable, accessible mental health training that is available to all providers and programs working with pregnant and post-partum women.

## **Provide focused support and resources, to withstand the stresses of the pandemic and its impacts, for families connected to or at-risk of child welfare involvement.**

- ▶ **Impose a temporary moratorium on “aging-out” of foster care.** Take steps to ensure young people transitioning out of foster care get services and supports they need to weather this crisis and thrive once it ends.

- The needs of older youth in foster care – substantial in the best of times – have been exacerbated by the COVID-19 crisis. Among the concrete new challenges they are facing: college dorms have closed leaving some youth in foster care without a place to live; foster parents stressed by job loss and other stresses are reluctant to accept new placements; unemployment is skyrocketing, leaving these youth vulnerable to joblessness and economic insecurity.
  - Without a permanent family or stable foster family, youth are left isolated without access to (or knowledge of) critical services that can assist them should they face job loss, food insecurity, college closures and other challenges. New York State should join the six other states that have imposed moratoriums on aging out.
- ▶ **Establish a Kin First Firewall in the foster care placement process to connect children with relatives or fictive kin in a timely manner.** As foster parents decline new placements due to the stresses created by COVID-19, kinship caregivers willing to provide care for children in foster care should be approved as resource families without delay. Especially now, all possibilities of kin-based care should be exhausted before placing a child elsewhere by creating systems to ensure the search for kin is comprehensive and any non-kin placement is approved by a senior director.
  - ▶ **Establish an Office of the Foster Care Ombudsman as an important recourse for families during this uncertain time.** The Ombudsman would assist families in navigating foster care during this crisis, answering questions and providing guidance as policy and expectations change rapidly.
    - As the crisis continues, the impact on the child welfare system will likely increase, as families juggle having children home from school, getting the services they need, and as providers juggle meeting the needs of the families they serve while meeting new, changing health and safety expectations. An Ombudsman would provide families an avenue for better understanding and navigating the changing landscape.
    - The Ombudsman would be tasked with receiving questions and complaints and foster care policies and practice, and providing real-time resolution.
  - ▶ **Restore funding support for local kinship caregiver programs.** Kinship caregivers, like our foster parents, are providing care for children in this moment of uncertainty, most of whom are without the accompanying financial support of foster care. Now more than ever, they need supports and resources, one of which is support in the home provided by kinship caregiver programs. Unfortunately, state funding for kinship caregiver programs was cut nearly in half in the Enacted Budget.
  - ▶ **Prioritize reunification and permanency by categorizing these hearings as “essential business” for Family Court.** Family Court shutdowns and reduced staffing have delayed hearings, which may ultimately delay family reunification and permanency, deny children and youth the opportunity to get their needs addressed (including sibling visits and services), and reduce critical support to children and their families. Stability, permanency, and connection to family should be prioritized and innovative approaches developed to reunification and permanency hearings, including using technology during the pandemic until regular court operations can resume.
  - ▶ **Provide COVID-19 Emergency Response Pay for foster parents, frontline staff, and reunified families.** Foster parents are providing care for children in new ways during this pandemic – providing academic support as schools remain closed and navigating ever-changing expectations. Likewise, direct care staff at foster care agencies, preventive providers, and counties are on the frontlines providing services in new and innovative ways, despite risk to their own health. Reunified biological families, bringing children home during this economically stressful time, are also assuming new responsibilities and new stress, and would benefit from the guarantee of supplemental financial assistance.

▶ **Provide technology and technical support to ensure children and families remain connected.**

As families shelter at home, technology plays an increasingly important role in their lives. Families involved in child welfare, disproportionately Black families and families living in poverty, already experience the impact of the digital divide. The increased importance of access to technology during the pandemic has put these children and families at an increased disadvantage.

**Take all possible steps to ensure that all New Yorkers, including the youngest New Yorkers, are counted in the 2020 Census.**

With COVID-19 devastating many New York communities – leaving families worried about their health and that of their loved ones; wondering how they will pay their rent, afford groceries and educate their children – filling out the Census may seem unimportant. In fact, the enormous challenges New Yorkers are facing in this crisis underscore the profound importance of having every New Yorker counted so that the State is fairly represented in Washington D.C., and receives our fair share of federal resources. Among the groups most commonly undercounted: young children.

Looking to the future, when the COVID-19 crisis subsides, and New York begins to rebuild, 2020 Census data will determine the share of federal money New York receives for the next 10 years. The funding allotted to programs to support early-childhood well-being and family economic security directly determines the number of people who may benefit.

- ▶ Quickly expend Census funding allocated for community-based organizations to outreach to the hardest to count communities can be done earnestly and creatively during the pandemic.
- ▶ Raise awareness of the census and the urgency of participation throughout New York State materials and communication.