

School Readiness in Pennsylvania

School Readiness Indicators – 2007

Giant Leap Forward in 2007

Pennsylvania children are reaping the rewards of great gains achieved this past year in the expansion of health coverage and early learning programs such as pre-K. These public policy accomplishments help assure that more children than ever before are entering school ready to learn and prepared to succeed.

Since the 2006 School Readiness in Pennsylvania report, pre-K enrollment and children's health coverage enrollment have climbed – with more on the way. In fact, CHIP (Children's Health Insurance Program) experienced record enrollment in 2007 as the result of passage of "Cover All Kids," which expanded CHIP enrollment for all uninsured children through age 18. The expansion helped maintain Pennsylvania's status as a leader among states when it comes to making health coverage available to children.

According to the Department of Insurance, statewide CHIP enrollment for children of all ages reached a milestone of 162,883 in July 2007. This is an increase of almost 1,500 enrollees as compared to June enrollment statistics. Almost 2,800 of the July enrollees would not have been eligible for

CHIP prior to the Commonwealth's "Cover All Kids" CHIP expansion last October. This report shows that enrollment in the state's health insurance programs grew by about two percent from 2006 to 2007 providing 6,970 additional eligible children aged 0 to 4 with access to publicly-funded health insurance, including CHIP. This is particularly timely to note as Congress considers the reauthorization of SCHIP, the federal statute that provides approximately two-thirds of the funds for CHIP in Pennsylvania. Should Congress fail to enact a strong SCHIP with a \$50 billion appropriation, the great gains we have made for children in our state under "Cover All Kids" could be at risk.

This year the state budget debate dominated headlines. When the dust settled and the ink dried on the new state budget, a number of critical investments were included to improve school readiness, none the least of which was the enactment of Pre-K Counts and its \$75 million appropriation. As a result, access to high-quality pre-K across the Commonwealth will grow by approximately 11,000 children this coming school year.

But Not Everything's Rosy and More Needs to Be Done

While the investments in school readiness programs have reached an all-time high, far too many eligible children and their working parents remain shut out of subsidized child care. Though the number of slots for infants, toddlers, and preschool children in the state's subsidized child care system increased by nearly 5,500 from last year, there are still more than 8,000 children birth to 12 on the waiting list. This is far too many. Pennsylvania must enact a strategy to move these kids off the waiting list as soon as possible and provide aid to struggling, low-income working parents who need safe, affordable, quality child care for their children.

The number of children who have high-quality child care available to them in their community has grown over the years, but the vast majority of care in our state that is provided to all families fails to meet the highest quality standards. Only 4.1 percent of the child care available in Pennsylvania is of the highest quality as noted by attaining Keystone Star 4 ranking or national accreditation.

Furthermore, the number of children who are placed out of home and lack a stable and supportive family is substantial. Pennsylvania has taken some important steps to expand the availability of research-based child abuse prevention strategies such as Nurse Family Partnerships to more than half of our counties, but much more still needs to be done. In March 2007, almost 5,000 Pennsylvania children under 5 were living in out-of-home placements. Far too many young families struggle to raise their children and would greatly benefit from a prevention-based agenda that: strengthens families and reduces the number of children who are removed from their homes; decreases the time that children who are removed live with temporary families; and, increases the number of children who live with a lifelong, stable and supportive family.

Pennsylvania is clearly taking important steps to improve the school readiness of our children and should continue this investment strategy in the years to come to assure that all children enter school ready and on a level playing field.



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| Indicator | Significance | 2006 | 2007 | Amount of Change |
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Ready Communities and Families

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| Children Living in Low-Income Families Children ages 0-4 who live in households earning less than 200% of the federal income poverty guidelines or \$40,000 for a family of four. | Children living in poverty are more likely to have poor nutrition, chronic health problems, be less prepared for and have more difficulty in school. | 1 in 3 | 1 in 3 | No Update Available from Data Source |
| Births to Mothers with Less than a High School Degree Of all births where education is known. | Children living with mothers with low education level are less likely to receive cognitive stimulation and high-quality child care and more likely to have diminished reading skills. | 16.4 | 15.8 | Made Improvement |
| Child Abuse and Neglect Substantiated cases of abuse and neglect for children 0 thru 4. | Children who have experienced abuse and neglect are more likely to perform poorly in school, have lower IQ scores, and have difficulty with language ability. They are likelier to have social, emotional and physical health problems. | 870 | 850 | Made Improvement |
| English Not the Primary Language Spoken in the Home Children ages 0-4 living in families where English is not the primary language spoken at home and English is not spoken very well. | Children living in homes where English is not the primary language spoken are more likely to enter school with lower math, reading, and general knowledge assessments. | 3.2 | 3.2 | No Update Available from Data Source |

Ready Services – Health

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| Children Lacking Health Insurance Children 0-4 who are uninsured. | Children who are uninsured are less likely to access primary health care services that can prevent or address chronic or acute health conditions. Lack of health care or delays in treatment can negatively impact cognitive, emotional, behavioral and physical development. Uninsured children are more likely to miss school and have diminished academic achievement. | 3.9 | 3.9 | No Update Available from Data Source |
| Children Funded by Public Health Insurance Ages 0-4 | | 43.4 | 44.3 | Made Improvement |
| Children Born at Low Birth Weight Babies born weighing under 2,500 grams. | Babies born at low birth weight are likelier to die in the first year of life, have disabilities and health problems that can include developmental delays, visual and hearing impairments and chronic respiratory ailments. They may have trouble with social skills and show higher rates of depression, anxiety disorders, physical disabilities and hyperactivity and aggression. | 8.7 | 8.3 | Made Improvement |

Ready Services – Early Care and Education

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| Early Intervention Children birth to the age they begin school enrolled in the state’s early intervention program. | Early intervention is designed to assist children with developmental delays or disabilities before they enter school by working with their parents, caregivers and communities to build on the child’s strengths and maximize their experiences and opportunities. Early intervention services help improve children’s school readiness. | 63,020 | 66,549 | Made Improvement |
| Head Start Enrollment Percent of eligible children ages 3 and 4 enrolled in Head Start. | Head Start, a comprehensive preschool program for children living in poverty, has demonstrated positive impact on school readiness and school success. | 67.8 | 70.9 | Made Improvement |
| Public School Pre-K Enrollment Children attending pre-K in Pennsylvania’s public schools. | High-quality pre-K helps improve the school readiness of young children by enhancing their social, emotional and cognitive development. Children who attend high-quality pre-K enter school more prepared and achieve greater success, including fewer grade retentions, less special education placement and higher standardized test scores. | 12,023 | 14,743 | Made Improvement |
| High-Quality Child Care Availability of high-quality child care (NAEYC and NAFCC accredited or Keystone Stars 4) for children 0-4 in need of child care services. | Children who receive high-quality child care show better literacy skills and score higher on tests of both cognitive and social skills than children cared for in other arrangements. High-quality early care and education programs have demonstrated a strong return on investment. | 3.8 | 4.1 | Made Improvement |
| Access to Child Care Subsidy Number of slots for infants, toddlers and preschool children in the state’s subsidized child care system. | The availability of child care subsidies to low-income families increases the opportunity for them to access high-quality care for their children enhancing their school readiness and increasing the likelihood that parents remain employed. | 78,388 | 83,952 | Made Improvement |

Ready Schools

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| Pre K-3 Class Size Percent of students in pre-K through third grade in school districts and charter schools in classes with 17 or fewer students. | Children who are in classes of 17 or fewer students in kindergarten through third grade score better on standardized achievement tests than their peers in larger classes. | 16.3 | 15.8 | Lost Ground |
| Full-day Kindergarten Percent of kindergarteners in district and charter schools who attend full-day programs. | Students who attend full-day kindergarten score higher on achievement tests, receive better report cards, experience fewer grade retentions, require less remediation and special education, are more involved in learning, and are better behaved than students in half-day programs. These students make more successful transitions to first grade. | 54.6 | 56.7 | Made Improvement |

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