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PRENATAL-TO-3 POLICY IMPACT CENTER

Strengthening the Earliest Years through Research and Collaboration

CYNTHIA OSBORNE, Ph.D.
Associate Dean for Academic Strategies, The University of Texas at Austin
Goals of the Prenatal-to-3 Policy Impact Center

• Provide evidence of the most effective strategies to bring the science of the developing child to life through policy

• Be a trusted resource for states as they develop and implement policies to strengthen the PN-3 period

• Be an authoritative source of information for the field on the evidence of what we know and what we must learn about effective PN-3 policies

• Foster the exchange of information between policy, research, and practice
Our Earliest Experiences Shape Our Lives

• Our brain is the only organ that is not fully developed when we are born

• The most rapid and sensitive period of brain development is prenatal-to-age three or the first 1,000 days

• The PN-3 period lays the foundation for all future learning, behavior, and health

• Science is very clear on what children need to thrive, and that exposure to early adversity has long-lasting harmful effects
Children Can Thrive!

- A strong attachment to at least one loving, safe, caring, stable adult can offset many of the negative effects of adversity.
- Stimulating brain growth early is “simple” – and parents want to support their children.
- Parents need resources, skills, health, and social connections.
- Policies can help to support families and their children to reduce stressors, increase stability, and foster safety.
To ensure children are on track for healthy development by age three, it is essential that programs and policies start early so that:

- Infants are born healthy to healthy parents,
- Parents have the necessary resources and skills to care for their child, and
- Families have access to affordable, high-quality child care options.
Guiding principles of the Impact Center

1. **Investing in children in the earliest years** is essential for their healthy development. We must **invest in children’s families and the institutions** that serve them to promote the health and wellbeing of infants and toddlers.

2. We should strive to **close persistent disparities** in outcomes between race and ethnic groups and by socioeconomic status.

3. We are **guided by evidence**, but mindful and honest about the limits of the research base. We want to encourage the adoption of effective policies AND support and evaluate innovative strategies to strengthen children and families.
Prenatal-to-3 Policy Evidence Review

- Clearinghouse of social policies and the evidence of their impact on PN-3 outcomes
- Authoritative assessment of the policy’s effectiveness
- Informs selection of policies for the PN-3 State Policy Roadmap
- Existing clearinghouses largely focus on rating programs, not policies
Logic model

State-level Policy

Policy X

Caregiver Health/Skills

Employment
Economic security
Material wellbeing

Caregiver Resources

Physical health
Mental health
Relationships
Parenting skills/knowledge/warmth
Safe environments

Infant/Toddler Wellbeing

Birth outcomes
Physical health
Mental/Social-emotional health
Relationships/attachment
Cognitive development
Safety
Examples of policies for review

Healthy Beginnings

- Medicaid expansion
- Targeted screenings for children and families
- Universal screenings for children and families
- Strategies to reduce maternal mortality and morbidity

Supported Families

- Paid family leave
- State EITC
- Fair work scheduling
- SNAP administrative burden
- Evidence-based home visiting programs
- State minimum wage

High-Quality Care and Learning

- Child care ratios
- QRIS
- Child care subsidies
- ECE workforce compensation
- ECE workforce qualifications
Overall Conclusions of Policy Effectiveness

• Strong
• Moderate
• Promising
• Null
• Needs Further Study
• Negative
Prenatal-to-3 State Policy Roadmap

- Identifies a discrete list of policies that have a strong evidence base for promoting healthy beginnings, supporting families, and providing quality care environments for children
- Measures and track states’ progress toward policy adoption, and corresponding implementation and outcome measures

Unique features of the PN-3 State Policy Roadmap:

- Indicator selection is driven by evidence
- Provides states direction and guidance on how to improve outcomes
- Helps states determine whether worse outcomes are driven by lack of policy, limited implementation, or other demographic- or geographic-related characteristics of the state
- Tracks states’ progress over time
Prenatal-to-3 Policy ↔ Research Exchange

• Developing close relationships with PN-3 leaders in all states to document:
  • What states are doing
  • What states are planning
  • What challenges states are facing
• Share information among states to learn from one another
• Share information with academics to increase relevance of research
• Information will inform updates on states’ progress in the Roadmap
• Annual state-of-the-field summit to bridge policy and research
Save the Date

Sept. 14-15, 2020 | Austin, TX

Annual state of the field conference for policymakers, researchers, and practitioners and the launch of the PN-3 State Policy Roadmap
Connect

Website: pn3policy.org

Email: cosborne@prc.utexas.edu
      pn3policy@austin.utexas.edu

Twitter: @pn3policy | #pn3policy

Email Sign-up: mailchi.mp/austin.utexas.edu/pn3