ENROLLMENT IN EARLY CHILDHOOD EDUCATION PROGRAMS FOR YOUNG CHILDREN INVOLVED WITH CHILD WELFARE

RESEARCH BRIEF | THEODORE P. CROSS AND JESSE J. HELTON | December 2010

Young children who have been maltreated are at substantial risk developmentally, both because of the abuse or neglect they have suffered and because they often experience risk factors such as parental substance abuse and poverty.ⁱ One frequent consequence of their developmental challenges is poor educational outcomes. Children who have been maltreated are more likely to receive special education services, achieve at lower levels in school and repeat grades.ⁱⁱ The most recent well-being study for children involved with the Illinois Department of Children and Family Services (DCFS) shows that these are major issues for children currently involved with the department.ⁱⁱⁱ Considerable research, however, shows improved educational outcomes for at-risk children who are enrolled in early childhood education programs. Studies of programs like the Perry Preschool Project, the Abecedarian Project, and the Chicago Child Parent Centers show that children in these programs are, for example, less likely to repeat grades or need special education and more likely to avoid juvenile arrest, graduate high school and attend college.^{iv} Thus early education programs show promise for helping ameliorate the negative effects of growing up with maltreatment, environmental risk, and disadvantage. Yet a recent study shows that most 3 to 5 year olds entering foster care in Illinois are not enrolled in educational programs prior to DCFS intervention.^v In that study, less than a quarter of 3 year olds were enrolled at time of placement, as were less than one half of 4 year olds, and just over half of 5 year olds.

According to Procedure 314.70, DCFS has a policy of providing early childhood education to all children in custody aged 3 to 5, and encouraging parents served in their home to enroll their children of that age as well.^{vi} The early childhood programs covered by this policy include 1) Head Start or Early Head Start, 2) pre-kindergarten (preschool)

programs, 3) accredited child care programs (e.g. licensed childcare, home visiting programs), 4) early intervention services, and 5) early childhood special education programs.

Has Procedure 314.70 led every young child in DCFS' custody (i.e., in out-of-home placement) to be enrolled in early childhood education? How common is early childhood education among child maltreatment victims served in their homes (so-called *intact family* cases)? Given DCFS' attention to early childhood education, are Illinois children who have been maltreated, particularly those in care, more likely to be enrolled than comparable children nationally? This research brief looks at data on enrollment in early childhood education among children in cases of substantiated maltreatment in Illinois and nationally to answer these questions.

Data to answer these questions come from the Illinois and National Studies of Child and Adolescent Well-Being (ISCAW and NSCAW). These studies include random samples of maltreatment investigations conducted between March 2008 and January 2009. The ISCAW study of 818 cases from Illinois is conducted as part of the larger NSCAW study, which includes 5,055 cases from 36 different states. The Illinois data set only includes substantiated cases; the national data set includes unsubstantiated cases as well, but only substantiated cases were selected for this analysis to make Illinois and national results comparable. Because of ISCAW and NSCAW's sophisticated random sampling methodology, the studies provide valid estimates of outcomes for Illinois and the nation, within a specified margin of error. Baseline data collection occurred four months following the completion of the maltreatment investigation. The primary caregivers for the child (biological, kin and foster caregivers) were interviewed in



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home visits about their children's development and wellbeing, and about the services the children received.

Caregivers were asked multiple questions about children's school enrollment and the early educational services their children were receiving. From these questions, we were able to identify whether children had participated in four out of the five different early childhood educational programs specified by Procedure 314.70 (it was not possible from the caregiver interviews to ascertain whether children had participated in accredited child care programs like licensed day care or receipt of home visiting services). Some of the five year olds in the sample were already in kindergarten (see below); we interpreted early childhood education to include this group as well. This analysis therefore provides a reasonable though not complete estimate of the delivery of early childhood education services.

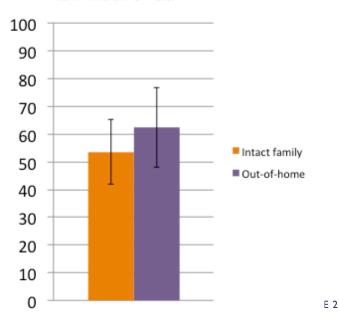
Results were broken down for Illinois and national (non-Illinois) children and for those children who were removed from the home and those in intact family cases following the substantiated maltreatment investigation. Figure 1 shows the percentage of 3 to 5 year olds in the sample who were enrolled in preschool, broken out by intact family and outof-home cases, and by Illinois and national (non-Illinois) cases. A majority of the children in the Illinois sample received early childhood education, 69.7% of children in intact family cases and 79.7% in out-of-home cases. Because the samples are relatively small for that specific age group, the margins of error (represented by the black line superimposed on the bars in Figure 1) are fairly large and readers should interpret these percentages with caution.

Outside of Illinois, smaller percentages of 3 to 5 year olds involved in substantiated maltreatment cases were enrolled in an education program: an estimated 53.5% of intact family and 62.3% of out-of-home cases. Illinois children were about 1.3 times as likely as children in the rest of the country to be in early childhood education in both intact cases and out-of-home cases (both comparisons were nearly statistically significant [p < .07]).

FIGURE I: Percentage of 3-5 year olds involved in substantiated investigations who were in early childhood education or kindergarten



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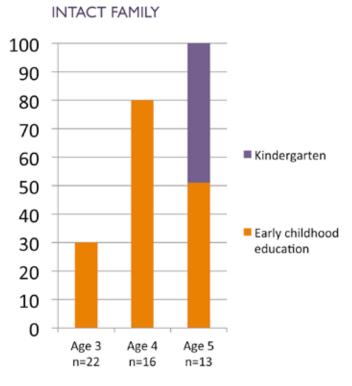


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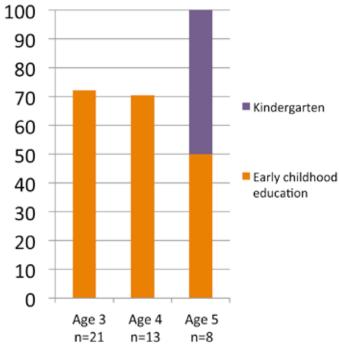
Figure 2 shows the percentage of the Illinois children in early education or kindergarten, both intact family and outof-home, broken down by age. Though the numbers when broken down this way are very small, they suggest a trend in which the chances that children were in an education program were greater from age 3 to 4 to 5. Only 30% of three year olds in the intact family cases were in early childhood education preschool, though 72% of children in out-of-home cases were. Majorities of 4 year olds, both from intact family and out-of-home cases, were in early childhood education. Finally, all of the Illinois 5 year olds in the sample, from both intact family and out-of-home cases, were involved in some education program. Many of the 5 year olds were in kindergarten, but many were in preschool or other educational programs as well. Although the numbers are too small to allow for an estimate, most of the caregivers of the 3 and 4 year olds who were not in early childhood education reported that their child was *too young for school*.

There are limitations to this analysis. Because we were not able to identify those children in accredited child care, and because some referrals to early childhood programs may have been in process, these percentages may be underestimates. Also, it is impossible to tell how much Illinois children's enrollment was initiated by DCFS versus by caregivers on their own.

FIGURE 2: Percentage of Illinois 3-5 year olds involved in substantiated investigations who were in early childhood education or kindergarten, by age



OUT-OF-HOME



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Nevertheless this analysis suggests some important conclusions. Illinois has made substantial progress and most young children receiving DCFS services are enrolled in educational programs. Most notably, the proportion of children in out-of-home care who receive early childhood education is dramatically higher than the proportion who receive it prior to entering out-of-home care.^{vii} Although we must be tentative because the results are not quite statistically significant, it appears that Illinois has a higher proportion of child victims in early childhood education than the rest of the country. Yet the data

suggest that some 3 and 4 year olds involved with DCFS, both in intact family and out-of-home placements, are not receiving early childhood education services (it seems unlikely that our inability to assess accredited child care would completely explain the gap). There is a need to enroll more children who have been maltreatment victims in early childhood education programs, especially nationally but also in Illinois. The potential to help undo at least in small part the effect of maltreatment and disadvantage is great and justifies a meaningful increase of educational opportunities for these young children.

¹ See, e.g., Twardosz, S. & Lutzker, J.R. (2010). Child maltreatment and the developing brain: A review of neuroscience perspectives. *Aggression and Violent Behavior*, *15*, 59–68; Aber, J. L., & Allen, J. P. (1987). The effects of maltreatment on young children's socioemotional development: An attachment theory perspective. *Developmental Psychology*, *23*, 406–414; Edleson, J. L. (1999). The overlap between child maltreatment and woman battering. *Violence Against Women*, *5*, 134–154; Merritt, D. (2009). Child abuse potential: Correlates with child maltreatment rates and structural measures of neighborhoods. *Children and Youth Services Review*, *31*, 927-934; Walsh, C., MacMillan, H.E., & Jamieson, E. (2003). The relationship between parental substance abuse and child maltreatment: Findings from the Ontario Health Study. *Child Abuse & Neglect*, *27*, 1409-1425; Debellis, M.D., Broussard, E.R., Herring, D.J., Wexler, S., Moritz, G., & Benitez, J.G. (2001). Psychiatric co-morbidity in caregivers and children involved in maltreatment: A pilot research study with policy implications. *Child Abuse & Neglect*, *25*, 923-944.

ⁱⁱ Jonson-Reid, M., Drake, B., Kim, J., Porterfield, S., & Han, L. (2004). A prospective analysis of the relationship between reported child maltreatment and special education eligibility among poor children. *Child Maltreatment*, *9*, 382–394; Kendall-Tackett, K. A., & Eckenrode, J. (1996). The effects of neglect on academic achievement and disciplinary problems: A developmental perspective. *Child Abuse & Neglect*, *20*, 16.

ⁱⁱⁱ See Cross, T.P. & Helton, J. (2010). Well-Being: Children, Parents, and Foster Parents. In Fuller, T.L. & Kearney, K. A. (Eds.), *Conditions of children in or at risk of foster care in Illinois* (pp. 5-1 – 5-17). Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign.

^{iv} See, e.g., Barnett, W.S. (January, 2006). *Benefits of Preschool for All*. National Institute for Early Education Research.
New Brunswick, NJ: Rutgers University. Available at *http://nieer.org/resources/files/Benefits.pdf*; Campbell, F.A., Ramey,
C.T., Pungello, E., Sparling, J., & Miller-Johnson, S. (2002). Early childhood education: Young adult outcomes from the
Abecedarian project. *Applied Developmental Science*, *6*, 42-57; Reynolds, A. J., Temple, J.A., Robertson, D.L., & Mann, E.A.
(2002). *Age 21 cost-benefit analysis of the Title I Chicago Child-Parent Centers*. (Discussion Paper no. 1245-02). Madison,
WI: Institute for Research on Poverty. Available online at *http://www.irp.wisc.edu/publications/dps/pdfs/dp124502.pdf*;
Schweinhart, L. J., Barnes, H. V., Weikart, D., Barnett, W.S., & Epstein, A. (1993). *Significant benefits: The High/Scope Perry Preschool study through age 27. Monographs of the High/Scope Educational Research Foundation No. 10.* Ypsilanti, MI: High/
Scope Educational Research Foundation.

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* Smithgall, C., Jarpe-Ratner, E., & Walker, L. (2010). Looking Back, Moving Forward: Using Integrated Assessments to Examine the Educational Experiences of Children Entering Foster Care. Chicago: Chapin Hall at the University of Chicago.

^{vi} See http://dcfswebresource.dcfs.illinois.gov/procedures/procedures_314/homepage.phtml?page=6#P591_80384

^{vii} See Smithgall et al., ibid

Recommended Citation

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Related Publications

Additional findings from the Illinois Survey of Child and Adolescent Well-Being can be found in: Cross, T. & Helton, J. (2010). Well-Being: Children, Parents, and Foster Parents. In T.L. Fuller & K.A. Kearney (Eds.), *Conditions of Children in or at Risk of Foster Care in Illinois: An Assessment of their Safety, Stability, Continuity, Permanence, and Well-Being* (pp. 5-1 – 5-17). Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign. This report is available on the Center website: cfrc.illinois.edu

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