

Child Care

The Problem

Nevada rates among the lowest in the nation regarding the strictness of childcare regulations. The National Association for the Education of Young Children (NAEYC), the leading early childhood education organization in the country, has developed best practice information for children birth through age 8 in childcare settings. Best practices include having a low staff to child ratio; small group sizes; staff educated in early childhood education and low staff turnover rates. Research has consistently shown that nurturing and educated caregivers who work with small groups of children are able to have more positive one-to-one interactions with the children in their care. Positive interactions with adults increases children's self-esteem, decision making skills and self-control. As children enter elementary school, the children who have been in high quality childcare situations will have higher academic skills, greater language development, more positive social interactions with peers and reduced behavior problems in school.

Although Nevada does have staff-to-child ratio requirements, the ratios are substantially higher than those recommended by NAEYC. In addition, Nevada has no group size regulation. This means that a whole group of children can be any size as long as ratios are met. For example, one could be in a room with 30 two-year-olds as long as there are three caregivers.

To work with young children in Nevada an individual must be 18 years of age, test negative for tuberculosis and pass a criminal history background check for any child abuse and neglect or assault related arrests. Staff are not required to have formal education to work in a childcare facility. However, individuals must complete 15 hours of continuing education each year with six of those hours being in child development. Most caregivers obtain these hours through 2-4 hour community workshops with no follow-up to see if the information is understood, practices have changed or knowledge has increased.

Childcare providers are underpaid and do not have benefits, such as paid sick leave, medical insurance, etc. In Nevada 76% of childcare providers earn less than \$20,000 per year and staff turnover rates in childcare are among the highest of any profession. Most professions have a 5-10% turnover rate. Rates for childcare are estimated between 30-50%. The Nevada Workforce Study found the turnover rate in Nevada is 46%. High turnover rates mean children do not have consistent and reliable caregivers with whom to bond, which means lower academic skills, less language development, fewer social skills and more behavior problems when these children enter elementary school.

Current Services

Nevada Association for the Education of Young Children (NevAEYC)

This chapter of the National Association for the Education of Young Children (NAEYC) is a statewide organization designed to serve and act on behalf of the needs, rights and well being of all young children and their families, with special emphasis on developmental and educational services and resources for a diverse population. The organization works to foster the growth and development of the membership in their work with, and on behalf of young children.

Nevada Early Childhood Conference annually provides continuing education hours for early childhood professionals throughout the state.

Teacher Education and Compensation Helps (T.E.A.C.H.) Early Childhood Project® provides compensation for education to early childhood professionals.

The Office of Early Care and Education in the Welfare Division of the Nevada Department of Human Resources promotes and provides support, education, and resources to Nevada's childcare community in order to increase the development of high-quality childcare environments for providers, families and children.

Accreditation Technical Assistance assists licensed facilities with the accreditation process through observations, training, quality improvement dollars, fees for accreditation materials and bonuses to facilities that obtain accreditation. Accrediting entities set higher standards for care a facility must meet and maintain in order to become accredited.

Introduction to Child Care Training Program (southern Nevada) provides a training program for New Employees of Nevada (NEON) participants interested in entering the early childhood profession.

The Nevada Registry is a recognition system for early childhood professionals, connects them to the career ladder, and approves training and trainers statewide.

The Nevada Child Care Apprenticeship Program provides financial assistance, education, mentoring, and training for novice early childhood professionals.

Children's Cabinet (Reno) and Economic Opportunity Board (Las Vegas)

These two organizations are the contractors for childcare subsidy dollars. Childcare subsidies are provided to income eligible families who are working to assist them with childcare costs. Both organizations offer a variety of other programs and services designed to increase the quality of childcare in their respective areas.

Gaps in Services

- Wrap-around childcare for Kindergarten, off-track and children with special needs is inadequate to meet the need.
- There is not enough infant/toddler care to meet the needs of families in Nevada.
- There are limited childcare options in rural areas of the state, where families may be forced to use unlicensed childcare.
- Wages for childcare providers are inadequate.
- High ratios and no group size requirements in licensing make poor working environments for staff and poor learning environments for children.

Nevada Can Do Better

- Implement a group size requirement and re-write the ratios so there are fewer children per staff member. Clarify the regulations so that ratios are computed for each classroom, not for the facility as a whole.
- Review exemptions in licensing requirements to reduce the number of unlicensed facilities.
- Coordinate licensing standards among the five licensing entities, provide opportunities for the entities to cooperate and collaborate with each other.
- Increase the requirements for becoming a childcare provider to include basic child development education.

Jessica's Story

Jessica works full time in a childcare facility earning \$7.00 per hour. She works in a classroom with one assistant. Since January she has had four different assistants. Jessica's classroom of 20 four-year-olds is small and not well-equipped. There are few toys and activities for the children. The children are aggressive and undirected most of the day. Jessica is so frustrated she gave her notice this morning.

Submitted by the Child and Family Research Center, Human Development and Family Studies Department in the College of Human and Community Sciences at the University of Nevada, Reno.

Fair Housing

The Problem

Fair housing refers to state and federal fair housing laws prohibiting discrimination in the provision of housing (rental, sales, lending, insurance, advertising). Incorporated into the Nevada Revised Statutes at 118.010 to 118.120, the Nevada Fair Housing Law prohibits discrimination in the provision of housing because of race, religious creed, color, national origin, disability, ancestry, familial status or sex. Except for the ancestry protection, the Nevada Fair Housing Law mirrors the protections of the federal Fair Housing Act. Housing discrimination affects all persons, regardless of economic status. There is currently no state agency processing housing discrimination complaints in Nevada.

Whether in rural communities with limited housing opportunities available, or rapidly growing urban centers where demand for affordable housing exceeds supply, housing providers in an increasingly restricted housing market may become more choosy about whom they will accept, often to the detriment of groups protected under the Nevada Fair Housing Law and the federal Fair Housing Act. The U.S. Department of Housing and Urban Development (HUD) and private fair housing groups in Nevada receive complaints based on all protected classes. Claims of racial harassment are increasing. Families with children may be steered only to ground-floor residences, or segregated within a housing complex. Racial- and ethnic-minority mortgage loan applicants are often steered to less favorable loan products.

In addition to the barriers faced by members of other protected classes, people with disabilities may face resistance when requesting reasonable modifications or accommodations, to which they are entitled, that will allow them to enjoy the full benefit of their housing. Housing providers are often unaware of the obligation to consider such a request, thereby denying a person with a disability access to housing for which they are otherwise eligible. Provisions for accessibility in new multifamily housing, mandated by

state and federal fair housing law, have not been incorporated into many building codes within the state. As a result, thousands of housing units are not accessible to persons with disabilities. Individual lawsuits and housing discrimination complaints have resulted in retrofitting of units, but do not address the ongoing lack of knowledge and compliance.

Current Services

Fair housing services in Nevada are generally provided by private non-profit agencies. Silver State Fair Housing Council, based in Reno, and Nevada Fair Housing Center in Las Vegas provide a variety of services to promote equal housing opportunity and compliance with fair housing laws. Funding sources for fair housing activities are extremely competitive and resources are limited. Services may include fair housing education and outreach, housing discrimination testing, assistance with predatory and fair lending issues, and assistance in filing housing discrimination complaints, either through the HUD administrative process or through litigation.

Gaps in Services

Nevada has no state agency to accept and investigate housing discrimination complaints. Residents who experience illegal housing discrimination must either file a civil lawsuit or file an administrative complaint with HUD. Many persons who experience housing discrimination do not have the resources to file a civil action. The HUD complaint process can be an effective, no-cost alternative, but Nevadans find themselves dealing with the HUD hub office in San Francisco, rather than someone within the state. Fair housing agencies may help to facilitate fair housing complaints, but funding for these agencies is extremely limited.

Tammy's Story

Tammy is a widow on a limited income. To alleviate the outcomes of her disability, Tammy has two cats that provide her with companionship and emotional support. Tammy refers to the cats as "my angels." When Tammy moved to her apartment complex she was told that she would have to pay a pet deposit and \$10 per month, per cat for pet rent. Because the thought of getting rid of the cats "makes my heart hurt," Tammy paid the deposit and the additional monthly rent. Paying the additional rent often meant that Tammy went without basic necessities. When Tammy became aware that federal and state fair housing laws allow people with disabilities to request reasonable accommodations to normal rules, policies, and procedures, such as requesting a waiver of pet fees to accommodate an assisting animal, Tammy contacted her local fair housing agency. Tammy received assistance in making a written reasonable accommodation request to her landlord, asking that pet rent be waived for her cats. She included a prescription from her doctor verifying her need for the cats. Tammy's request was denied, as was a follow-up request from the fair housing agency. With assistance from the fair housing agency, Tammy filed a housing discrimination complaint with the U.S. Department of Housing and Urban Development (HUD). Tammy's complaint against the landlord was conciliated through the HUD process. She received a refund of the initial pet deposit and the pet rent she had previously paid. She no longer pays pet rent for her assisting animals, and continues to be able to live independently.

Nevada Can Do Better

- Develop an administrative complaint process and funding to allow the state agency designated in the Nevada Revised Statutes to enforce fair housing laws.
- Provide statewide funding for education about fair housing laws.
- Promote adoption of building codes that incorporate fair housing design and construction requirements for all new multifamily dwellings.

Healthcare Access

The Problem

Nevada has one of the highest rates of people without health insurance, a problem that causes major health disparities in our state. People without health insurance are less likely to receive such important preventative services as mammograms, cervical cancer screening, prostate cancer screenings, and dental care leading to more intense health problems down the line. People without health insurance also often end up seeking care in hospital emergency rooms, which is not only the most expensive way to access health care but often comes at a point when an illness or condition has become more serious.

From a community perspective, having a large low-income uninsured population causes a number of challenges to the overall system. Providers and emergency rooms are often overcrowded, causing problems for all health care consumers (insured and uninsured). Without adequate programs to serve the uninsured, all other health care consumers end up absorbing the cost. This is a major problem as everyone experiences escalating health care costs.

Not all Nevadans without health insurance are low-income. Many individuals are unable to purchase health insurance because of prior existing conditions, even when those conditions are excluded from coverage. Not only do they have to pay for all medical treatment themselves, they do not receive the same discounts insurers get for settling accounts within a certain time period.

The statistics speak for themselves:

- Nevada has the 4th highest percentage of the adult population without insurance – 25.6%.
- Nevada has the 5th highest rate of workers who are uninsured – 21.4% of employed adults are uninsured.
- We have the highest proportion of uninsured adults that live with at least one child – 62.7%. This poses a challenge in families where children are eligible for health insurance programs but the adults in the family are not.

- We have the largest disparity (41.7%) of any state between uninsurance rates of Hispanics and whites – 15.9% of whites are uninsured, compared to 57.7% of Hispanics.
- Over 80% of the uninsured in Nevada are part of a working family. Many work full-time jobs but are either not offered health insurance by their employer or are offered insurance that is not affordable within the constraints of their income.

Current Services

Nevada's current system for providing health care services to the uninsured relies on "safety-net" facilities (such as University Medical Center in Clark County), a small core of community health centers, and a patchwork of small clinics and special projects that provide services to specific populations. These programs provide an amazing array of services to the uninsured but are always overwhelmed beyond their capacity as the problem is so much larger than any one of these facilities or projects can absorb.

In addition to this network of services, there are specific state-federal programs that help low-income uninsured access health care services. These programs have very specific eligibility criteria and in many areas Nevada has the most stringent eligibility requirements among states. For instance, Nevada has kept the federal minimum for covering uninsured pregnant women through Medicaid despite the trend of most of other states to raise this eligibility and cover more women. Nevada's Medicaid and Children's Health Insurance Program (Nevada CheckUp) both provide important health care services, but like the community health services they are overwhelmed by the large problem and restricted in their ability to expand services because of eligibility and funding issues.

Gaps in Services

The many gaps in health care access are a reflection of the patchwork of services available and the overwhelming number of people who lack services. There is a major lack in continuity of care as many uninsured people access health care only in the emergency care setting and so do not have regular, preventative care. Gaps in eligibility criteria among the different programs available make access a challenge for many. For example, uninsured families are often faced with programs and services for which only some family members are eligible.

Alison's Story

Alison lives in Las Vegas and works full-time. She works for a small, local business that is unable to provide employer-sponsored health insurance. Alison has several chronic health problems that require regular physician care and daily medication. She is not eligible for Medicaid because of her income, although her children are eligible for Nevada CheckUp. With children to support she needs to work but has no access to health insurance. As a result, Alison often has to choose between important medication and care she needs and the financial demands of caring for her family. As a result, her medical conditions have worsened and she frequently has to seek care in hospital emergency rooms.

Nevada Can Do Better

- Claim unused federal funds to expand health care services.
- Increase Medicaid eligibility limits for pregnant women, a service that has huge benefits as prenatal care services help decrease health care problems later in children's lives.
- Create new programs to help the working poor afford health insurance that is currently available but inaccessible because of the cost.
- Strengthen safety-net providers and add additional capacity with new innovative services.
- Improve availability of primary care services.
- Ensure that billing of the uninsured is more equitable.

Submitted by the Culinary Workers Union.

Hunger and Nutrition

The Problem

Hunger exists as a paradox in our country, the richest in the world. In 2002, 12.1 million (11.1%) of US households were food insecure, lacking access to enough food to meet their basic needs at all times, and this number is on the rise. Food insecurity of 10.1% in Nevada is just slightly below the national rate of 10.4%. The living wage required to cover basic expenses in Nevada is more than twice the poverty threshold, and food prices are predicted to rise by 4% in 2004, the biggest increase in 14 years. Over 100,000 of our working families and seniors have annual incomes below \$15,000, having to make the hard choices between paying rent and utilities and buying food. These vulnerable citizens are especially hard hit by hunger, and the resulting mental and physical changes negatively affect learning and development, school achievement, ability to be productive, physical and mental health, and family life. Parents are working longer hours, many working two jobs, and their children are still hungry. Four of ten Nevada students live in families poor enough to qualify for free or reduced-price school meals, and nearly one in five lives in a food insecure household.

Current Services

Nevada has a range of nutrition and food assistance programs to help hungry people, but the need exceeds the resources. The **Food Stamp Program** currently serves almost 24 million people per month. Monthly food benefits average approximately \$86 per person. The federal government pays 100% of the food stamp benefits. The administrative costs are shared with the state which must pay 50% of the total costs and the federal government pays the remaining 50%. Nevada operates an electronic benefits transfer Food Stamp benefit issuance system and approved household's benefits are deposited into an account, accessed by using their individual Nevada EBT Quest card. The Nevada **School Breakfast Program** serves about 39,000 chil-

dren each day at 403 schools, and the **School Lunch Program** serves about 128,000 students each day at 464 schools. The **Summer Food Service Program** provides nutritious meals to about 5,000 children at 82 sites when schools are closed for the summer or during breaks. The **Child and Adult Food Care Program** (CAFCP) provides about 5,500 meals each day to children in child care centers, licensed family day care homes and emergency shelters. In 2002, Nevada had the second largest increase in the nation in numbers potentially eligible for the federally funded **Women, Infants and Children Program** (WIC). The caseload has increased by almost 7,000 over the past year, and WIC currently serves 45,800 pregnant, postpartum and lactating women (11,800), infants (13,000), and children (21,000) ages 1 to 5 who meet health, nutrition risk and income guidelines (185% of federal poverty level) each month. Nevada's **KID's Café** in Washoe County serves nutritionally balanced, free, summer and after school meals to about 2,000 low-income children in 27 low-income neighborhoods through collaboration with the Food Bank of Northern Nevada, the Nevada Department of Education, and other community organizations. Statewide **Elderly Nutrition Programs** provide seniors with good nutrition, giving them a better chance to remain healthy and continue to live independent, productive lives. Last year, almost 1.4 million meals (about 60% home delivered and 40% congregate) were served to over 14,000 seniors at 57 locations throughout the state (32 in the north and 25 in the south). About 60% of the seniors served are women, and at least 30% of the seniors live below poverty. **Food Banks**, working in partnership with many community business and agencies, serve a critical function in the fight against hunger by providing donated and purchased food to hungry people through emergency shelters, senior feeding programs, assisted living facilities and day care programs for low-income children. Last year the **Northern Nevada Food Bank** distributed over 3.5 million

pounds of food worth \$4.5 million to more than 40,000 individuals at 80 agencies covering an area of 80,000 square miles in 13 northern Nevada and 8 adjacent California counties. Sixty eight percent of individuals needing food assistance last year were under 18 or over 65 years of age. The **Commodity Food Distribution Program** administered by the Nevada Purchasing Division distributes foods purchased by USDA to school nutrition programs, charitable institutions, emergency food assistance programs, and Indian reservations for redistribution to low income citizens. The **Commodity Supplemental Food Program** was added in 2002 to provide supplemental foods to low-income pregnant and breastfeeding women, infants and children up to age 6, and elderly people age 60 and older.

Gaps in Services

Studies have repeatedly shown that hungry children have lower scores on standardized tests, miss more days of school due to illness, and have more behavior and discipline problems, yet not all of our schools offer breakfast ($\pm 75\%$ of schools) or lunch ($\pm 85\%$ of schools) programs, respectively. In the 2002-2003 school year, 125,828 children (41% of all enrolled students) qualified for free or reduced priced **school meals**, but only about 73% and 25% of these participated in the lunch and breakfast programs, respectively.

Studies show that every \$1 invested in **WIC** results in savings of public and private health care dollars of \$4. Yet only 75% of Nevada residents who are potentially eligible for WIC services can be served with combined federal funds and infant formula manufacturer rebates.

Less than half of Nevada citizens who are in need of food assistance and who qualify for Food Stamps actually get benefits. Participation in the **Food Stamp Program** approached 100,000 per month in 2002, but this only represents 35-45% of those who are eligible.

The need for additional meals and sites continues to increase while federal funding and reimbursement rates remain static. Additional support for these programs is critical to help elderly people remain independent.

Nevada Can Do Better

- Expand participation in breakfast and summer meal programs. Provide incentives, subsidies, matching funds for federal dollars, start-up and training funds, and encourage schools to offer universal free breakfast programs.
- Increase outreach efforts and simplify the application process to provide Food Stamps to all eligible citizens.
- Support expansion of the WIC and KIDS Café programs to reach all eligible participants.
- Expand participation in the senior meals programs and to homebound elderly or needy ill persons by funding additional food and staff, vehicles, delivery equipment and driver.
- Provide additional funding for emergency food services (food banks, pantries, and soup kitchens) to allow for purchase of nutritious food items that are not normally donated.
- Encourage Nevada businesses to pay their employees a living wage so families can lift themselves out of poverty and achieve food security.

Submitted by the Nevada Dietetic Association and the Food Bank of Northern Nevada

Temporary Assistance to Needy Families (TANF)

The Problem

Families are on welfare because of poor child support enforcement, lack of jobs that pay a living wage, lack of adequate job training, high costs of child care, a gender-biased wage structure, failure of employers to offer health insurance, low wages in the service industry, and a lack of affordable housing. Until there is progress in these sectors of our society there will be children and women who cannot survive without programs like TANF and subsidized housing.

Between 1990 and 2000 the number of Nevadans living below the federal poverty level jumped from roughly 120,000 to 205,000 (71%), even before the economy slumped. According to the U.S. Census Bureau an additional 22,281 Nevada children fell into poverty between 2000 and 2003.

Nevada's rapidly increasing number of TANF recipients peaked at 42,703 in March 1995. Nearly 70% of these were children. Currently approximately 75% of TANF recipients are children. Federal welfare reform legislation in 1996 replaced the old Aid to Dependent Children program (a cash grant to families split 50-50 between the state and federal governments) with a TANF block grant. To obtain the federal grant, states had only to spend the amount of money they were spending in 1996. Qualifying persons no longer have a legal entitlement to benefits and the state has little ability to obtain extra federal funds if caseloads increase.

Due to an improved economy and welfare reform efforts, the caseload dropped by almost 64% by March 2000, to 15,487. As a result Nevada accumulated surplus federal TANF funds from which a reserve was created for rainy day. A number of new services were funded with TANF dollars. As the economy slowed in 2001, and as a result of the massive layoffs after the tragic events of September 11, 2001, the caseload climbed steadily, exceeding 35,000 in both May and August 2002.

Nevada began State Fiscal Year 02 with a \$22 million reserve in TANF funds. That reserve is

virtually gone. During SFY 03, the Welfare Division cut contracts and programs in excess of \$10 million to stay within the TANF budget. Contracts with domestic violence service providers were reduced. The ability of TANF recipients to keep the first \$75 in current child support before the balance goes to reimburse the state for the TANF grant was eliminated.

Such program enhancements as a plan to increase the grant level over two years from \$348 for a family of three to \$535 for ill and incapacitated families were never implemented.

The 2001 Legislature created a new program for caretaker relatives (usually grandparents) over the age of 62 who obtain legal guardianships of children, which paid \$534 monthly for children up to 12 and \$616 for those over 12. Grant levels were drastically reduced during fiscal year 2003 but were restored in summer 2004.

The Non-Needy Caretaker and Kinship Care programs, as originally designed, were available to relatives assuming care of related children without regard to income. This approach was logical in that if these relatives did not take responsibility the children would go into the far more expensive foster care system. These programs are now limited to relatives whose incomes do not exceed 250% of the poverty level.

Nevada has always had inadequate welfare payments. The maximum monthly TANF grant for a family of three of \$348 has been unchanged since February 1992 and ranks 31st among the 50 states and Washington DC. Alaska ranks first with \$923 and Alabama ranks last with \$164.

Current Services

The 1991 Legislature approved a welfare grant level of \$372 per month for a family of three. This was rolled back to \$348 per month on February 1, 1992 due to state budget reductions. For a family with public housing subsidies the grant was reduced to \$272 per month for a family of three. The last six Legislatures left these levels intact. These grants remain far below what is needed for basic necessities.

The number of TANF cash grant recipients dropped below 27,500 by the end of the 2003 Special Session. The Legislature appropriated sufficient funds to cover growth to over 32,500 by the end of the biennium. Caseloads continued to drop however, and as of September 2004 were at 22,985.

Gaps in Services

The Nevada standard of need is a legislatively approved formula linked to the cost of basic necessities. It presumes that no money is needed for food, due to the likely receipt of food stamps. When the formula was adopted in 1987 the standard of need for a family of three was \$550. The maximum grant level for this family without a housing subsidy was \$330, or 60% of need (the monthly grant for a family of three with a housing subsidy has been \$272 since 1992). The percentage of need covered by Nevada's grants has eroded drastically since 1987. For the year beginning July 1, 2004, the standard of need for the family of three was \$934, while the maximum payment remained \$348 (37.3% of need). To cover 60% of need in 2002 a payment of \$561 per month would be needed.

Nevada Can Do Better

- Restore the grant level to 60% of need.
- Fund caseload growth and needed staffing increases using General Fund dollars to the extent necessary to avoid cutting benefit levels or tightening eligibility criteria.
- Restore the \$75 child support pass through.
- Fully fund such support services as child care, training and job development.
- Support efforts to create jobs paying a living wage.
- Restore the grant increases approved by the 2001 Legislature for ill and incapacitated TANF families

Submitted by the TANF Coalition, a coalition of organizations and individuals advocating on behalf of families in poverty, and the National Association of Social Workers, Nevada Chapter.

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