



Testimony Opposing S.B. 316: An Act Establishing a Child Care Facility Neighbor Relations Task Force

Testimony Supporting H.B. 5330: An Act Concerning Homeless Families Enrolling in Child Care

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Committee on Children
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Senator Moore, Senator Suzio, Representative Urban, Representative Zupkus, and esteemed members of the Committee on Children:

My name is Nicole Updegrove, and I am submitting testimony on behalf of Connecticut Voices for Children, a research-based child advocacy organization working to ensure that all Connecticut children have an equitable opportunity to achieve their full potential. Thank you for the opportunity to submit this testimony opposing S.B. 18-316, An Act Establishing a Child Care Facility Neighbor Relations Task Force, and in support of H.B. 18-5330, An Act Concerning Homeless Families Enrolling in Child Care.

Testimony Opposing S.B. 316

Senate Bill 316 would establish a task force to study strategies to improve relationships between group homes that house child welfare-involved youth and youth receiving intensive behavioral health services and residents of the towns in which the facilities are located. **Connecticut Voices for Children opposes this bill because its charge and its proposed membership risk casting foster youth as a problem to those around them, rather than as constituents with their own concerns, needs, and value to add to their communities.** In the event that an issue arises in a neighborhood, it should be addressed on an individual basis as it would be for any other resident of the neighborhood.

The majority of the topics this bill charges the task force with considering reflect neighborhood concerns about safety and safety-related costs. DCF-involved youth often face stigma,¹ and some neighborhoods may object to their local group homes. However, youth are often placed in group homes because an adequate foster family has not yet been found for them or because they are receiving care for a health problem, not because they are a danger to their community. Foster children in DCF care are among our most vulnerable due to childhood trauma and neglect. Those residing in group homes are made more vulnerable by growing up without the stability and normalcy of residing with a family. However, group home settings still endeavor to provide youth a childhood that is as normal as possible.

Today, many group homes in Connecticut are unlocked facilities – they are open, community-based housing settings in neighborhoods, giving youth safety, structure, and community integration. Most youth leave the home each day to attend school and participate in sports or other extracurricular activities like any other child. Youth residing in group homes should not be singled out for increased scrutiny or police action.

Although Connecticut Voices for Children believes that this task force could be stigmatizing and harmful rather than helpful to neighborhood relations, if systematic issues exist in the operation of group home facilities, youth should be part of that solution. Connecticut has been a leader in integrating youth voice in discussions of their affairs: for years, youth representatives have served in formal capacities on committees and groups working to address issues including homelessness, child welfare, and juvenile justice. As written, this proposed task force’s representation does not include any youth who live in said group homes or caretakers from group homes. **If this task force is created, we would strongly encourage the Committee to include on the task force at least two youth residents of group homes and one caretaker appointed by the Commissioner of the Department of Children and Families.** Youth and staff representation will help ensure that recommendations are unbiased, trauma-informed, developmentally appropriate, and responsive to the needs of *all* residents, both youth and adult.

Testimony Supporting H.B. 5330

Connecticut Voices for Children supports H.B. 5330, which would provide a 90-day immunization waiver for homeless children to attend child care while giving their parents time to attain appropriate documentation.

For a low-income parent, being pregnant or having a young child is associated with heightened risk of seeking or entering a homeless shelter.² Connecticut’s most recent point-in-time count identified 1,180 individuals in 392 families experiencing homelessness.³ National trends show that among homeless children, nearly half are under age six.⁴ Access to high quality early care and education is extremely important for all children, but especially for young children in vulnerable circumstances. Homelessness in itself is disruptive and traumatic to children, and it leaves children vulnerable to further traumas including assault or abrupt separation from caregivers.⁵

Enrollment in child care programs and preschool can provide stability and support for children and allow parents to search for jobs, work or participate in job training, and search for permanent housing. However, families seeking child care often face barriers to accessing care, including high mobility, lack of transportation, and lack of documentation.⁶ Removing barriers to supportive services is necessary for the wellbeing of children and their parents as well as an important step to strengthening Connecticut’s workforce.

In recognition of the importance of child care for homeless families, reauthorization of the federal Child Care Development Block Grant in 2014 required that states develop strategies to facilitate homeless families’ access to state-subsidized child care in a number of ways. Among these requirements, states must establish a grace period to allow homeless children to receive subsidized child care while their families reach compliance with immunization requirements.⁷ **House Bill 5330 is in accordance with federal law and with our state Child Care Development Fund implementation plan.⁸ It will help homeless families access child care that is critical to keeping vulnerable children safe and lowering barriers to parents’ employment.**

Thank you for the opportunity to submit testimony. I can be reached with any questions at nupdegrove@ctvoices.org or at 203-498-4240, ext. 107.

¹ Ridge T and Millar J, (2000). “Excluding Children: Autonomy, Friendship and the Experience of the Care System.” *Social Policy and Administration* 34:2, pp 160–75.

² Shinn M, Greer AL, Bainbridge J, Kwon J, Zuiderveen S. (2013). “Efficient targeting of homelessness prevention services for families.” *American Journal of Public Health*. 103 (Suppl 2), S324-S330. doi:10.2105/AJPH.2013.301468.

³ Connecticut Coalition to End Homelessness. (2017, May). “Connecticut Counts: Report on Homelessness in Connecticut.” Retrieved from: <http://cceh.org/wp-content/uploads/2017/05/CT-Counts-2017.pdf>.

⁴ Child Trends. (2015, October). “Homeless Children and Youth: Indicators of Child and Youth Well-Being.” Retrieved from: https://www.childtrends.org/wp-content/uploads/2015/10/112_Homeless_Children_and_Youth.pdf.

⁵ Bassuk E and Friedman S. The National Child Traumatic Stress Network Homelessness and Extreme Poverty Working Group. (2005). “Facts on Trauma and Homeless Children.” Retrieved from:

http://www.nctsn.org/nctsn_assets/pdfs/promising_practices/Facts_on_Trauma_and_Homeless_Children.pdf.

⁶ National Center for Homeless Education. (2013). “Early Care and Education for Children Experiencing Homelessness.” Retrieved from: <https://nche.ed.gov/downloads/briefs/early-childhood.pdf>.

⁷ D.H.H.S. Administration for Children and Families Office of Child Care. (2016, Dec. 14). “Child Care Development Fund Final Rule Frequently Asked Questions.” Retrieved from: <https://www.acf.hhs.gov/occ/resource/ccdf-final-rule-faq>.

⁸ Connecticut Office of Early Childhood. (2016, June 27). “Connecticut Child Care Development Fund (CCDF) Plan with Conditional Approval Letter for FY 2016-2018.” Retrieved from:

https://www.acf.hhs.gov/sites/default/files/occ/connecticut_stplan_pdf_2016.pdf.