



Early Childhood Policy Council

Meeting Agenda, Attendance, and Summary Report

Tuesday, June 20, 2023
9:00 a.m. – 12:00 p.m.

Physical Meeting: 1000 G St, Sacramento, CA 95814, WestEd, Floor 5, Capitol Room

Agenda

1. Welcome and Introductions
 - Welcome
 - Voices from the field
 - Update from Chairs of Advisory Committees
 - Public comment
2. Child Care Transition Quarterly Report
 - Update from the California Department of Social Services on the transition of child care programs
 - Council questions and discussion
 - Public comment
3. California Department of Education Updates
 - Report on early childhood updates
 - Council questions and discussion
 - Public comment
4. Addressing the Unique Needs of California's Diverse Infants and Toddlers
 - Panel and Council discussion
 - Public comment
5. Adjourn

Attendance:

Council Members: Kim Johnson, Antoinette Jacobs, Cheryl Polk, Donna Sneeringer, Kim Patillo-Brownson, Laura (Kay) Ruhstaller, Lupe Jaime-Mileham, Mayra E. Alvarez, Natali Gaxiola, Robin Layton, Sarah Neville-Morgan, Sonia Jaramillo, Janet Zamudio, Tonia McMillian, Miren Algorri, Mary Ignatius

Parent Advisory Committee Members: Deborah Corley-Marzett, Naima Facih, Mary Ignatius, Patricia Lozano, Patrick MacFarlane, Yenni Rivera, Cheryl Schroeder

Workforce Advisory Committee Members: Miren Algorri, Tonia McMillian, Virginia

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Summary Report:

Welcome and Introductions: Kim Johnson, Chair

Kim Johnson, director of the California Department of Social Services (CDSS), opened the second Early Childhood Policy Council (ECPC) meeting of 2023. She welcomed attendees and thanked the Council, Advisory Committee, and members of the public for their time, continued engagement supporting children and families across California, and suggestions to the Governor, his administration, and the Legislature during ongoing budget negotiations.

Director Johnson acknowledged several June commemorations including the state's observance of Juneteenth National Independence Day (June 19), World Refugee Day (June 20), and LGBTQ Pride Month. She shared the Governor's Juneteenth proclamation, which recognized the continued need to combat structural and institutional racism to achieve a vision of absolute equality. She also gave special recognition to the contributions of immigrants and refugees, especially in California's rich history. She recognized refugees' journeys from their homelands to seek additional supports and safety for themselves and families. She also affirmed CDSS' celebration of the rich diversity of the LGBTQ community. She stated that California's diversity makes the state stronger and encouraged attendees to find opportunities to continue to learn and grow.

Director Johnson thanked the Council members and all who have shaped the ECPC meeting agendas for 2023. After a brief overview of the agenda, Dr. Johnson welcomed **Miren Algorri**, owner of Algorri Family Child Care and a member of the Workforce Advisory Committee.

Ms. Algorri thanked Director Johnson and introduced herself noting that she is happy to share the meeting space with amazing workforce members, parents, and child care advocates.

Ms. Algorri summarized her experiences and feelings as an early childhood educator in a home setting in San Diego County. She stated that she is honored to serve her community, feels overjoyed when she sees our young learners achieving milestones, is incredibly proud of the parents she serves as they receive job promotions, complete GEDs, or as they graduate from college. However, she also noted that as a member of the child care workforce, "what I feel is uncertainty, worry, and anxiety. I cannot believe that after 26 years of being a licensed provider, I have been considering closing my child care and getting another job that entitles some benefits as I have none."

Ms. Algorri expressed concerns about how costs, reimbursement rates, and workforce sector conditions will impact her business and her ability to serve the community. "I do not know if I will be able to keep my doors open since the cost of operations have grown exponentially since the pandemic started. How can I continue to run my family child care (FCC) program with what I get paid through the subsidy system? One hundred percent of the families who I have the honor to serve receive subsidized services, and the regional market rate is so low that some months I cannot afford to pay myself a salary. I provide services to my community. I educate and take care of the future workforce of the

state. But I do not make a livable wage. I worry that I will not be able to continue to pay my employees their wages. We create jobs as [FCC] providers, not only we support the workforce, not only we are the workforce behind the workforce, but we create jobs.”

Ms. Algorri elaborated on the diverse needs of the families she serves and addressed the possibility of losing clients if family fees are imposed this fall. “Without assistance, I cannot meet the needs of most of the families I serve because I would not be able to provide transportation services. Many of the families rely on me to provide transportation to and from school. I get worried about the child care district that I live in, that it'll become a more constraining issue to our families, the families that are already underserved and struggling to make ends meet. And on top of that, not having access to quality, affordable, and readily available child care services. I'm extremely anxious about families having to pay family fees once more because, for these families, it makes a difference between pumping gas, putting food on their tables, or having a roof above their heads. And it may sound extreme, but it's not. This is the reality of the families that we work with, the families that are struggling, and I'm extremely anxious about September 30.”

Ms. Algorri advocated for solutions in the child care system and shared her outlook on the child care profession in California by paraphrasing parent and child care advocate Patrick MacFarlane. “The child care system is not broken. It just does not work for the population that it's supposed to serve and does not work for the workforce behind it. I'm the type of person that brings solutions, who comes up with ways to fix issues, who innovates, because I'm a child care provider and that's what we do. We must implement the true cost of care system model so early childhood educators can stay as part of the workforce, so programs won't be forced to close their doors, and so we can entice the younger generations to join the workforce because this workforce is dying out. Providers are being forced into retirement. I have been in spaces where people have asked me in the past, ‘So what are your plans? What are you planning on doing with your life?’ We are shaping the next generation, the workforce that is going to be running this beautiful state. It is insulting to know that we are not viewed as professionals.”

Ms. Algorri advocated for the immediate implementation of true cost of care model. “We cannot allow for families to struggle. We cannot allow the workforce to continue to struggle. Let's look at the data. Let's look at all the licensed [FCC] providers who have closed their doors, those [family, friends, and neighbors] that cannot continue to support their loved ones, their neighbors, and their friends. But there's a solution. The true cost of care model is a solution, but it doesn't mean that we're going to wait until 2025 for it to be implemented. We cannot wait. What do we tell these little ones? What do we tell these parents? ‘We're going to put you on hold till 2025 when we're able to implement this true cost of care model.’ We cannot afford waiting anymore. An immediate solution is implementing a 25 percent increment into the [regional market rate]. The regional market rate data is obsolete. It's from 2016, but that's what we have, and that's what we have to use at this point, an immediate increase of rates so providers like myself can continue to be part of this workforce. So we can continue to support the children and we can continue to support the families and we can continue to contribute to the economy of California. Without child care, parents won't be able to go to work. Parents cannot go to school and attain their degrees. We must get a 25 percent rate increase immediately so we can continue to keep our doors open and we can help mitigate those child care

deserts. A 25 percent increase means that providers keep their doors open, that other individuals are enticed to join the workforce, that we mitigate those child care deserts.”

Ms. Algorri also advocated for a continuation of the family fees waiver. “When you build these partnerships, these strong relationships with the parents, and you know about their struggles, you get very anxious because you know what they're going through. Because you know that every penny matters to them. These family fees will change these families, families who have been able to save some money by having the family fees waived in the past. When you become so close to your families, when these children have been under your care for six, seven, eight years...and you become so close to the parents and you have the utmost respect for these hardworking parents and you know that these family fees are taking a toll on their mental health. Many families are going to have to choose between having child care services or a roof above their heads. And this is not an exaggeration. This is what these families are facing, and we cannot inflict such stress on our families and young ones. California must do better for and to their most unprivileged population.”

“Let's implement the true cost of care model as soon as possible, not in 2025. We need immediate action. Immediate action means, like I said, increasing the regional market rate by 25 percent effective July 1, expedite the implementation of the true cost of care model, and continue to waive family fees past September 30, 2023. These solutions will stabilize this child care system, strengthen the workforce, and support our most vulnerable and most precious asset, our young learners. We must support and strength the early learning and care workforce because California runs on child care.”

Director Johnson thanked Ms. Algorri for sharing her experience and recommendations. She then invited San Diego County resident **Yara Padilla** to share her experience as a parent.

Ms. Padilla expressed how important it is to her, as a working mother, to have access to subsidized child care services at Algorri Family Child Care. “I have nobody else as a support group but Ms. Algorri and her staff. My nine-year-old has been with her since she was three. So we're talking about six years now and it's been a rough road. It's only been maybe around two months that I've had the opportunity to be an independent woman and have privacy for my daughter, especially because I was able to save a little bit of money during the waiver we had for the family fees. And it's been a struggle just knowing that I fall into a bracket where I get requested to pay around \$250–\$300. I spoke to Ms. Algorri and let her know that there is no way I would be able to pay for that. It's either child care services or continue to have my lease for the next month.”

Ms. Padilla discussed how a financial shortfall left her temporarily living out of her car. During that time she was working an essential job, pursuing school to advance her career, and trying to cover family expenses. She commuted over two hours each day between work and Ms. Algorri's child care facility, all to make sure her daughter “was not in the streets.” Ms. Padilla shared, “It has impacted my daughter in so many ways. There has been days where I had to stay in my car because I couldn't afford living or having a space of my own. I serve the community, too. I work for a pharmacy. I was an essential worker during the three years we had COVID. I was not staying home. I was making sure I was getting to work, exposing myself.

"It's very important to have child care services in every single way. There's no way I could serve the community... making sure that everybody who needs their medication has it on time. I also attend school, so that's also very important for me to make sure that I complete my career. I'm basically a year and a half away from completing my career. But knowing what's upcoming for me, it's very scary just because I know I would have to let go of Algorri's child care services because I cannot afford to pay the \$235 per month. That's basically going to make me decide whether I have a roof over my daughter's head or go to work. Everything that I've gained, I would completely lose."

Director Johnson thanked Ms. Padilla for advocating for parents by sharing her story to help the council understand what changes in the child care structure would mean to her. Further, Director Johnson wished Ms. Padilla the best on her educational path and career and thanked both Ms. Algorri and Ms. Padilla.

Selected public comments:

"Our families are not alone and we have several organizations that are working for change. I am also part of ECE Voices and was able to attend last week to a hearing in Sacramento and had the privilege to hear and speak on behalf of children. We need an ongoing rate increase, not a stipend. We need to let Governor Newsom know we don't need band-aid anymore in this field. Our families are struggling to make ends meet, and the fact that both General Child Care and Development (CCTR) and California State Preschool Program are not in alignment with each other means parents have to pick which child is going to attend at all."

"We are a workforce that is primarily people of color and has many immigrants among our workforce. We deserve stability of an ongoing pay increase and the security of a date certain when we will move to the cost of care. We deserve respect! For months our calls at the bargaining table have been met with stalling, delays and finally counters that come nothing close to what we need. We need to see respect for this industry in words and actions at the table. If this council is serious about giving our babies a strong foundation to grow and prosper, then we can't continue to ignore the very real challenges providers and parents are dealing with RIGHT NOW!"

"Thank you to Yara and Miren, you really encompassed what the difficulties are being a parent and a provider. We need to make the proper changes, keep families in quality care and offer FCCs quality pay."

"Thank you to Yara (Padilla) and Miren (Algorri) for the information and the cruel reality of so many of our families."

"Thank you Miren (Algorri) and Yara (Padilla). I feel your concern and heart. We need our leaders and advisory chairs and leaders help the disrespect and ignoring real institutionalized oppression is unbelievable. I'm traumatized with no way of certainty to recover what I obtained. Going through intimidation by license managers and county leaders this is more concerning than I thought. To be told there is no help when we been creating nothing but resources and solutions. Where is the help to be what parents and children need? I'm so broken by this system. This is organized institutional oppression. I need help."

“Center-based care is experiencing the same and needs to be included in the conversation. I have been operating my centers for 27 years and considering closing them. I often go without or very little pay to ensure my staff is paid. The RMR is a complete insult. There is no reason we should not be reimbursed at 100% of the actual cost of care. We risked everything over the last three years, and now we get ignored? Shame on California if they do not come to the table and listen to the recommendations.”

“We need rates according with the real and actual cost of living. It is impossible to be working with old rates.”

“Thank you, Miren (Algorri), for expressing the widespread needs for us as child care providers throughout the state of California. Everything has increased in value except our salary. It is unsustainable to be able to help families and the children. We need HELP! PLEASE! It is frustrating to be left without a job or the inability to not be able to afford the most basic things. And time for us is running out very fast in countdown.”

Update from Chairs of Advisory Committees:

At Director Johnson’s invitation, **Tonia McMillian**, Chair of the Workforce Advisory Committee shared the dates and times for the next two joint convenings of the Workforce Advisory Committee and Parent Advisory Committees:

- August 29, 10 a.m.–12 p.m.
- November 16, 10 a.m.–12 p.m.

Mary Ignatius, Chair of the Parent Advisory Committee, shared that the August 29 convening will focus on the new state budget and representatives of the California Budget and Policy Center will join the meeting to share what is and is not included in the budget for parents. Committee members will also discuss what budget recommendations to focus on for the next budget cycle, in hopes that recommendations made show up in proposals. Ms. Ignatius expressed hope that the two committees will be coming to the meeting, celebrating the ongoing rates and the permanent solution to the family fee solution.

Director Johnson thanked Ms. McMillan and Ms. Ignatius and reiterated that save the dates will be sent out to council members for their participation and engagement.

Dr. Lupe Jaime-Mileham, Deputy Director, Child Care and Development Division, CDSS

At the direction of Director Johnson, **Dr. Jaime-Mileham** provided an update on the progress of the child care and development transition to CDSS. A legislative mandate requires a quarterly update on the transition for legislators and those are shared with the ECPC as well.

Dr. Jaime-Mileham discussed the state's rate and quality reform progress.

CDSS and the California Department of Education (CDE) are working towards a historic change for California's rate and quality structure building on the passage of Assembly

Bill 131 (AB 131) in 2021. This bill mandated the establishment of a Rate and Quality Workgroup and a Joint Labor Management Committee (JLMC) (comprised of state representatives and Child Care Providers United, California members) to provide recommendations for a single-rate structure, using an alternative methodology for true cost of care. As a next step in pursuit of the recommendations, CDSS requested pre-approval from the Administration for Children and Families and is working with national experts, including Prenatal to Five Fiscal Strategies (P5), to design and implement the proposed alternative methodology. This process involves engagement with a broad diversity of interest holders across the state, including families and early educators, to collect data, validate model assumptions, and create a model for an alternative methodology.

At a May 15 meeting with CDSS, P5 and CDE partners, participants voiced the urgent need to move to a single-rate structure, the sense of fatigue toward workgroups and surveys, the importance of continuing to waive the family fee, and concerns about their voices being heard. Everything shared is being taken into account. The alternative methodology is building on recommendations of past workgroups, especially the Rate and Quality Workgroup and the JLMC. Dr. Jaime-Mileham noted that Summer 2023 data collection will inform the state's rates moving forward and be included in the state plan. Any subsequent amendments are due July 1, 2024, covering July 1, 2024 through September 30, 2026.

Dr. Jaime-Mileham announced the next Rate and Quality Advisory Panel meeting, noon–3 p.m., July 19. [Meeting schedules and materials are posted on the Rate Reform and Quality page on the CDSS website.](#) Thought partners are important in the meetings because a single-rate is new to California, and there are many considerations, such as regional locations and special populations.

Dr. Jaime-Mileham continued with additional updates:

The state's budget reflects \$2.03 billion in American Rescue Plan Act (ARPA) child care stabilization sub-grants distributed directly to providers in the form of:

- reimbursement based on enrollment,
- COVID 19 related paid non-op days,
- stipends,
- license incentives, and
- supplemental rate payments.

All eligible providers are required to complete an ARPA survey to receive the \$1,402 per child stipend and supplemental rate payments. This survey captures information such as capacity and how the funds will be utilized. CDSS has received 77,000 surveys, including some duplicates. Dr. Jaime-Mileham thanked everyone who has submitted their responses, and encouraged providers to spread the word for others to [visit the CDSS website to complete the survey](#) and claim their stipend before the window closes on August 15, 2023.

In March 2023, CDSS launched *STEAM Starters: Tinkering for Early Learners* on the [California Early Childhood Online \(CECO\) website](#). Developed in partnership with

WestEd and the Exploratorium Museum of San Francisco, this online professional learning course teaches educators ways to introduce tinkering to young children to support their science, technology, engineering, arts and math (STEAM) learning. To date, eight interactive modules in English and Spanish have been posted to CECO. The project aims to create modules in additional languages in the future.

Dr. Jaime-Mileham thanked providers and partners and encouraged them to visit the CDSS website to learn more about the transition.

Director Johnson thanked Dr. Jaime-Mileham for her presentation. She then invited questions from the council.

Sonia Jaramillo reflected on the comment made by Ms. Algorri regarding the cost of child care and the statement, “the system is not broken, but it doesn't work for the population it serves.” She said the sentiment brought back memories of her years in K-12 education, attending equity symposiums and trainings and an atmosphere of possibility to make change. She sees the potential to implement opportunities for families and to look closely at ways the funding is coming to the families and the providers.

Ms. Jaramillo expressed her struggles with multiple layers of licensing requirements that come with additional costs and wondered if, “there could be a potential possibility of inviting some of these people that are feeling the pain of being out there on the fields. Because we do struggle. We want to provide quality, but we have multiple requirements and the funding is not enough. We want to make sure we're competitive with the upcoming TK (transitional kindergarten) world staff... I'm seeing the impact by losing some of my staff to the TK world, by losing some of my facilities because now they have to implement the TK. Like for example, aligning Head Start with the state is one of my big ones because I do oversee both. There are ways to do it, but can we please include all of those different requirements to make it work for everyone?’

Dr. Jaime-Mileham identified the ARPA survey as one vehicle for collecting information, while CDSS is also working with P5 to host special supplemental focus groups in multiple languages across the state. The focus groups will consider unique circumstances of leveraging Head Start dollars alongside other groups. She noted TK as a potential focus group along with Sonia Jaramillo as a contact person.

Deborah Corley-Marzett spotlighted the CCPU rally that took place on June 15 at the state Capitol. “What a powerhouse that providers, children, parents, and allies came to support California's essential workers to stand up and say, ‘Yes, we are essential. Yes, we are here and yes, we deserve more.’ For what the providers have received and been receiving, it's far less than what we should. That this change must happen today and not tomorrow, 2025 is too long. We're already being reimbursed based on 2018. We need to increase these rates now because if providers have to continue to wait any longer, then providers should receive a rate increase yearly or quarterly until it's done. How much longer are we expected to wait? How much longer are we expected to suffer?”

Ms. Corley-Marzett expressed thanks to Ms. Algorri and Ms. Padilla for sharing their experiences, noting that her perception of the child care sector matches theirs. “The anxiety that you are feeling is the same anxiety that every provider in the state of

California is feeling right now. We need people to stop listening with their ears, listen with their hearts and understand now what's really going on. We need everyone to be reactive, proactive to the words and the things that we're saying.”

Ms. Corley-Marzett advocated for providers to receive ARPA funds in a timely manner, noting that some providers have received letters telling them it will take longer to receive their funds.

Director Johnson thanked Ms. Corley-Marzett for her feedback and invited her to follow up with herself and Dr. Jaime-Mileham on specific contracting issues.

Ms. Corley-Marzett thanked Director Johnson stating that she will be reaching out.

Donna Sneeringer shared her thoughts as a long-time committee member working to address the range of issues related to the child care sector. “All respect to my friends and colleagues who put this meeting together and the presentation about the alternative methodology and the work that's happening on rate reform. I sit on that committee. I really feel like we are in a constant delay and that there isn't real commitment to managing and dealing with the crisis that we are in. All that keeps coming to my mind is that we're fiddling while Rome burns, and I feel like our system is burning down between the pressures from expanding TK, the pressures from the minimum wage, the one-time infusions of money that are just band-aids on a gaping problem. I don't know who's going to take these (child care) jobs. I'm a grandmother of two little kids, babies. They can't find care. They can't afford care, and we just continue to have this same circular conversation. I feel like I've been in for 20 years and I'm really struggling today.”

Ms. Sneeringer described the struggles child care providers express regarding recruiting: “I talk to providers all the time who can't hire employees. They can't keep up with minimum wage. They can't keep up with the cost of paying their rent, and we're talking about plans two, three years out, and they're not going to be here. We're not recruiting young workers because they can make more money at Target..., and they can get better benefits, and I'm very worried. We had incredible commitment from the Legislature, but I'm very worried we're falling back into more one-time money, and one-time money doesn't help this system, and it will not keep people coming to take these jobs. We are watching our child care supply fall off the cliff.”

Robin Layton expressed solidarity with Ms. Sneeringer's comments. She also thanked Ms. Padilla and Ms. Algorri, stating that she represents 1,300 families and 200 employees whose stories and experiences are similar to what they shared.

Ms. Layton noted that the ECPC is an advisory council appointed by the Governor and the Legislature to advise the administration. “We sent a letter, a budget request letter and an invitation to meet with us, and I want everybody to hear loud and clear that the response is ‘what's in the governor's proposed budget.’ That is the response. Since we don't have any other responses, that is the response.” She continued, “The Legislature, the Assembly, and the Senate, they are our heroes. They are our advocates. They have our back. But our administration, who we are supposed to be advising, they're not taking our advice. During COVID, we were the ones that were open. We got this hold harmless that helped us, many of us stayed open. That's going away. As well as our four-year-olds

going away. So now we're expected to figure this out. But what happens? What happens is, 'oh, well, let's have a Blue Ribbon Commission.' Okay, thank you very much. 'Let's write a master plan,' which by the way, the administration wrote..., not the ECPC. It was presented to us. But that's not enough. 'Let's form an Early Childhood Policy Council.' That's us. 'Okay, but we also need a Rate and Quality Workgroup. Two of them, actually.' In our budget request letter that we sent in December, we said, 'please adopt this.' It wasn't in the January proposed budgets, not in the May revised proposal budget. Instead, let's now have a Rate and Quality Advisory Panel, which we just had a meeting and we heard it's going to take approximately two years just to get the report.

"What are we supposed to do? I agree with Donna. This meeting needs to be talking about that.... We are the advisors. Please listen to us. And everybody that's on this call in the Department of Social Services and the Department of Education, I respect you, I appreciate you. You guys are amazing. You are not the decision makers. You carry out somebody else's decision and you do an excellent job and we appreciate you.

"But we're not idiots. What is this? Are we just fluff? We're advising, but at least have the decency—and I'm not talking to you guys, I'm talking to the administration. At least have the decency to respond to our letter. Again, in my opinion, the response is in the May revise."

Ms. Layton closed by thanking the members of the public on the call.

Ms. Ignatius expressed solidarity Ms. Sneeringer and Ms. Corley-Marzett and speculated that providers at the June 15 CCPU rally endeavored to maintain continuity in their child care provider services and also participate in the event. "Thousands of providers in the Capitol, I know that probably every single one of them who wasn't on the negotiating team was on the floor with kids the day before, then got on buses in the middle of the night and very early in the morning, depending on what part of the state they came from. They held the most incredible show of unity and love and celebration for the work they do. Then they got back on those buses and planes and trains and cars and were probably on the floor with babies again the next morning."

She urged the administration to reorient from short-term remedies to permanent solutions immediately. "The temporary solutions that have happened over the last two to three years have saved us from drowning. And now we're in a point where we need to shift to permanent solutions. And the Legislature has adopted those solutions, and this is a win for the whole field. This is a win for the administration if they adopt it. This is a win to show the nation that while other governors are banning books and doing things to suppress children's learning, our governor can be the one to show the nation: this is what you do when you have power and you have funding to be able to make the right choices. And so we expect the Governor to listen to those thousands of providers that showed up, to listen to the centers who are telling you they're losing their children to the public K-12 system and they have classrooms that are dark."

Ms. Ignatius shared her concern for that child care sector conditions may impact families and providers on multiple levels. "We are expecting that you are going to hear the families who have been testifying and telling you they cannot afford these family fees. We have been charging these families these fees and paying our providers these

terrible, embarrassing, degrading wages for far too long. And so yes, it's Juneteenth. Yes, it's refugee and immigrant awareness month. Yes, it's Pride Month, but proclamations are empty words if they're not followed up with actual action. The action is in the administration's hands right now to do the right thing and we need the Governor to do the right thing. I feel gross. Like we're contributing to their mental health degradation, their spirit being broken. This is awful, awful, awful. And we have the power to change it, so let's just change it."

Ms. McMillian expressed empathy for remarks made by Ms. Sneeringer, Ms. Ignatius, Ms. Algorri, and Ms. Padilla. She shared her perception of the quality and character of the relationship between the ECPC and the administration. "None of this is new. Absolutely none of this is new. Our voices have been heard. We have brought this solution of a single-rate system up over and over again. The system is designed to do exactly what it has done and clearly what it continues to do. Unfortunately... the system is the only thing that providers and parents have to rely on. The struggle continues to be real. This field is losing professionals. This is not the booming industry that it should be. We're caring for children, our next generation, the people who are going to take care of us.

"If folks cannot see the systemic and the structural racism and how things are going, then that is just sad. So, what providers and parents are not going to do is beg. We are a class act and we deserve to be treated as such. After 28 years in this field, I know what I'm creating. I'm creating a legacy, a legacy of professionalism, advocacy, and some amazing work that I have done, hard work that I have done. The question is to the administration, what is the legacy that they are creating? Take a look at it because it's sad, and it is ladled with racism and sexism. At the end of the day, the treatment exposes everything."

Janet Zamudio recognized the importance of the work and how the state and the country lean on educators to provide daily support, nurturing guidance, and learning for young children and their families. Ms. Zamudio stated that her three children attended an FCC in the Fruitvale area in Oakland and that it was due to a supportive provider that she is where she is now.

Ms. Zamudio advocated for the field: "We cannot lose any more programs than we've already lost. We can't lose any more workers than we've already lost. We're an advisory committee. And what our charge is, is to elevate the needs of young children and their families—and I'm reading off our website—as well as advise the Governor, Legislature and Superintendent of Public Instruction on statewide early learning care in child development. I've been struggling with attending these meetings because I don't know where we're advising or how we're advising other than the letter we wrote that we didn't get a response to. And we keep bringing up the fact that we just can't wait. It's frustrating to show up to these meetings and we're discussing the same things over and over again. It's very frustrating. So, let's set a timeline. August 29th. We want increased rates. We want the family fee structure fixed, August 29th."

As an intermediate step, Ms. Zamudio formally proposed the council set up a July meeting between ECPC and the Governor, Superintendent of Public Instruction, and

department leadership. She explained “The proposed meeting needs to happen to represent the needs that are being brought up here.”

Director Johnson thanked Ms. Zamudio and stated that the group would return to address her proposal.

Patrick MacFarlane recounted his inspiration for his podcast, *The System Isn't Broken*, to add context to anti-racism conversation in early childhood policy spaces. “I decided to do this podcast just so I could feel like I made an impact. But what I took away from that is all it really takes is the will, right? We can do all the changes that we know we need. All it takes is the will. I think what we're really needing on this council is the Governor's office, whether it's the horseshoe, whether it's the ninth floor. There are so many engaged department leaders here, and we're so thankful for the work and the collaboration.”

Mr. MacFarlane reflected on his perception of council's decreasing access to the Governor's office for consultation and advocated for renewed engagement. “There was a time when I could call someone in the Governor's office, understand where the Governor's priorities were, what was on his agenda, what his priorities were. And we've had this council for several years, and we don't have that anymore. I think that's got to be a priority for this council. We need to hear from the Governor. We need to hear from someone in his office because we need to know what his priorities are and where we can work together and how we can function as an advisory body.”

Kay Ruhstaller thanked Ms. Algorri and Ms. Padilla for sharing their stories and experiences. She pointed out select findings from Yale's 2022 study of 81,000 providers [*Prevalence of Chronic Disease, Depression, and Stress Among US Childcare Professionals During the Covid-19 Pandemic*](#), including death rates, job loss and wages, and mental health status. “...it talks about the death rate amongst child care providers was the highest amongst essential workers, about twice that of K-12 teachers. It also discusses the fact that massive job loss and pay insecurity are drivers of the mental health decline for this essential workforce. It talks about the racialized aggression that they experience, and it also talks about depression being 56 percent this year compared to 46 percent last year.”

Ms. Ruhstaller acknowledged the 700 FCC providers and 300 centers that the Family Resource Center works with in San Joaquin County. She described the precarious state of their child care workforce. “In our own county, we have had constant churn in our preschool. The other major provider of preschool is with probably 30 or 40 percent of her classrooms closed because of not having an adequate workforce. We've collectively, as an alliance in our community, worked on foundation grants so that we can work with trying to develop a future workforce by doing creative apprenticeship programs. Our county office has the only registered apprenticeship program for high school students in the whole state of California. But that solution is two years away, and we're not going to see any immediate gains. I hope that the Governor can lend a leadership member on his team to this so that we can really address the issue of rates and pay now.”

Director Johnson expressed appreciation for all input given by the council. She clarified that she and Dr. Jaime-Mileham are appointees of the Governor and represent the

administration, though they do not work in the governor's office. She acknowledged the request for representation from the Governor and the State Superintendent of Public Instruction.

“Under Governor Newsom and this Legislature, the outlay of multi-billion dollars in funds that has occurred over the last few years represents greater investments in this field than any other time in the history of California. The council and publics’ voices are absolutely one of the reasons that that has occurred.” Director Johnson provided examples of recent state investments in the field including the critical waiving of family fees during the pandemic, which continued for an additional three months as an early budget action by Governor and Legislature. The state prioritized the workforce for vaccines and PPE (personal protective equipment) distribution when there were low supplies, as well as providing additional economic impact in recognition of the contributions of the workforce during the pandemic. Live budget negotiations are ongoing to resolve some of the other issues raised.

Director Johnson noted that the state’s investments would not have been possible without additional federal dollars. However, despite the 10-year, multi-billion-dollar Master Plan, additional federal and state investments are needed to make further progress towards equity for families and the workforce. She reiterated that the Master Plan, Blue Ribbon commissions, and the like, provide guidance and recommendations, shaped by professionals in the field, many of which are used when funding is allocated. There are additional conversations on implementing recommendations around the single-rate structure or a cost model study because of this group. There has been movement from talking about policy recommendations for single-rate structure and utilizing the cost of information to talking about implementation.

Director Johnson identified these victories as the result of the Governor and Legislature took action in response to this group’s advice: “I don't know that there's any first-time agreement in any other field and sector that was as great as it was with Child Care Providers United. So again, that is an agreement between the administration, the Legislature, and CCPU, and want to recognize and acknowledge CCPU for their leadership in the changes that have been made. So again, want to make sure that context is full and in what has been accomplished... I expect no different from this body and this council to continue to lift up what more we need to be doing and how we need to get there.”

Selected public comments:

“It is very difficult to do regular business in the current climate without serious commitment to immediate ongoing support for our providers and parents. The Legislature adopted bold ongoing rate proposals for current year relief and without agreement on this from the administration we will lose providers like Miren. They can't wait for us to get our new methodology together. Providers can't hire staff, they are drowning in minimum wage increases and short-term funding doesn't fix this.”

“Governor has taken funds from child care providers and moved those funds to public schools for age four. This has impacted us drastically and not just COVID hit us hard and we have not fully recovered but now we are hit by age 4 going to the public school

system free. Preschools in business for over 25 years have shut down due to this, not just is Miren anxious, but now my numbers are down! I've lost six students to TK public schools. Just like Miren said, this will cause people to leave the industry.”

“Rate reform, family fees waivers, and maintaining quality. Why did California ask providers to provide quality care, having them invest in themselves, only to offer Legion Impact. Quality Start ends and ends the tier system. All funds are now being funneled to UPK which doesn't leave room on the table for FCCs.”

“I want a secure retirement or more fair pay to be able to maintain keeping the nurseries open and a decent future retirement just like in other fields of work.”

“Don't forget that a quality program is an essential part of education. We can't continue to ignore that we are in dire need of change.”

“The (current rate) is unfair to any children or their families as they will continue to receive low quality care with teachers who are not motivated to pursue higher education. It is interpreted as 'why do more when you can provide the minimum and still get the same reimbursement'. It is eliminating any competitive advantage to encourage motivation within individual providers and programs to continuously improve themselves so that they can achieve not only a higher rating than other providers in a healthy competition, but also to achieve a higher rating than the one we achieved ourselves during the previous evaluation. Qualifications and tiered reimbursement mean that all participating providers will strive to have a better program, more diverse and be better prepared year after year. It is very disheartening to hear that everyone will be reimbursed the same and get the same recognition, regardless of education, effort, or type.”

“Where is the true intervention to meet our needs we cannot do this without u all fighting with and for us. I feel so enslaved and used by this system and leaders with no help to fix what is happening. Where is the infrastructure stabilization support for implementation and partnerships?”

“We need to address these issues also 1) kids leaving for public school preschool - we are losing three-year-olds as well, and 2) lack of availability of teachers, 3) cost of teachers and 4) 4Cs lack of funding - parents are on [wait list] but can't get approved. This is making it very hard for us ... impossible for us to survive.”

**California Department of Education Early Childhood Updates:
Sarah Neville-Morgan, Deputy Superintendent for All Branch, CDE**

Director Johnson welcomed **Sarah Neville-Morgan**, who introduced her team members in attendance:

- Stephen Propheter, Director, CDE Early Education Division
- Shanna Birkholz-Vasquez, Administrator, Universal Prekindergarten Implementation & Support Office, CDE Early Education Division

Ms. Neville-Morgan opened by noting that she is an appointee of the State Superintendent of Public Instruction, who is an advocate for increased rates in the early

learning and care field. She stated her belief in the CDE's commitment to rate reform: "I think you see a lot of support from CDE around that need for increased rates. And we try to lift up with the increased rates that it's also increased compensation... not just the rate, but it actually goes to the workforce in more direct ways as well."

Ms. Neville-Morgan provided background on the [Universal Prekindergarten \(UPK\) Mixed Delivery Quality and Access Workgroup](#) (Workgroup). Convened by the CDE in partnership with the CDSS, State Board of Education, and Commission on Teacher Credentialing, the Workgroup has been operational since being established in 2022. Its statutory charge includes:

- 1) Provide recommendations on best practices for increasing access to high-quality universal pre-K programs for three and four-year-old children offered through a mixed-delivery model that provides equitable learning experiences across a variety of studies.
- 2) Provide recommendations to update pre-K standards pursuant to education code section 8203 to support equitable access to high-quality pre-K and transitional kindergarten programs through the mixed-delivery model and across all appropriate settings and funding sources.
- 3) Ensure recommendations are in alignment with the work of the Master Plan, without recommending new systems change that create increased state or local costs to offer pre-K across the mixed-delivery system.

Ms. Neville-Morgan expressed gratitude to the Workgroup members and state partners supporting a report for the Legislature and Department of Finance on increasing access to quality standards for high quality pre-K programs. She then asked **Stephen Propheter** to provide an update on the Workgroup.

Mr. Propheter summarized the Workgroup's May meeting, which featured presentations, facilitated discussions, and rich public comment to address the following questions:

- What is our vision for quality preschool through mixed delivery in California and how will we get there?
- What do we want children to experience in high-quality preschool in California?
- Where does California need to go to better support quality and mixed delivery?

He then shared that the next Workgroup meeting, scheduled for June 22, would focus on identifying barriers:

- What are the barriers that programs face in implementing quality and increasing access through the mixed-delivery system?
- What barriers prevent programs within California's mixed-delivery system from implementing high-quality universal preschool that meets the Title 5 standards?
- How can these barriers be addressed?
- What elements of current preschool program standards contribute to the barriers?

Mr. Propheter reviewed the development process for a final report of the Workgroup's recommendations, which is due to the Legislature and the Department of Finance in March 2024. He reiterated that the recommendations must align with the [Workgroup's statutory charge](#). "They have to be in alignment with the Master Plan and should not include new state systems costs. So that's kind of part of what we are navigating with the work group and our state partners."

The report development has been organized into phases to ensure delivery. Part 1 of the report, addressing background and context, will be available in draft form for the Workgroup to review in late August. The outline for Part 1 is being sourced from memos and Workgroup materials, CDE state partner data, and supplementary research. The next step will be a consolidated first draft, which includes some of the recommendations solicited from the Workgroup.

These Workgroup's recommendations will be finalized in three phases:

- Emergent recommendations based on presentations and discussion.
- Recommendation additions and refinement.
- The Office of the Superintendent facilitates report development and refinement process with the CDE state partners.

Members of the Workgroup will have formal opportunities to provide input and feedback during and outside of meetings, and the last phase will take part between December 2023 and February 2024. Ultimately the final report will be delivered and presented to the Workgroup at the last meeting.

Additional information and materials related to the UPK Mixed Delivery Workgroup are available from [California Educators Together](#).

Director Johnson thanked the CDE representatives and noted the opportunities to engage with the UPK Mixed Delivery Quality and Access Workgroup. From the CDSS perspective, there is a commitment to continue engaging with community and others so there are no surprises and people understand why decisions are made along the way. She invited questions from the council.

Ms. Ignatius referenced the statistic that 80 percent of children in CDSS programs who are paying family fees are between 3-5 years old and noted that this may not reflect equitable access. She asked, "Don't you think if we want to have an equitable system for all, that we need a permanent waiver of family fees below 75 percent of state median income (SMI) so the families in non-CDE programs are not punished for choosing a different type of care?"

Natali Gaxiola asked what is being done to maintain the mixed-delivery system when many areas are seeing closures and decreased enrollments?

Ms. Jamarillo thanked Stephen Propheter for his prompt response and support in efforts to improve the quality of services for children, staff, and families.

Ms. Layton shared that she feels the focus on TK shows a lack of support for child care providers and families: “Expansion of TK does not support working families. TK does not support the early development needs of three- and four-year-olds. TK does not support the private or subsidized center-based programs that are on the brink of collapse due to loss of four-year-olds. TK or UPK is not supporting our workforce crisis. It is causing the staffing crisis to become bigger.”

Addressing the Unique Needs of California’s Diverse Infants and Toddlers Panel

Director Johnson introduced **Kim Pattillo Brownson**, Ballmer Group Director of Strategy and Policy-Los Angeles, to facilitate a panel presentation on addressing the unique needs of the state’s diverse toddlers and infants. She thanked the panelists for joining the meeting to share their perspectives, underscoring the importance of ensuring the youngest Californians have a healthy and supported start to life.

Panelists included, in order of presentations:

- Stacy Lee, Chief Learning Officer and Senior Managing Director of Early Childhood, Children Now
- Chana Wynne-Swan, Assistant Program Administrator, Community Child Care Licensing Division, CDSS
- Lisa Wilson, Director of Equity & Outreach, Zero to Three
- Jennifer Miller, Director of the California Infant and Early Childhood Mental Health Consultation (IECMHC) Network, WestEd
- Niambi Lewis, Chief, Perinatal Section, Black Infant Health Program, California Department of Public Health

Director Johnson acknowledged the expectation that equity be a part of the conversation. She highlighted and appreciated the Department of Public Health’s Black Infant Health (BIH) program. She recognized the recent death of three-time Olympian Tori Bowie as just one example of continued disparities in maternal health care outcomes that disproportionately effect the Black community. Affirming CDSS’ healing-informed approach to its systems and services, Director Johnson pointed out major investments. These include \$8 million in interactive training modules to support trauma-informed care and \$14 million for infant and early childhood mental health consultation, providing services, coaching, and support to the workforce in this space.

Director Johnson preemptively identified two components not represented on the panel that will be the focus of the next ECPC meeting will be focusing:

- Multilingual learning, including supporting home language development for infants and toddlers
- Tribal issues

Ms. Pattillo Brownson expressed appreciation to CDSS for investing in infant mental health and thinking about not just trauma-informed but healing-informed care. She invited panelist **Stacy Lee**, Chief Learning Officer and Senior Managing Director of Early Childhood at Children Now to describe California’s infant and toddler population—who

they are, what is known about their wellbeing, and what are the challenges they are facing.

Ms. Lee expressed her solidarity with earlier comments: “I am working fervently with you so that we can make sure that these changes are happening and happening as urgent a fashion as possible.” She provided background on Children Now—a statewide research, policy, and advocacy organization—and its early childhood team’s whole-child approach to looking at education, health, child welfare, and family economic well-being.

Ms. Lee enumerated characteristics of the state’s infant and toddler population:

- California has over 8.8 million children, and that population is extraordinarily diverse.
 - 70 percent of the state’s children are identified as children of color.
- 5.4 million people are enrolled in Medi-Cal, and the state’s health systems are involved in making sure that children are healthy and well-supported from the very start.
 - Over 60 percent of children are enrolled in Medi-Cal.
 - Over 50 percent of births happen under Medi-Cal.
- 37 percent of children are in low-income families.
- There are more than 1 million English learners in K-12 schools.
- 60,000 children in California are in in foster care.
- 47 percent of children are in immigrant families.
- There have been 420,000 so far this year in California, compared to an average of 600,000 in previous years. This is the continuation of an ongoing trend.
- The population infants and toddlers in the states (birth through age two) is 1.25 million, greater than the total population of nine other states.

According to Ms. Lee, there is a lot of scattered data on infants, toddlers, and pregnant people. When the state made a concerted effort to build its cradle-to-career data systems, they recognized there were several challenges with early childhood, and it was set on a “holding pattern.” She has advocated for state efforts to collect data in terms of how infants and toddlers are doing, and how pregnant people are doing from before, during, and after their pregnancy.

Ms. Lee reviewed data available via the Department of Public Health’s most recent Maternal Infant Health Assessment data snapshot, covering 2016–2018:

- 82 percent of 15- to 19-year-olds who are pregnant or parenting participated in WIC (Special Supplemental Nutrition Program for Women, Infants, and Children). Young parents need a lot of support like that provided by WIC, so this participation is fantastic.
- 27 percent of 15- to 19-year-olds who are pregnant experience prenatal depressive symptoms. This highlights need for mental health support for young people who are pregnant.
- 7 percent of 15- to 19-year-olds who were pregnant were also homeless or unstably housed. This is double the average homeless rate for all pregnant people, which means housing efforts should be considered.

- 11.2 percent of those pregnant at age 35 or older had a higher use of alcohol in the third trimester. Alcohol can have health impacts for the fetus during pregnancy, and is especially dangerous because of its addictive potential and easy availability.

Additional data sets from the Maternal and Infant Health Assessment are available on the [California Department of Health website](#).

The importance of this type of data for young children is reflected in advances in the field of neuroscience over the last 30 years. Research has revealed that children’s brains make one million neural connections every second. Toxic stress impacts the architecture of the developing brain and the quality of neural connections. The science of epigenetics shows that early experiences and environments can affect development, altering which genes switch on or off. Stress, violence, neglect, or lack of nutrition can all contribute to higher odds of chronic illness in childhood or as an adult.

Stable, positive relationships with the adults in their lives, including their child care providers, support children’s healthy brains. Systems must be structured to provide stability and consistency so children can maintain those strong bonds with the adults caring for them.

It is really important to factor in the science when thinking about waiting to implement changes later on in life, because the current systems and challenges children are experiencing impact them right now.

Ms. Lee shared a data source tool called the [California County Scorecard](#) (Scorecard) developed by Children Now, which contains over 30 indicators of child well-being. Most data sets are available at the county level, with rankings assigned to each county. Data is also broken out by race. However, Ms. Lee noted that specific communities, particularly Native American, Asian, or those who have experienced refugee status are so diverse that outcomes may be missed when combined with the larger racial category. Additionally, It is important to recognize that the data may not reflect the full experience of those who are included in the categories. She demonstrated how to navigate the Scorecard, noting that both statewide and county-specific data is available to download.

Relevant indicators in the Scorecard for infants and toddlers include:

- Percentage of newborns who are not born at low birth weight.
 - Birth weight is an important indicator for child health, and lower weights are linked to higher risk of infant mortality or chronic health conditions. This is an area of concern due to racial disparities, particularly for Black newborns.
- Percentage of children within the Medi-Cal system who were screened for lead by their second birthday.
 - Exposure to lead can affect brain development, and no amount of lead is safe for children. Currently screening rates are highest among Asian and Latino communities.
- Percentage of low-income children who have visited a dentist in the last year.

- Dental care is a covered benefit for children who are in Medi-Cal, but only 34 percent of low-income children ages birth to five had visited dentists. Dental health has impacts for overall health, so it is very important to have children seen by dentists as early as possible. While there are racial disparities, this indicator is low for all communities.

Ms. Lee pointed out the importance of looking at California in comparison to other states to see what we are doing well and learn what we can do better. She recommended additional infant and toddler data sources:

- [Kidsdata.org](https://kidsdata.org) provides high-level data on different populations geographically, by issue, or by age.
- [The Strong Start Index](#), maintained by the First 5 Center for Children's Policy uses information collected at birth from every child in the state.
- The NIEER Research Institute's [State of Preschool Yearbooks](#) provide annual state-by-state data on preschool enrollment and funding
- ZERO TO THREE's [State of Babies](#) shares state-level data on children ages birth to three.
- The National Center for Children in Poverty provides [Early Childhood State Profiles](#) that highlight states' two-generation policy choices.

Ms. Pattillo Brownson thanked Ms. Lee for “lifting up so many of the connective points...prenatal care, low birth weight babies, all of which obviously are vitally important to the wellbeing of infants and toddlers.” She invited **Chana Wynne-Swan**, Assistant Program Administrator in the Community Care Licensing Division at CDSS to speak on the need for and supply of infant/toddler care.

Chana Wynne-Swan expressed appreciation for the early learning and care community, their contributions, voices, and stories shared. She spoke on behalf of Karen Chang, Assistant Deputy Director of the Community Care Licensing Division at CDSS.

Ms. Wynne-Swan described licensing as the foundation for an equitable, quality early learning and care system. The Child Care Licensing Program's mission is to provide preventive, protective, and quality services to children. The program monitors child care facilities, provides technical assistance, and establishes partnerships with providers, parents, and the child care community to ensure licensees meet established health and safety standards.

CDSS has made a concerted effort to provide the tools for families to connect with a variety of child care options in California. CDSS partnered with the Child Care Resource and Referral Network to develop MyChildCarePlan.org. Building on decades of work by Resource & Referral (R&R) agencies, MyChildCarePlan.org is designed to (1) provide California's families with the information they need to find child care that meets their unique needs and (2) enable providers to easily promote their services to families. The website's content is available in English, Spanish, Chinese, and Vietnamese Website statistics indicate over 240,000 visitors since the site launched in October 2022, roughly 1,100 visitors per day.

Licensed child care providers anywhere in California can [claim their profile on the website](#). Providers can update their information by [contacting their local R&R](#).

Ms. Wynne-Swan provided a breakdown of the current number of licensed providers and their capacity in the state. As of April 2023, there are approximately:

- Child care licensees: 40,572
 - Capacity: 1,067,917
- Licensed FCCs: 26,085
 - Capacity: 280,140
- Licensed infant centers: 2,354
 - Capacity: 56,576
- Licensed child care centers: 10,138
 - Capacity: 676,000

While there had been a decrease in number of licensed centers and homes even before the COVID pandemic, this past year saw a 5 percent increase in infant centers and FCCs.

Ms. Wynne-Swan also identified two patterns in [licensed capacity trends](#) that emerged during the pandemic:

- A decrease in number of small FCCs occurred because providers increased their capacity and transitioned to *large* FCCs.
- A geographical cluster of rural counties in Northern and Eastern California experienced the greatest overall percentage loss of child care capacity, so any change will have a larger impact.

The Child Care Licensing Program instituted three key efforts to help support programs:

- Temporarily permitted licensees to increase their capacity and approve emergency placements to help meet community's needs through a temporary waiver of regulatory requirements, also known as the popup waiver program. As of March 10, 2023, more than 50 previously unlicensed child care facilities completed licensure under the program, adding almost 2,500 licensed program slots. Additionally, over 200 licensed child care facilities added nearly 1,800 new slots in their programs.
- Issued over \$150 million in licensing stabilization and incentive stipends for licensed childcare providers, understanding the infant and toddler age group as the most vulnerable served.
- Partnered with the California Child Care Resource and Referral Network and local R&R partners to distribute tens of millions of COVID-19 PPE and at-home test kits. This was only possible because of the statewide and local relationships within the child care infrastructure.

Ms. Wynne-Swan thanked R&R staff that worked additional hours mailing and delivering kits and holding off-hour events to help child care providers access resources, as well as

the child care programs that stayed open and worked diligently to keep children and families safe.

The Child Care Licensing Program promotes healthy development and relationships and leverages evidence-based practices that protect the children's health and safety while in care. One practice area the program focuses on is safe sleep requirements. Collaboratively developed with partners and made to align with the American Academy of Pediatrics *Recommendations for Preventive Pediatric Healthcare*, the safe sleep requirements for both FCCs and child care centers include an individual sleeping plan for infants up to 12 months. This encourages open communication about safe sleep standards between parents and caregivers. The CCLD website also provides [resources and FAQs on safe sleep in child care](#).

Ms. Wynne-Swan stated that the Child Care Licensing Program's role is as a supportive partner, providing technical assistance whenever possible. She encouraged providers to reach out to their licensed program analyst or local regional manager with questions and suggestions.

Ms. Pattillo Brownson thanked Ms. Wynne-Swan and invited **Lisa Wilson**, Director of Equity and Outreach at ZERO TO THREE, to speak about racial identity and the developmental impact it has on infants and toddlers.

Ms. Wilson shared her stance in solidarity with everyone on the call and providers on the front lines as essential workers. Before addressing the impacts of intergenerational trauma and racism in the child care space, Ms. Wilson provided background information on ZERO TO THREE.

ZERO TO THREE is a national, research-based advocacy organization committed to the collective and collaborative movement towards supporting infants and toddlers. It is a resource to parents, professionals, policymakers, and the workforce. ZERO TO THREE advocates at the federal level in policy areas affecting millions of babies, young children, families, and providers and calls for change in larger systems. ZERO TO THREE works with federal, state, and local policymakers; tribes; and US territories to make a difference and an impact for babies everywhere. Examples of its efforts include the [Think Babies campaign](#) that prioritizes infant brain health and development across key policy areas, the [Safe Babies wraparound program](#) to support children and families in a transformative approach to child welfare and it now includes California. Infant and early childhood mental health is a thread across all of the organization's work and issue areas.

Discussing ZERO TO THREE's [equity statement](#), Ms. Wilson explained that the organization is committed to inclusive voice and seeks diversity within the people that share their lived experiences with it. She stated the organization's belief that, "if we're close enough to the problem, we hear the stories of the children and families, we hear the stories of the providers... we'll be able to go and make a change, and we'll be able to talk about where we can make those changes." She reiterated that stories from the field help the organization "understand the cracks in the system." She intends to present the stories and lived experiences shared today with the organization's executive director.

Ms. Wilson explained her background as a developmentalist with education and interest in human and child development, the poverty cycle, and multicultural curriculum and context. She addressed the significance of applying an equity lens to child care spaces to achieve “just early childhood development.” She affirmed ZERO TO THREE’s commitment to acknowledging the effects and trauma, racism, and institutionalized racism on children and families and factoring in social conditions that impact children when they are born. In recent years, ZERO TO THREE has increasingly focused on children of color, recognizing that lasting impacts that intergenerational trauma and lived experiences have on babies’ development and growth. [“Why 0–3?”](#) offers a snapshot of the importance of maternal health both during pregnancy and prior to conception.

Ms. Wilson explained that Dr. Nadine Burke Harris, former Surgeon General of California, produced work that brought adverse childhood experiences (ACEs) to the surface. Research has shown that many ACEs are linked to institutionalized and structural racism. University of California Berkeley’s Othering & Belonging Institute has done great research on the impacts of redlining—federal policies that pushed people of color out of home ownership and into under-resourced neighborhoods, which remain under-resourced to this day. Over-policing is another example of institutionalized and structural racism contributing to ACEs.

Ms. Wilson explained that “racism is that groundwater of America. So, it’s something that’s in our system, and it’s going to take a lot of time to undo the effects of it...like [not seeing] equitable wages. Because back in the day, during enslavement, people that took care of children were the Black women, were the Brown women. And they weren’t paid. So, the roots to racism in child care and providing child care goes all the way back to slavery. We recognize that, too.”

Ms. Wilson outlined ZERO TO THREE’s racial equity work. [HealthySteps](#) is a dynamic program providing early childhood development support to families in pediatric primary care offices. Safe Babies is working to transform child welfare. In her own role as the National Center on Early Childhood Development and Teaching’s (NCECDTL) Director of Equity and Outreach she oversees a program called [Supporting the School Readiness and Success of Young African American Boys](#). NCECDTL has partnered with Never Whisper Justice, the social justice film company that produced the documentary *BLACK BOYS*. ZERO TO THREE hosts screenings and panel discussions of the film across the United States and invites attendees to join a community of practice to understand the impacts of the over-expulsion and soft expulsion happening in early childhood settings for our African American boys.

Additional resources on promoting racial equity in early childhood, including Dr. Walter Gilliam’s work on school readiness and preschool expulsion, is available on the ZERO TO THREE website.

Ms. Pattillo Brownson thanked Ms. Wilson and opened the floor for questions from the Council.

Ms. McMillian thanked Ms. Wilson for highlighting this topic and expressed appreciation for pointing out the phenomena of toxic stress syndrome based on research by Dr. Burke Harris. “It’s very, very real and folks really need to check it out.”

Ms. Pattillo Brownson invited **Jennifer Miller**, Director of the [IECMHC Network](#) at WestEd to speak about how the mental health of infants and toddlers can be profoundly shaped by the mental health of the adults in their lives, that is providers, parents, and families.

Ms. Miller recognized and acknowledged emotion, suffering, passion and commitment to the work that preceded and set the stage for this conversation. She explained that the mental health of infants and toddlers is inextricably linked to the mental health and well-being of the adults who care for them. Infant and early childhood mental health is an interdisciplinary field of study, research, and clinical practice to support young children's social, emotional, and relational health and development. Supports span a continuum of promotion, preventive intervention, and treatment.

Ms. Miller expanded on the three continuum areas and where they intersect with the young child and the ecosystem of the child's providers or caregivers:

- Promotion: All people who work with young children and their families have the opportunity to foster the social, emotional, relational health of young children and families. These would fall under the positive childhood experiences in relation to the ACEs literature; these are positive childhood experiences that serve as buffers for supporting and promoting strong and healthy social and emotional and relational health.
- Preventive intervention: This space may include more targeted interventions and supports for children, families, and providers who may be vulnerable, experiencing toxic stress, or facing other environmental and social stressors.
- Treatment and intervention: This is more clinical intervention and services with official mental health diagnoses.

Ms. Miller described what infants and toddlers are learning and experiencing in terms of social and emotional and relational health during this developmental phase of their life:

- How do I get my needs met?
- How do I feel safe?
- How do I get your attention?
- How do I explore the world?
- How do I express my feelings in a healthy way?
- How do I solve problems?

When the adult caregivers are emotionally available, attuned, and responsive to children's needs and cues, they provide a safe base that allows children to explore and learn about their world, primarily through play. Ideally, there is a trusted, reliable adult in every child's life to provide comfort and help them make meaning of their experiences. This type of trust is fostered through consistency and predictability.

Infants, toddlers, young children's social and emotional well-being is directly connected to relationships, attachments, and the security and safety they feel with their adult caregivers. This is the foundation for providing infant and early childhood mental health consultation.

Ms. Miller described consultation as “an indirect mental health service that's aimed at increasing equitable practices; social, emotional and relational awareness; and confidence and competence in caring for young children and their families.” The IECMHC Network works specifically with early learning and care programs, childcare providers and early education programs across the state of California, and consultation happens in a variety of early childhood contexts.

A consultation differs from some other professional learning opportunities like training and coaching with the theory that change happens within the context of relationships. Young children's social and emotional development is occurring in the context of important adult caregiver relationships. Likewise, adult learning and change is best facilitated and fostered through the relationships providers and caregivers have with their consultants.

Ms. Miller provided an overview of foundational practices and principles of infant early childhood mental health consultation. The IECMHC model uses diversity-informed tenets and relationship practices that recognize caregivers as the experts of their own experience and the primary relationship they have with children and families. Ms. Miller reports provider and caregiver feedback most often mentions “the value of feeling seen and feeling heard and having time and recognition for honoring their own lived experience and their own cultural traditions and caregiving practices...and the space and the support to think about the meaning and the power of those.”

Ms. Miller highlighted the significance of the relationship between the consultant and the consultee, referred to as the “consultative alliance.” There is a growing body of evidence of the efficacy of mental health consultation as a disruptor of bias and an evidence-based practice shown to increase caregivers’ sense of competence, agency over the work they do, and the impact they are having on children and families in their care, leading to lower rates of staff turnover. Having a predictable, consistent caregiving relationship promotes and supports social, emotional, relational health and brain development. Conversely, a high rate of turnover in programs does not only impact the workforce; it also has direct repercussions on children.

Some findings around the provider–consultant relationship have emerged when the provider's concerns are around African American boys. For example, consultants with expertise in equity, diversity, and culture who match the provider's ethnicity and race, show a stronger alliance, and the provider reports a meaningful and effective consultation experience. The IECMHC Network is considering this finding in terms of composition of the Network and some statewide capacity building efforts.

The Network uses a tiered system of supportive services and has worked to increase the availability and accessibility of services in a way that meets providers where they are. Services include a helpline that offers providers an immediate touchpoint with a Network consultant or mental health specialist, monthly virtual drop-in sessions, an ongoing communities of support series, and mental health consultation services.

Ms. Pattillo Browson thanked Ms. Miller and mentioned the importance of this work and its overlap and intersection with the anti-racist work of the next speaker. **Niambi Lewis**, Chief of the Perinatal Section at the Black Infant Health program, was invited to speak

about racial disparities in prenatal care access, birth weights, and infant and maternal mortality, all of which has intersection points with CDSS' work.

Ms. Lewis shared gratitude for the tremendous work being done with children across California.

Ms. Lewis defined “health disparity” as the differences in health status among distinct segments of the population, including differences that occur by gender, age, race or ethnicity, education or income, disability or functional impairment, or geographic location or any combinations of any of these factors.

Ms. Lewis shared that the state has done a tremendous job of reducing health disparities at birth: “That includes maternal mortality, infant mortality, the preterm birth rates, and the infant mortality rates, but our disparities exist and persist. African American women are three to four times more likely to die from pregnancy related causes than are women of other racial or ethnic groups, and African American infants are nearly three times as likely to die than white infants and four times as likely as Asian infants before their first birthday.”

Reinforcing information shared by others, she noted that these disparities persist despite prenatal care or socioeconomic status, and they are rooted in structural racism and toxic stress. Ms. Lewis quoted Dr. Joia Crear-Perry: “Race is not a risk factor in maternal health. Racism is.” She continued by explaining that the challenge is finding ways to eliminate racial disparities through social and policy changes that promote equitable access to healthy communities, economic resources, and social support and, most importantly, opportunities to provide for babies.

The BIH program is working to improve health among Black women and babies, reduce the disparities in maternal and infant health, and empower women to make healthy choices for themselves and their families. BIH works with Black women, 16 years or older, who are pregnant or up to six months postpartum at the time of enrollment. Women can enroll in prenatal or postpartum group or enter into one-on-one case management. Clients can switch between group and one-on-one services based on their needs. BIH wants its services to be accessible to as many women as possible.

The BIH program is funded by several sources including federal and state general funding. The program has some unique characteristics, as explained by Ms. Lewis. There is no income limit. Anyone that self-identifies as a Black woman and is pregnant as part of the eligibility is welcome to join. Like many public health programs, BIH includes traditional health promotion topics like smoking cessation, nutrition education, and child safety, but the main focus of the program is three programmatic pillars designed to mitigate the effects of racism: social support, stress reduction and empowerment. The program fosters social support through the group model and empowering women just to make better, healthier choices for their families and ultimately their communities as well. Additionally, BIH also ensures Black birthing people are provided information about the other disparities that more highly impact Black women like hypertension, the risk of asthma, breastfeeding difficulties, and SID-death.

Ms. Wilson touched promising practices of the BIH program. The program currently staffs each of its service areas and plans to augment its existing services by hiring a mental health professional and a public health nurse. Women are assessed at intake, and support from a mental health professional will help ensure clients get connected to the right services. A public health nurse will be able to conduct prenatal and postpartum visits to act as a sounding board and provide support when clients may feel less empowered about issues they're having with their providers. BIH aims to match hiring choices with client demographics. With difficult or sensitive conversations, this helps participants feel more willing to share, which makes it possible for them to be referred to appropriate services.

Karin Bloomer thanked Niambi Lewis and opened the floor for questions from council members.

Ms. Patillo Brownson thanked the council for their comments regarding workforce and the rates and for their candor. She expressed her sense of the shared experience as “a journey we're all on together, so I hope that we will all be having happy resolution soon.”

Panel and Council Discussion

Ms. Ignatius underscored the importance of the problems outlined by the presenters on rates and fee schedules. She stated her belief that collectively efforts are focused on solutions. “We're all trying to put forth solutions to mitigate the greatest harms that these systems of oppression and racism and sexism are doing on Black and Brown families, children and our early educators.” She advocated for solutions to be reflected in the final state budget so that intentional efforts can begin to address these issues, including following through on permanent changes to rates and the fee schedule.

Ms. Corley-Marzett thanked the presenters and followed-up on Ms. Ignatius' comments and reflected on her concerns about the role of race and racism in decisions that impact early childhood care providers: “...as this industry is full of Black and Brown women, I'm hoping that, just keeping it real, that my Blackness is not keeping your decision down, that my Blackness is not holding you back. And that's what I feel right now and I don't like the feeling.” In addition, she shared comments from the earlier discussion on rates, “About rate increases and wages, those rate increases and raises you mentioned should be going to the workforce, but I do not agree that the providers who work with networks have to give part of their wages to support those networks' administration fees. And again, UPK is underserving the children. If there's no way to include all providers, you know how I feel there. And that toxic stress is real. I suffer it myself . . . providers are fighting for paid time off, retirement, healthcare, training fund, rate increase. If we can't get that rate increase and that new methodology increase or change now, then we need to go ahead and give a provider increases until it's done. Paying providers based on enrollment and not attendance, and parent fees need to go away forever.”

Referencing Ms. Ignatius' past comment about child care sitting at the intersection of race, gender, and economics, **Ms. Sneeringer** described her perception of the value of stabilizing the care system for babies, “There's so much more we could do with a stable workforce and with stability in our care sector to have families have the kind of support that they need to have access to mental health consultation, to have access to

consistent caregiving where their children can have meaningful attachment. A lot of the investments that we're talking about here, including investing in our caregivers is a prevention service. By having stability in our workforce and stability in the relationships families have, the more likely they are to be successful in their parenting, the more likely the children are to be successful in school.”

She expressed her belief in the importance of investing in providers in the context of the science of children’s developing brains. “We really are selling ourselves short at the very beginning of children's lives. So much of brain development happens before a child turns three, and we have to focus our resources and attention on getting as much support as we can. And that really does start with supporting the mostly women of color who care for our babies. This is why we are so passionate and why we keep coming back to adequate compensation because these are the folks who are building the brains of our very youngest kids and setting the stage for their future.”

Ms. McMillian expressed gratitude that data is now being used more widely in analysis of the child care system to support reform. She pointed to Patrick MacFarlane’s use of data in his podcast as one important example: “Patrick’s podcast was so phenomenal, especially in exposing the racism that still exists in this childcare system. And without data, ...inaccuracies, stereotypes, misconceptions, they have an opportunity to thrive. I'm glad that it's now starting to be instituted and findings are exposing a lot of bad stuff in the system.” Drawing a comparison to the history of denying enslaved people names and personhood, she noted that, “If we have no data and we have nothing to fall back on or to research about, then we don't exist. I'm really applauding the fact that now data is being used, and I'm hoping that we continue to do it and that it's appropriate and that it's accurate.”

Ms. Layton thanked the presenters and expressed her concerns about whether the research and data is being considered in placing three- and four-year-old children. “ We know what’s appropriate, for example, for three- and four-year-olds... which is really in the CSPP guidelines to have a 1:8 ratio and to have teachers trained in early childhood education. But instead it was ignored and let's just give the three- and four-year-olds to elementary schools with a maybe 1:20 ratio and maybe a fourth grade teacher. ... So what more damage is our society willing to cause? Again, four-year olds are ending up in the principal's office because they peed their pants, which is a typical developmental experience for four-year olds. ... We have licensing standards for three- and four-year-olds and for babies. But I guess if you go to elementary school and you're in TK, you don't need those licensing standards. So it was a great presentation but also just brings up more frustration.”

Ms. Bloomer thanked Ms. Layton and moved the group to public comment.

Selected public comments:

Paula Sanchez noted the importance of the topics that the council provides and the value of attending council meetings. She shared that she has run a child care business for 12 years and is happy to be able to help the families and serve all types of children, including those with special needs. She thanked the council for the information it provides and for taking time to help providers learn to seek information themselves.

Crystal Jones introduced herself as a childcare provider in Long Beach representing Los Angeles County. She advocated for rate system reform, waiving of family fees, and sector pay increases: “We have been bargaining with the state to support us in creating a single-rate system that takes into account the actual cost of providing care; a significant pay increase now, until we get the cost of care rate; and to primarily waive family fees for our parents. We are a workforce that is primarily women and primarily people of color and has many immigrants among our workforce. We deserve the stability of an ongoing pay increase and the security of the date certain when we will move to the cost of care rate. We deserve respect. Our calls at the bargaining table have been met with stalling, delays, and finally, counters that came nothing close to what we need.”

She expressed support for providers and parents and championed an engaged council. “If this council is serious about giving our babies a strong foundation to grow and prosper, then we can't continue to ignore the very real changes providers and parents are dealing with right now.” She emphasized that while she is proud of her own work, she is not speaking for herself, but for other providers, parents, and child who need “our system to do exactly what they said and... to be accountable and effective for the equity statements that we established and for the work and resources we so well need.”

Cristian Corona shared that she is a family childcare provider from Los Angeles. She advocated for the state to support the child care sector by creating a single-rate system that takes into account the actual cost of providing care, a significant pay increase now until providers get the cost of care rate, and to permanently waive family fees for parents.

“Without an adequate single-rate system, many more of us will join the thousands of providers that have already closed their doors. Parents will have less choices for care. Thank you so much and I hope, thank you for all of the information and this is a really good meeting. But we also, all of us are asking for respect and we're asking that all of the support that we're receiving from all of you guys, it doesn't end on words. We need actions.”

Selected public comments from chat

“My preschool is often contacted about taking a child on pay assistance but we cannot take them UNTIL we are paid by enrollment and not days attended.”

“...I take it personal and targeted manipulation and oppression. What is this? I know my legacy competence and all I helped to contribute to even the Master Plan and equity statement. With lead departments to look me in my face, keep asking me for my input and solutions to make the rich richer and leave us an excuse of inequity and opposite of what we all been building in these workgroups.”

“I am a FCC provider] in Contra Costa Ca. We are a workforce that is primarily women of color. We are undervalued, underpaid and we deserve the stability and ongoing pay increase. Thanks to all the panelist for great sessions.”

“CAPP is so frustrated that there has truly not been any forward movement on increasing rates and valuing the workforce. I really feel that these meetings happen to keep something on the books but in all due respect, no one is really listening to the fact

that our child care industry, workforce, and access is in on life support. Does the Governor and his administration truly value this council and its work? How many more studies are needed to show that child care is not approaching a cliff but are being pushed off? How naïve for anyone to think that there is another year or two to 'study' issues when [FCC] providers and centers are closing their doors? I agree with Janet Zamudio's request for a meeting. Candidly, I see it that if the request to meet is ignored, then that is a clear message that child care is not and will not be a priority now or in the near future. California is better than this."

"I also think of providers that have military subsidy service because they also have training and necessities like other providers only having civilian children please also help us."

"Let's not forget special needs children which don't have enough staff to help them and are being turned away from childcare facilities."

"We are Early Childhood Educators and do not care for the origins or color of our future. But we cannot do this job without the help of our leaders."

"I worked very closely with universal preschool before when the program Los Angeles Universal Preschool (LAUP) was present. Please include [FCC]. LAUP was a good program, but focused mainly on providing slots for preschool centers. Many LAUP/universal preschool programs list funding and closed the first time, yet [FCC] providers (again) remained open and available to cover and be their for families the same as we did with Covid19, and the way that we always do."

"What is stopping licensed family child care homes and child care centers the same benefits and the kids four to five years. Early childhood educators are experienced and qualified to give a quality education, why then give these kids to public schools. Pay the licensed early childhood educators of [FCCs] and child care centers what is going to public schools. Very soon there will be no one to provide the young children."

"Our job is not to see the color of people, our job is to give love and attention to all children in general."

"I propose that the infant age be lowered to 18 months! With two children need two in the same family, I will need to let the 18-month old go, because I won't be able to take both children. There is a huge lack of infant care as it is in [San Bernardino] County, because of infant requirements, including sleep regulations until the age of two. I also propose that we not check on children over 12 months of age. This takes a lot of time, therefore taking away from us educating the older children. Regulations need to be adjusted so that we can accommodate those families with two under two!"

"I am a childcare provider in Palm Springs California and I have also had a family of color for 8 years and I have done everything in my power to help them. I have been working with children for 16 years and we are waiting for that increase to be able to continue operating and helping families. I was open during the pandemic."

“How can the system and people we lean on for answers to be the ones who has caused us discouragement and disrespect to help us on our time of most need?”

“We need fair rates, taking into account the reality of current costs, we need to be taken seriously and without pats on our back, Thank you for all the information you give us and the courses and workshops we attend, always preparing ourselves to be better and understand the development of children just as seriously as we take this work, we also ask for actions on your part for all providers, take your positions responsibly to help us if you can, we respect you and ask for respect and dignity.”

“We absolutely don't feel the support mentioned here all we feel is anxiety and uncertainty because we have not been listened to or supported as we should. If so, there wouldn't be so many childcares closing please don't insult our intelligence and give us respect. We need actions not just talk REAL SUPPORT.”

“\$500,000 awarded to UPK committees in all counties. That money could have help paid for all these providers compensation.”

“I agree with so many of the comments of the Advisory members about the frustration and urgency to address the true cost of care, and the eliminate the fam fees. We have to not only do no more harm now (with one-time fixes), but we have a responsibility to go upstream and permanently change the structural riots of today's challenges — all linked to historic racism as presented today. Rates, and other barriers are the form of policy correction and true support all children to have the equitable start we have discussed today.”

“I am a family child care provider and clinical social worker specializing in children's mental health and everything that has been voiced is real and causing damage to the very children the “system” claims to support and want to provide services for. Meeting with the governor is fine. But then what... if there will still be no support for our field and industry then perhaps our industry needs to stop providing support for this administration. They cannot claim to be anti-racist while still implementing racist policies that are hurting minorities, children and families in California.”

Director Johnson thanked Ms. Corona and expressed appreciation to the public participants who joined the council meeting for lending their voices. She expressed appreciation for the panelists' presentations for “lifting up the inequities that we see and the opportunities that we have to address them.” She thanked Black Infant Health and partners in early childhood mental health for talking about some of those solutions and ways to mitigate and support.

She returned the group to Ms. Zamudio's proposed request to the council invite state leaders to a near future meeting. She asked Ms. Zamudio to clarify if she herself would want to provide the council's previous recommendations related to the budget in that conversation.

Ms. Zamudio asserted her opinion that the content of the proposed meeting “needs to also lift the voices in the field because when you hear directly from the very people that are impacted and you hear directly what that means in terms of their day to day, it's different.” She clarified that her request is “to actually meet with the governor and do more of what this body has been doing so greatly.” Ms. Zamudio expressed appreciation for Director Johnson and the other leaders in this “that are part of the council in doing that so very well for us.”

Director Johnson queried the council for objections to Ms. Zamudio’s earlier proposal for a request for a meeting with the Governor, Superintendent of Public Instruction, and department leadership this July. Seeing and hearing no objections, Director Johnson confirmed that she would check considerations related to governance and Bagley Keene mandates, and she would bring the meeting request forward to the Governor's office.

She pointed out, with post-pandemic policy, she is committed to trying to continue a hybrid model for public engagement noting the high public turnout. “We've seen hundreds and hundreds of participants who might not otherwise be able to come in person if that was the only option to participate, but we are seeing changes related to the council members' ability to be remote.”

The next council meeting is scheduled for September 19, and details will be posted on [the ECPC website](#). A joint meeting of the Parent Advisory Committee and Workforce Advisory Committee is scheduled for August 29 at 10:00 AM. That information will be available on the CalHHS website. The council will receive communications about budget information and finalization.

Meeting adjourned.