



# Anti-Racist Policymaking to Protect, Promote, and Preserve Black Families and Babies

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## Issue Series Overview

This issue series focuses on Black families, infants and toddlers and is funded by the Pritzker Children’s Initiative as a collaborative effort between the Equity Research Action Coalition at the UNC Frank Porter Graham Child Development Institute and Child Trends. The series is focused on identifying strengths-based programs and policies that support the well-being of Black families and their babies.

We use the terms babies, infants, toddlers, and young children in this series, recognizing there are varying developmental stages and milestones for each. Generally, when referring to babies and infants we mean birth to about 1 year old; toddlers 1 year old to 3 years old; and young children 3 years old to 5 years old.

Across the series, we take the position that Black families are better supported when there is an intentional and strategic focus on designing systems and implementing programs, interventions, and strategies that build on and attend to the cultural assets and strengths of Black families. This series is borne out of this perspective.

## Introduction

The first 1000 days of life are a sensitive period for infant brain and biological development, which affects long-term cognitive, physical, and socio-emotional growth.<sup>1</sup> This timeframe is even more critical for Black babies living in the U.S.: The legacy of enslavement and racism embedded in state and federal policies in housing, education, healthcare, the justice system, policing, politics and other facets of American society, has caused considerable damage to Black people, including their young children.<sup>2</sup> Despite the legal sanctioning of racism within these state and federal policies, Black families have shown remarkable fortitude and have fought back against racism and discrimination—both individually and as a community. This brief uses a framework for supporting Black families, as well as an established compilation of child and family policies produced by the [Prenatal-to-3 Policy Impact Center](#)<sup>3</sup>, to answer two questions:

- Based on the research review by the Prenatal-to-3 Policy Impact Center, which policy approaches have the potential to protect, promote, and preserve Black families and babies?
- Beyond the work of the Prenatal-to-3 Policy Impact Center, what additional policies and programs need research review to build a more complete picture of the levers available to state and federal officials to protect, promote, and preserve Black families and babies?

We use the term “Black” as a pan-ethnic description of anyone having any ancestral heritage from Africa. This includes individuals who identify as African American—those who were primarily born in America and are descendants of enslaved Africans—as well as those living in America who identify as Black African or Afro-Caribbean. “Black” also includes those who reported being Black alone or in combination with one or more races or ethnicities in their responses to the U.S. Census, such as Afro-Latine.

These questions guide our understanding about the ways in which policies can directly address racism and its consequences in order to provide Black families and their babies with equitable opportunities to thrive.

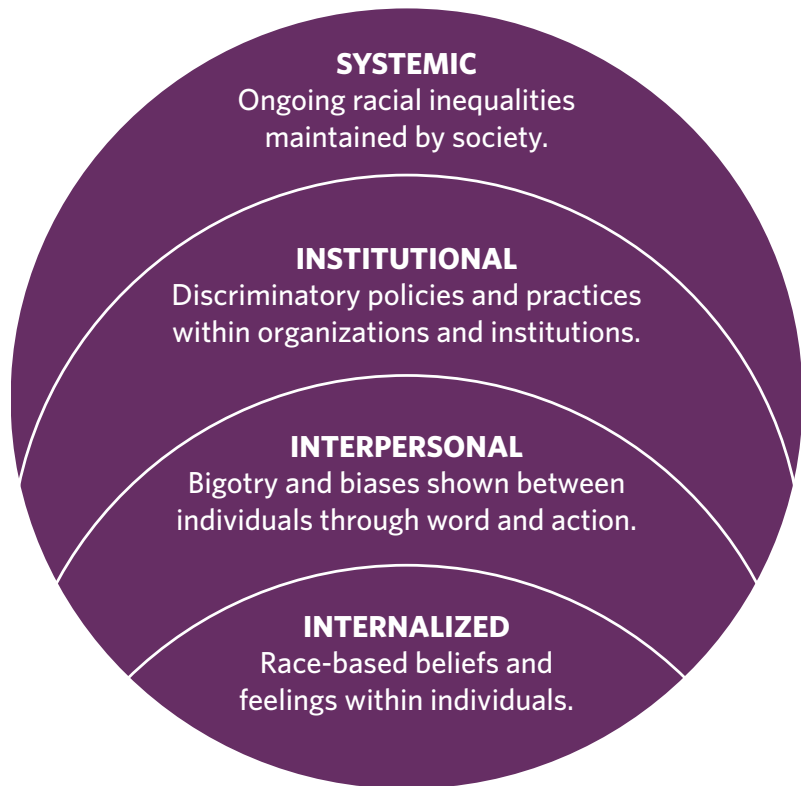
# Brief Overview of Levels of Racism and the Protect, Promote, Preserve (3Ps) Framework

Racism is a complex phenomenon that exists on multiple levels—systemic, institutional, interpersonal, and internalized (see Figure 1 for a cursory overview of the levels and how they operate).<sup>4</sup> As Black families' interface with U.S. systems and programs, they may encounter racism at each of these levels.

When examining the early care and education system we find that systemic racism baked into U.S. laws and policies related to employment, compensation, and housing has resulted in less access to employment opportunities for Black people, lower quality jobs and incomes when employment is secured, and

concentration in particular areas of the country and neighborhoods.<sup>5</sup> In turn, these issues have resulted in limited access to and a lack of affordability of early care and education (particularly center-based child care), for Black families, especially those who are economically disadvantaged.<sup>6</sup> Moreover, access to early care and education is impeded because Black people are less likely than other races to have child care centers in their neighborhoods. Institutional and interpersonal racism is evident within the early care and education system in the compensation of its workers.<sup>7</sup> While the female dominated profession is poorly paid more generally, discriminatory practices have resulted in Black women in the early care and education system earning less per hour than White women in similar positions (\$.78 for every \$1.00), irrespective of education level.<sup>8,9</sup> Moreover, Black women who are mothers and working in early care and education are more likely than their counterparts of other races to be poor.<sup>10</sup> Internalized racism may into play in the beliefs that early care and education professionals may have about themselves and/or the families and children with whom they work. For example, suspensions and expulsions of Black children in early care and education

**Figure 1. Levels of racism**



settings is disproportionately high.<sup>i</sup> While there is no clear agreement regarding the reasons for this occurrence, research and theory suggests that implicit biases and internalized racism may be factors.<sup>11,12</sup>

The Protect, Promote, Preserve Framework (the 3Ps) can help public officials to combat anti-Black racism in policy and programs by applying a racial equity lens.<sup>13</sup> The 3Ps facilitates examination of policies and programs that protect (or not) Black families and babies from harm and trauma; promote (or not) the health, wealth, and educational access of Black families and babies; and preserve (or not) the cultural heritage and language of Black families and babies.<sup>14</sup> We propose utilization of the 3Ps Framework by state and federal leaders to identify family- and child-focused policies that have the potential to disrupt experiences of multilevel racism and its harmful effects, which may result in better protection, promotion, and preservation of Black families with young children.<sup>ii</sup>

## Using the 3Ps Framework to Identify Policies & Programs Central to Anti-Racist Reforms

The 3Ps framework includes 7 domains of Black family, infant, and toddler outcomes that were used to inform the identification of 20 critical family and child policy and program areas that may be candidates for anti-racist policy action. These domains and areas are highlighted in Table 1, alongside a compilation of 22 state policy approaches that have been systematically reviewed by the Prenatal-to-3 Policy Impact Center<sup>iii</sup> as having evidence of effectiveness in creating conditions for families to thrive.<sup>15</sup> We take these policy approaches and line them up against the family and child policy and program areas, and the Black family, infant, and toddler outcomes, to illustrate the alignment between the three, an important task for ensuring understanding of the areas where policies may have impact.

<sup>i</sup> Black boys make up 18 percent of the male preschool enrollment population and make up 41 percent of male preschool suspensions; Black girls make up 19 percent of the female preschool population and make up 53 percent of female preschool suspensions. Please see [Civil Rights Data Collection “Data Snapshot: School Discipline” \(PDF\) \(ed.gov\)](#) for more information.

<sup>ii</sup> For a more in-depth review of the 3Ps framework please see: Iruka, I. U., Durden, T. R., Gardner-Neblett, N., Ibekwe-Okafor, N., Sansbury, A., & Telfer, N. A. (2021). Attending to the adversity of racism against young Black children. *Policy Insights from the Behavioral and Brain Sciences*, 8(2), 175-182. <https://doi.org/10.1177/23727322211029313> and Iruka, I. U., Sims, J., & Forte, A. (2021). Black parents and their babies: Attending to the first 1,000 days. Chapel Hill, NC: Equity Research Action Coalition at the UNC Frank Porter Graham Child Development Institute. <https://equity-coalition.fpg.unc.edu/resource/black-parents-and-their-babies-attending-to-the-first-1000-days/>

<sup>iii</sup> The Prenatal-to-3 Policy Impact Center is based at the University of Texas at Austin, LBJ School of Public Affairs.

**Table 1. Alignment between the 3Ps Framework, critical family and child policy and program areas and state policies reviewed by the Prenatal-to-3 Policy Clearinghouse**

<b>Black Family, Infant, and Toddler Outcomes</b>	<b>Family and Child Policy and Program Areas</b>	<b>Included in the Prenatal-to-3 Policy Clearinghouse?</b>
<b>3Ps Framework: Protection</b>		
<b>Racism and Discrimination</b>	<b>Civil Rights Protections</b>	<b>No</b>
	<b>Criminal Justice</b> (e.g., arrest, incarceration, policing, surveillance)	<b>No</b>
<b>Material Hardship</b>	<b>Health Insurance</b>	<b>Yes</b> (i.e., "Expanded Income Eligibility for Health Insurance")
	<b>Nutrition</b> (e.g., Supplemental Nutrition Assistance Program; Women, Infants and Children)	<b>Yes</b> (i.e., "Reduced Administrative Burden for SNAP")
	<b>Housing Policy</b> (e.g., zoning policy, eviction & displacement policies, Low-Income Housing Tax Credit; Public Housing; Section 8 Housing Choice Voucher; Rural Housing)	<b>No</b>
<b>3Ps Framework: Promotion</b>		
<b>Economic Stability</b>	<b>Employment</b>	<b>Yes</b> (i.e., "Two-Generation Programs for Parental Employment")
	<b>Income Assistance</b> (e.g., Tax-based cash assistance, Temporary Assistance for Needy Families, Social Security)	<b>Yes</b> (i.e., "State Earned Income Tax Credit", "Child Allowance")
	<b>Minimum Wage</b>	<b>Yes</b> (i.e., "State Minimum Wage")
	<b>Wealth Promotion</b>	<b>No</b>
<b>Parents' Health and Well-Being</b>	<b>Health Services</b>	<b>Yes</b> (i.e., "Group Prenatal Care"; "Perinatal Telehealth Service"; "Strategies to Reduce Maternal Mortality and Morbidity")
	<b>Work Scheduling</b>	<b>Yes</b> (i.e., "Fair Work Scheduling")
	<b>Work Leave Policy</b>	<b>Yes</b> (i.e., "Paid Family Leave"; "Paid Sick Leave")
<b>Infants' and Toddlers' Health and Well-Being</b>	<b>Developmental Delays</b>	<b>Yes</b> (i.e., "Comprehensive Screening and Referral Programs"; "Early Intervention")
	<b>Home Visiting</b>	<b>Yes</b> (i.e., "Evidence-based Home Visiting Programs")
<b>Early Care and Education</b>	<b>Child Care Quality</b>	<b>Yes</b> (i.e., "Child Care Quality Rating and Improvement System"; "Child Care Ratio")
	<b>Child Care Access</b>	<b>Yes</b> (i.e., "Child Care Subsidies")
	<b>Child Care Workforce</b>	<b>Yes</b> (i.e., "Qualification"; "Coaching"; "Compensation")
	<b>Early Education</b>	<b>Yes</b> (i.e., "Early Head Start")
<b>3Ps Framework: Preservation</b>		
<b>Racial and Ethnic Cultural Identity</b>	<b>Early Education</b> (e.g., curriculum; workforce coaching; workforce diversity)	<b>No</b>
	<b>Child Welfare</b> (e.g., kinship care)	<b>No</b>

It is important to note that while policies are housed under one area of the 3Ps framework, family focused policies are typically not mutually exclusive. Meaning, benefits from a particular policy can occur across multiple areas of the framework—protection, promotion, and preservation simultaneously. On its own, the 3Ps framework helps to highlight policies that have the potential to benefit Black families and their babies. However, alongside family and child policy and program areas and Prenatal-to-3 Policy Impact Center state identified policy approaches, the 3Ps framework also helps to identify additional policies or areas of interest for Black families that may benefit from attention and research review. As such, this exercise helps to inform dialogue about current and potential policies that may advance racial equity for Black people with young children.



Making definitive statements about the impact of these policies for Black families, infants, and toddlers however, requires additional research and analyses. For instance, in some cases, the evidence for the policies reviewed was comparative, meaning the research examined contrasts between Black people and people of other races and ethnicities to highlight disparities, a goal of the Clearinghouse. The strategy of between-group comparisons, particularly those that consider White as the normative standard of comparison from which other racial/ethnic groups should be judged, can be methodologically faulty.<sup>16</sup> In other cases, the strengths and assets of Black people were not addressed in the reviews, or the examination of the way policies may be differentially implemented by states did not occur.

While it is important to understand the limitations of the research used in the Prenatal-to-3 Policy Impact Center review, the Clearinghouse does provide a starting point for determining which policies may have potential to support Black families so long as the limitations are not just acknowledged but are also taken into account when crafting or revising policy (and programming).<sup>17</sup>

With these caveats in mind, we provide an overview of state level policy approaches that the Prenatal-to-3 Policy Impact Center has found to have some level of evidence (or not) of either protecting, promoting, or preserving Black families and babies. We also draw upon Table 1 to recommend policies and programs for further research review that are aligned with the 3Ps framework.

# Policies and Programs that Protect Black Families and Babies from Harm or Trauma

The Prenatal-to-3 Policy Impact Center reviewed two policy approaches aligned with the protect component of the 3Ps framework: Expanded Income Eligibility for Health Insurance and Reduced Administrative Burden for SNAP. Of the two, only expanded income eligibility for health insurance was found to have the potential to protect Black families and babies.

## Policies and Programs Reviewed by the Prenatal-to-3 Policy Impact Center

**Expanded Income Eligibility for (Medicaid) Health Insurance** provides access to health insurance for parents seeking health care for themselves and their children. It is especially critical for families with low incomes, of which a disproportionate number (69%<sup>iv</sup>) are Black.<sup>18</sup> The Clearinghouse review identified three studies that examined the impact of Medicaid expansion that included Black families, infants, and toddlers. The results of these studies, however, were mixed and/or inconclusive. The most robust findings come from studies that examined adult outcomes related to Medicaid receipt. This body of work found that states that increased the income eligibility threshold for Medicaid, saw increases in coverage for Black mothers.<sup>19</sup> Medicaid expansion has also been found to narrow maternal mortality rates for Black mothers.<sup>20</sup> When examining outcomes for infants, Medicaid expansion is associated with reductions in preterm birth and incidences of very low birthweight among Black infants compared to White infants.<sup>21</sup>



<sup>iv</sup> This percentage uses the federal poverty threshold to define low income and includes young children under the age of six.

## Additional policies worth investigation

The Prenatal-to-3 Policy Impact Center currently **does not** include policies specifically related to material hardship, or policies that safeguard Black families and babies from racism and discrimination. Below, we discuss policy related to early intervention that may be worth further exploration in relationship to these issues.

**Equity and Inclusion in Early Intervention Identification and Supports.** Early intervention which includes services and supports to babies and young children with developmental delays and disabilities and their families, is an important resource for improving lifetime outcomes for this population.<sup>22</sup> Research, however, has identified disparities in early intervention access, with children from minority and low-income backgrounds more likely to have a delayed or missed diagnoses.<sup>23</sup> When examining Black families, specifically, research indicates that Black children are less likely to be identified as needing early intervention services,<sup>24,25</sup> and when they are identified are less likely than other races to receive high-quality services.<sup>26</sup> While on the surface, the link between of early intervention services and experiences of racism and discrimination is not obvious, it does exist. Estimates from a 2017 study found that 250 preschoolers are suspended or expelled each day, with Black children about two times more likely to be suspended or expelled than than other children of varying races. Children with disabilities or social-emotional challenges (who are disproportionately Black) are only 13 percent of the preschool population but make up 75 percent of all early suspensions and expulsions. Moreover, Black boys are 3 to 5 times more likely than children of other races to be suspended or expelled.<sup>27</sup>

In short, by not identifying and providing services to address the needs of Black children early on, the potential exists for immediate challenges related to their development, as well as future challenges including their care and educational experiences. Anti-racist policies that promote equitable developmental assessments and screenings may protect young children

(and future adults) from experiences that prohibit their engagement in emotionally and physically safe care and educational spaces.





# Policies and Programs that Promote the Health, Wealth, and High-quality Educational Access of Black Families and Babies

Of the state policy approaches reviewed by the Prenatal-to-3 Policy Impact Center, nearly all (n=20) align best with the promotion component of the 3Ps framework. Half of the 20 (n=10) were found to have positive effects on disparities for families, infants, and toddlers, but only four—State Minimum Wage, State Earned Income Tax Credit, Expanded Income Eligibility for Health Insurance (Medicaid), and Paid Family Leave—have some level of evidence of reducing disparities specifically for Black families, infants, and toddlers.<sup>v</sup>

## Policies and Programs Reviewed by the Prenatal-to-3 Policy Impact Center

**State Earned Income Tax Credits (SEITC)** are designed to incentivize work by providing tax credits for individuals who are employed, but who have low incomes (i.e., the working poor). As with other state policies, the way the program is implemented (and how the credits are applied) varies across states. Evidence shows that in addition to addressing fiscal needs, the SEITC may promote the physical and developmental health of Black babies. The Prenatal-to-3 Policy Impact Center review found that families who accessed the SEITC had a decreased likelihood of having babies with low birth weights.<sup>28,29,30</sup> This finding had larger impacts for Black mothers compared to Hispanic and White mothers. This finding is notable because Black infants are more likely than other races of infants to be born prematurely or with low birth weights, and the effects of being born early are many.<sup>31</sup> Low-birth weights can result in complications such as increased risk for respiratory problems, cerebral palsy, and developmental delays.<sup>32,33,34</sup> Challenges like these can be taxing to families emotionally and financially, and can also result in increased costs to states if services such as early intervention and special education are needed.<sup>35</sup>

**State Minimum Wage** establishes the lowest hourly payment rate a worker can receive in a state. Evidence from the Clearinghouse review indicates that state minimum wage increases reduced poverty for Black people at a higher level compared to White people, especially for Black women with lower levels of educational attainment as compared to the general population.<sup>36,37</sup> Some states are increasing the minimum wage to \$15 an hour which has the potential to increase the earnings of just over 38 percent of Black workers more generally, which may include those with young children.<sup>38</sup>

<sup>v</sup> Disparities are defined by the Prenatal-to-3 Policy Impact Center as “differential outcomes by race, ethnicity, or socioeconomic status (SES).” Our analysis examined policies that reported outcomes for Black families. Please see [https://pn3policy.org/wp-content/uploads/2020/09/PN3PIC\\_Methods-and-Sources\\_EvidenceReview.pdf](https://pn3policy.org/wp-content/uploads/2020/09/PN3PIC_Methods-and-Sources_EvidenceReview.pdf) for more information about the review.

**Paid Family Leave (PFL)** allows parents to take time off to recover physically and emotionally from childbirth or bond with a new child (by birth or adoption) while still receiving wages from their jobs. This policy approach varies by state, but currently only a few (i.e., California, Massachusetts, New Jersey, New York, Rhode Island, Washington) and the District of Columbia have enacted these policies, while some states (Colorado, Connecticut, Oregon) have enacted the policy but it is not in effect.<sup>39</sup> Just over 40 percent (40.8%) of Black non-Hispanic parents have access to PFL.<sup>40</sup> In terms of benefits to Black families with young children, PFL has also been shown to support the initiation and duration of Black mothers' breastfeeding practices<sup>41,42</sup> but these findings are not consistent across other studies.<sup>43,44</sup> Importantly, breastfeeding is linked to healthy infant and mother outcomes, including reduced rates of illnesses for the baby and lower likelihood of breast, cervical, and ovarian cancer for the mother.<sup>45</sup> Breastfeeding also supports the bond and relationship between mothers and children well past infancy.<sup>46</sup> Other studies suggest access to PFL has links to improvements in Black women's postpartum mental health. For instance, an examination of the K6, an inventory designed to identify psychological distress, showed a statistically significant decrease in the score for Black mothers.<sup>47</sup> Another study found Black women's access to postpartum care increased by 3.4 percentage points for non-White mothers, including those who are Black.<sup>48</sup>



## Additional policies worth investigation

Using the 3Ps framework, there were no policies in the Prenatal-to-3 Policy Impact Center that currently work to promote Black families' wealth or that the Prenatal-to-3 Policy Impact Center determined closed gaps in indicators of child and family wellbeing by race or ethnicity in terms of access to high-quality early care and education.

**Mortgage assistance** is one policy approach that may have the potential to support the promotion of home ownership, a key driver of wealth building across generations in the U.S.<sup>49</sup> Currently, home ownership rates for Black Americans are at approximately 42 percent, which is lower than they ever have been, including during the 1960s, a time in our country when many discriminatory housing policies were legal.<sup>50,51,52</sup> Other housing focused policies that hold potential (but that are not in existence at scale and/or that do not have causal evidence) include education focused and "monitoring/clamp down" policies designed to protect the assets of current homeowners from practices such as deed theft, predatory lending, and tax liens, all activities that have resulted in the loss of homes for Black people.<sup>53,54,55</sup>

**Baby Bonds** are another promising policy for addressing wealth disparities in Black families. This policy approach would provide all children born in the U.S. with an account at birth where yearly deposits are made (larger deposits go to children from lowest-income households, in which Black families are disproportionately represented) until the child becomes an adult.<sup>56</sup> As conceptualized, the policy emphasizes asset accumulation which is critical for building wealth. Receipt of a lump sum of capital has the potential to support economic security (and possibly wealth generation) by providing young adults with an opportunity to receive monies that can be used to acquire wealth generating assets.



**Universal preschool** is a policy approach that provides all families with preschool children access to publicly-funded pre-kindergarten in their state or community.<sup>57</sup> While high-quality early care and education programming has been found to be particularly beneficial for Black children from economically disadvantaged homes, a recent report has found that in over half the states in the country (n=26), not one provided both high levels of access and high-quality early care and education programming for young Black children (3- and 4-year-olds).<sup>58</sup> Although currently not the case across the country, having equitable access to high-quality preschool has the potential to reduce financial burdens on Black families by alleviating fees for early care and education tuition that have been found to be taxing.<sup>59</sup> Equitable access to high quality care can also help to support children's social-emotional, cognitive, and physical development which are foundational to success in future educational experiences.<sup>60,61</sup>

# Policies and Programs that Preserve the Cultural Heritage and Language of Black Families and Babies

Using the 3Ps framework, the Prenatal-to-3 Impact Center **does not** currently include policy or policy approaches that would support the cultural heritage, language, family preservation, and positive racial identity of Black families and babies. Below we highlight a policy approach for the early care and education workforce that might serve to preserve Black families and babies.

## Additional policies worth investigation

Black children receive negative messages about their racial group that undermines development of a positive racial identity.<sup>62,63</sup> Policies that support the cultural heritage, language, traditions, family unit, and positive racial identity of Black people may preserve Black families by reducing internalized racism and addressing instances of interpersonal racism.

**Increasing compensation (wages and benefits) and professional development supports for the early care and education workforce.** Research shows that having a provider or teacher of color has benefits for all children, and that Black children in particular, benefit emotionally, socially, and academically from having high-quality experiences with Black providers or teachers.<sup>64</sup> Research also indicates that the early care and education workforce (95% of whom are women), is made up of a large proportion of providers and teachers who are of color.<sup>65</sup> Black early care and education professionals, however, tend to be overrepresented in lower paying positions, have less access to resources such as professional development and ongoing training, and are employed in lower quality settings,<sup>66</sup> resulting in high levels of turnover for Black workers.<sup>67,68,69</sup>

There is some evidence that compensation parity and professional development and training can improve retention and the overall well-being of early care and education professionals which can support children's exposure to providers and teachers (including those who are Black) who have the requisite training and skills to address the unique needs of Black families, infants, and toddlers.<sup>70</sup> In addition, policies that support utilization of tools like the Assessing Classroom Sociocultural Equity Scale (ACSES), an observational tool that measures the presence of equitable sociocultural interactions in early care and education settings with racially minoritized learners (RML),<sup>71</sup> may be particularly useful for understanding the ways in which sociocultural equity is being addressed in early care and education settings. The tool can also be useful for shedding light on how providers' and teachers' ideologies or beliefs about children in conjunction with their pedagogical skills support (or not) the educational experiences and racial identity outcomes of Black children.



## Conclusion

This issue brief uses the 3Ps framework in conjunction with specific family and child policy areas, and state policies identified by the Prenatal-to-3 Policy Impact Center to highlight policy approaches that have the potential to protect Black families and babies from harm and trauma; promote their health, wealth, and educational access; and preserve their family units, cultural heritage, language, and positive racial identity. While the policies from the Prenatal-to-3 Policy Impact Center were generally well-aligned with the promotion component of the 3Ps framework, our review highlights the need for further research as well as additional policy and program refinement to begin to address and dismantle systemic and anti-Black racism and bias in policy for Black families with young children. Additional examples of these policies are shared in the [Black Child National Agenda: America Must Deliver on its Promise](#) report developed by the Equity Research Action Coalition in partnership with the National Black Child Development Institute and POINTS of ACCESS, LLC.

### About the Equity Research Action Coalition at the UNC Frank Porter Graham Child Development Institute

The Equity Research Action Coalition, a university-based collaborative, focuses on co-constructing actionable research and evaluation with practitioners and policymakers to support the optimal development of Black children prenatally through childhood across the African diaspora. The Coalition works at the intersection of research, program, and practice through anti-racist and cultural wealth frameworks. The Coalition focuses on developing a science-based action framework to eradicate the impact of racism and poverty and all its consequences on the lives of Black children, families, and communities, and to ensure their optimal health and well-being.

### About Child Trends

Child Trends is the nation's leading research organization focused exclusively on improving the lives of children and youth, especially underrepresented and historically disadvantaged populations. Child Trends works to ensure that all young people thrive by conducting independent research and partnering with practitioners, policymakers, and communities to apply that knowledge. Child Trends brings a racial equity perspective to all its work, and believes that programs and policies that serve children are most effective when they are informed by data and evidence and grounded in deep knowledge of child and youth development. Child Trends' expertise spans early childhood development, child welfare, school climate, reproductive health, family formation, juvenile justice, trauma, and youth development.

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\* These authors contributed equally to the creation of this brief.

## Endnotes

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