April 8, 2020

To: Michigan Congressional Staff

From: Matt Gillard, President and CEO, Michigan’s Children

RE: Network Learnings Informing COVID-19 Investment Response

Michigan’s Children put in place an on-line survey in addition to our own outreach to network partners. We are glad to continue to provide you information from around the state about how families and the programs trying to serve them have been are being most impacted by this crisis. We have collected themes from our conversations and survey responses here to connect their testimony with recommendations for action for Congressional relief efforts going forward.

**Concerns Voiced by Parent Respondents**

**Parents of Students** in K-12 schools said do not have enough devices to get work done for both adults and children, and they are worried about their children falling behind with learning and behavior. Parent respondents of children in preschool are also worried about filling their children’s days with enrichment. Respondents who reported their issues with K-12 school closure were also engaged with mental and behavioral health services, public support for accessing health care, and parenting supports.

**HOW FEDERAL ACTION CAN HELP:**

- Require that resources be spent to provide immediate and long-term learning opportunities and supports for students who otherwise are at increased risk of falling behind their peers. We can appreciate the inclination to attach as few strings as possible to federal funding support, we also need to make sure that support is getting to the students and families who need it the most and not just to the students and families who are most capable of receiving it.
- Ensure short- and long-term expansions of reliable internet access for families and youth.

**Parents of special education students** are particularly worried right now. Parent respondents have received some activities emailed, and little face-to-face contact so far. Some respondents are doing their best at home with suggestions from service providers, but often this is not possible, especially the more particular the students’ learning needs. Scheduling is difficult, and respondents know they cannot do what was done in a regular school day. Ultimately, they are worried about their students losing their social and academic skills.

**HOW FEDERAL ACTION CAN HELP:**

- Require priority of continuing services for infants and toddlers, preschoolers and K-12 students in special education. Maintaining current K-12 staff as well as staff in other agencies contracted for services, and training for staff in new service delivery methods is essential. Additional funding will likely be needed to provide both immediate and long-term learning opportunities and supports for students with disabilities and delays.
• Provide continued clear federal and state guidance on ensuring equitable opportunity for students with disabilities served through Part B and Part C programs, and ensure that resources are adequate to support required practice around the state.

Parents on WIC said they are worried about exposing themselves to disease but cannot use benefits to purchase online. Furthermore, being able to signing up through phone services is a benefit, and online is the best option for others.

HOW FEDERAL ACTION CAN HELP:

• Allow WIC recipients to spend benefits on online and take-out purchases.

Parents who used child care said their providers are mostly closed, and children can be very difficult to manage all the time at home. Most respondents have been in contact with child care staff and were also engaging in home visiting, preschool, WIC, and parenting classes before the crisis, illustrating the need for comprehensive strategies, rather than focusing on one segment of the service population.

HOW FEDERAL ACTION CAN HELP:

• Ensure that needed child care funding gets appropriated quickly and to providers who need it.
• Make it as easy as possible for child care and other human service providers to take full advantage of expanded unemployment benefits and aid to small businesses and contractors. This could take the form of additional resource to the states to ensure that their systems can handle increased demand.
• Target new child care resources to support families most in need, including families at risk of or already in the child welfare system, foster and kinship caregivers, and others.

Parents who use Home Visits were worried about finding enough household goods and were concerned about missing a healthy social connection. One pregnant respondent was especially worried about potentially losing access to communication with and support from their home visitor.

HOW FEDERAL ACTION CAN HELP:

• Ensure maximum flexibility of cash and other direct assistance benefits for families at this time. Families need the flexibility to make decisions.
• Provide additional resources to meet connectivity needs of clients, especially pregnant clients.
• Ensure that increases in funding for home-based services include all home visiting options that families utilize.

Parents whose Children Need Mental, Behavioral, or Developmental Services are often having to go without their normal therapy sessions, while some services have been received via videoconference. No respite care or “special therapy” is really available now to families, and for some, those special therapies were never really available for their children. There is evidence that not all parents are getting follow-up communication from early intervention referrals at this time.

HOW FEDERAL ACTION CAN HELP:

• Include funding to support training and technology support, and ensure Medicaid and other reimbursement for agencies moving to remote services for mental health and other services.
• Provide guidance for education entities taking advantage of recent funding increases to ensure that appropriate training and technology support are available to families receiving Special Education services under Part C and Part B.
• Target funding to respite care provision, particularly for families in the child welfare and foster care system and for those with other special needs children.

We collected some positive notes from our responses as well:

**Parents who use Mental and Behavioral Health Services** have reported some success transitioning or beginning counseling by phone. These parents mostly had children whose K-12 schools were also closed, and some relied on public support for accessing health care.

**Parents of Students in K-12 Schools** said their schools are providing lunches at mobile locations which is a benefit.

**Additional Concerns Voiced by Professional Respondents**

Many providers mirrored the concerns reported by parents in the survey. In addition, they had some concerns of their own.

**Cash Flow Crisis:** All agencies providing services to children, youth and families – child care, preschool, fee-for-service, and grant-based nonprofits, are concerned about keeping their services going. Many programs are unsure whether current income limitations would allow them to remain open after the crisis.

• Child care centers and home-based providers who stayed open (almost entirely to provide care for essential workers) have seen massive drops in attendance.
• Not all GSRP programs have funding to cover full salaries of teachers because they operate “blended classrooms” of child care and preschool.
• Child abuse/neglect, youth violence, and youth substance use prevention programs are concerned because public contracts and private grants are not set up to pay for services that they are now not able to provide.
• Mental and behavioral health providers are concerned with paying bills and keeping staff in order to keep meeting demand for remote services and future need for in-person services.

**HOW FEDERAL ACTION CAN HELP:**

• Make it as easy as possible for child care and other human service providers to take full advantage of expanded unemployment benefits and aid to small businesses and contractors. This could take the form of additional resource to the states to ensure that their systems can handle increased demand.
• Include funding to support training and technology support, and ensure Medicaid and other reimbursement for agencies moving to remote services for mental health and other services.
• Quickly process waiver requests that allow flexibility in contracts, while at the same time assist agencies in moving in innovative directions for service provision.
Parents are Under Extreme Stress: Parents are struggling with a lot right now, including virus and other crisis-related misinformation, employment and other basic life needs. Providers are sharing many examples of stressors being faced by different families:

- **Finances**: Despite some recent actions to extend cash and unemployment benefits, families are worried about how long this will last and are already choosing cost saving measures including those that may limit their ability to access available services, like internet access.
- **Foster Care Visitation Issues**: Parents with children in foster care are unable to have in person visits with their children during the "stay at home" order and foster and kin caregivers are unsure about what they should and can be doing to encourage these interactions.
- **Parents Surviving Domestic Violence**: Providers are getting fewer DV calls, which they interpret to mean that survivors are unable to get away from their abusers due to “shelter-in-place”. Also, current shelter residents are fearful of what happens if someone who is sick comes into shelter.
- **Purchasing Food on WIC**: Delivery and online ordering is not an option for WIC users.
- **Resource Availability**: Respondents cannot find: food pantries; transportation; baby products including diapers and diaper wipes; cleaning supplies; immunization clinics; and new car seats for parents with whom they work.
- **Stress of the Situation**: Many parents are afraid to go anywhere, even out for basic needs, and are struggling to communicate change and limitation with their children and maintain basic stability in their home. Children and youth and parents who have experienced trauma or instability have a more difficult time adjusting to upset routines.
- **Access to Medication**: There is also concern about children and youth getting the medication they need from mental health providers.

HOW FEDERAL ACTION CAN HELP:

- Make sure that new resources, like unemployment expansions and direct payments are flowing to families in a timely way, and are able to reach families who are more mobile. Provide additional financial support through additional cash assistance as need becomes more apparent longer-term for vulnerable families. Make emergency funding available to families who will be able to take advantage of unemployment expansions, but are unable to wait for the delay that states are experiencing.
- Target additional resources to community-based programs that prevent child abuse and neglect by helping families access basic resources including food, baby, cleaning, health, and safety supplies, including increases to the he Child Abuse Prevention And Treatment Act Title II.

Problematic Remote Family Outreach: Providers maintain that sustained services for families are still needed however possible to prevent future issues, but:

- **Not All Families Have Equal Access**: Many parents or caregivers cannot communicate through a tablet or larger computer, have older phones that don’t work with newer channels, or have cell minute limits. Many grandparents struggle to access remote services. Tribal mental/behavioral health efforts have been particularly disrupted because video or phone are unavailable to many.
- **Remote Visiting Only Goes So Far**: Many services including home visits, mental and behavioral health, and maternal and prenatal health, are providing remote consultation, but only some work can be done on the phone. Professionals can detect signs of isolation and anxiety, but not conduct full psycho-social assessments. Prenatal care providers cannot conduct weight checks.
Some May Lose Clients: Many families want in-home visits and will not go for remote visits. Others will fall out of programs because other crises will come up that must be dealt with.

Families With School-Aged Children Have Particular Remote Access Issues: Getting curricular materials to students remains very difficult, both in-paper and electronically. Students are losing access to additional academic help which means they are more likely for falling further behind.

There Is No Guarantee Of Response: Not every family responds to communications. Conducting initial referrals for early intervention providers has been especially difficult if a provider has limited contact information for a family.

There are Privacy Concerns: Respondents are wanting to ensure online referrals comply with FERPA and HIPPA.

HOW FEDERAL ACTION CAN HELP:

- Provide increased funding to ensure that every household and every service provider can access some kind of ability to connect reliably, either through cell phones or other internet coverage. Training opportunities must be supported for not only providers but for families who are trying to learn how to receive services in different ways. Agencies who have built family trust need to be supported to provide that additional assistance that might not be considered direct service provision for reimbursement.
- Ensure adequate funding for programs that can communicate with specific vulnerable populations, including homeless youth, foster youth, youth in juvenile justice programs, families who rely on home-based services and home visits, and adoptive and foster families.
- Provide strong yet flexible guidance and clarity on data privacy concerns within telehealth for a variety of service delivery.

Workforce Strain and Security: Agencies across disciplines, and their staff, are concerned about the stability as well as the health and safety of our child and family-serving workforce:

- Basic Wage and Resource Stability: Respondents voiced concern for maintaining wages which were often already too low for the value of work done, as well as covering health insurance premiums. Groups are unsure if all of their employees will be able to get unemployment.
- Basic Workforce Safety: Special education and mental and behavioral health respondents noted that staff feel unsafe providing services with students without PPE, for everyone’s protection.
- Providers are Parents Too: Some HV pros are balancing care for their own young children, including infants. Respondents voiced particular concern for single parents.
- Providers are Stressed Too: Respondents are also finding it difficult to manage continued work and the demands of constant change on top of long hours and meager resources.
- Providers Need Services Too: Some professionals cannot access the physical and mental health care they themselves had been using (including cancelled dental appts)
- Retention Issues: Providers are already losing employees to retail, shipping, and other industries. Preschool and child care providers are losing college student employees with school off, which they understand, but have anxiety that their university pipeline will close.
- Workforce Stretched Thin: Many respondents replied that they held multiple professional roles across different, although often related, work areas. This means that when one individual loses productivity, multiple systems will feel the consequences.

HOW FEDERAL ACTION CAN HELP:
• Assess the success of economic stimulus efforts and continue to focus on the ability for families who faced economic challenges and difficulties in service access before the crisis to be able to provide for themselves and their children.

Other Service Closures and Missed Opportunities to Provide Services Include:

• Group meetings, which are effective interventions for substance use disorder and parenting classes, have all been cancelled, and virtual group meetings feel very different.
• Many child welfare cases are being put on hold as Court systems struggle to create and implement new ways of doing business. Family reunification efforts have been stymied as have other family supports through the courts.

We collected some positive notes from our responses as well:

• Mobile and home drop offs of food and child/family living supplies have been very appreciated where available and expansion is recommended
• Agency vehicles available to go to people has been a big help when needed.

Thank you for your work on behalf of the public health and safety of our citizens. We will continue to be in touch with more information from the field.