





DEEP LIKE THE RIVERS: REDUCING LONG TERM HEALTH CARE COSTS THROUGH BETTER FUNDING FOR EARLY CARE AND EDUCATION

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As much as \$556 billion in COVID 19-related costs are predicted over the next two years. This is just one estimate, in April 2020, by America's Health Insurance Plans (AHIP), of the devastating impact of the pandemic on health care costs.

The country has recently learned that cardiovascular conditions like hypertension, heart disease and stroke are associated with vulnerability to a much more serious form of COVID 19, resulting in greater hospitalization, ICU stays and deaths. These conditions especially impact people of color who often experience greater stress and face more structural barriers to preventive health care throughout their lifespan compared with non-people of color.

Good News About Health Outcomes and Child Care

In the midst of all the bad news surrounding COVID19, we have good news. For those who want better health outcomes in children, young adults <u>and</u> midlife adults, there is an excellent investment available: quality <u>early care and education (ECE)</u> for

low-income children. This investment is highly likely to result in significantly lower health care costs throughout the lifespan.

Research now indicates that better <u>midlife</u> outcomes result from participation by low income children in Head Start and other early care and education programs--as much as thirty years after their participation.

The studies show that high quality ECE is associated with reduced risk of cardiovascular disease at midlife. This translates into significant <u>cost-savings in health systems</u> over the life span. Why? These better health outcomes **also** reduce the *likelihood* of long term, substantial costs of inpatient and outpatient health care services, especially later in life.

We have known for decades that short term better health outcomes (with positive lifelong benefits) are associated with early care and education. Experts in the benefits of investing in ECE (Head Start, child care, PreK) have long demonstrated that child participants are more fully immunized, partly because it is

a necessary requirement for safe participation in programs serving groups of children.

Children enrolled in quality ECE are also more likely to participate in prevention-oriented health assessments which detect health and developmental conditions early in life, when they can often be more easily remediated.

Immunization is one of the best investments society can make to defray later costs in the health sectors, by preventing measles, mumps, rubella and other diseases that can result in prolonged disabilities. Experts estimate that for every\$1 spent on immunization, \$16.50 is saved in later direct and indirect costs.

Start, or child care linked closely to community health centers or clinics, are more likely to have hearing, vision and developmental impairments identified early and treated, as well as screenings for early-life lead exposure. This prevents long term (and expensive) disability and impairment of function.

Every dollar invested in early childhood developmental screening and treatment saves \$17 in health and societal costs.

Early Care and Education Programs Promote Higher Immunization Rates

Early care and education programs--and early educators--play a hidden but key role in helping the nation realize these cost savings. Early educators, often in daily, trusted communication with parents, also often serve as informal health promoters or health advocates for children, encouraging parents to assure timely immunization, reassuring their concerns and informing them where vaccination can be obtained at low or no cost.

As safe and effective vaccines for COVID-19 are developed and made available, our nation will discover how important early care and education programs--and our valuable early educators--will be in the wide acceptance and use of COVID-related vaccines. Early educators will reassure, educate, remind and help parents take the necessary steps to vaccinate their children, themselves and other family members against this deadly disease.

Recent in depth analyses of longitudinal studies of ECE show an extraordinary new finding about positive health outcomes. This new finding is <u>in addition</u> to long standing research about early care and education and immunization— and early detection and remediation of health and developmental conditions in children, noted above.

Positive Health Outcomes from ECE Participation in Midlife

Not only do participants in quality early care and education programs enjoy better health as children--they have significantly better health as adults--even into mid-life. Dr. Rucker Charles Johnson has carried out longitudinal research demonstrating that health-focused ECE--specifically the Head Start program--leads to generally improved health status in adulthood, especially when robust investment is made in the K-12 education systems in which the Head Start children later participate.

Dr. Rucker Johnson's research aligns with detailed economic analyses of the midlife health effects of ECE programs by the Nobel Laureate economist <u>James Heckman</u> and his colleagues <u>Jorge Garcia</u>, <u>Gabriella Conti and Rodrigo Pinto</u>.

The University of Chicago's economic research has analyzed evaluations of the Abecedarian Preschool Project, a full-time health and family support-focused early care and education program that began prenatally and ended at 5, whose participants have been studied into mid-life. A 2014 study of the Abecedarian Project, published in Science, revealed that adults, especially males, who had participated 30 years earlier in this program had lower incidences of hypertension in their mid-30s, compared to peers who had not participated.

The message is clear: at <u>midlife</u>, participants in this <u>program</u> had <u>lower rates of chronic disease</u>.

Less Cardiovascular Risk Resulting from ECE Participation

As COVID-19 ravages adults with metabolic syndrome it is especially relevant to note that the *Science* article reported in 2014 that "None of the participants in the Abecedarian Project's treatment group later exhibited the cluster of conditions known as "metabolic syndrome," which is associated with greater risk of heart disease, stroke, and diabetes."

Mid-life positive health outcomes were also found for graduates of the Perry Preschool Project, a high quality preschool program which has also followed participants into their forties. Male graduates were less likely to engage in smoking. Smoking is a strong predictor of later serious (and expensive) disease. Male Perry Preschool participants ate healthier foods later in life. Female graduates were more likely to engage in more physical exercise.

Why would that occur? We have long known that investment in high quality ECE reduces long term educational costs for special education and grade repetition. Dr. Rucker Johnson's research -- as well as that of many other social scientists--demonstrates that ECE increases children's educational attainments and leads to greater socioeconomic success.

Higher levels of education and income are also generally associated with better health outcomes. Head Start and high quality child care and preschool also encourage young children to develop healthy lifestyle habits. They encourage parents to learn about and foster these as well, if they are not already doing so.

Implications for Decisions by the United States Senate

As Members of Congress --and the Governors--consider how to rescue the early care and education system, so badly impacted by COVID19, these short and long term outcomes are just one more reason why significant federal funds should be allocated to child care.

Recently, the House of Representatives, in a bipartisan vote, passed \$50 billion in immediate relief for child care and \$170 billion over the next 10 years. The Senate is still deciding--with proposed investments ranging from \$15 billion to \$50 billion.

Certain truths have become self-evident. There cannot be economic recovery without child care. Parents cannot return to paid work without child care. Women especially, as primary caretakers of children, will be denied the right to earn an income without child care.

And, as previously shown, child care investment **generates** substantial <u>economic growth and recovery</u>. The dollars paid to educators in this labor-intensive industry--and the dollars paid <u>by</u> them to purchase goods and services needed in their programs-- then circulate into businesses in local and regional economies. Child care boosts economic recovery by increasing the bottom line profits of businesses.

Now we have yet another reason to substantially fund child care:

<u>high quality early care and education also supports the</u>

<u>development of healthier children. And healthier children result</u>

in healthier adults. These benefits return very substantial longterm savings to our society, in our beleaguered health systems, as well as in education systems and in business life.

We urge the US Senate to rapidly assure passage of the bipartisan child care measures passed by the House of Representatives.

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