



Geaux Far Louisiana Strategic Plan

2023 - 2028



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We want
to make sure
that anything that
touches a child
has a system
around it.

This is where
the action begins.
This is where we start
putting together
the pieces
to go far.

Rochelle

Executive Director of Wilcox Academy
of Early Learning
Co-Founder of For Providers
By Providers
Geaux Far Louisiana Steering
Committee Co-Chair
Louisiana 2022 Early Learning Leader
of the Year



A CALL TO ACTION: GEAUX BIG FOR LOUISIANA'S LITTLE ONES

Dear Champion for Children,

Louisiana's youngest children and their families should be thriving, not just surviving. Yet, too many families with children, prenatal to age five, struggle to access the information, resources, networks, programs, and services they need during the earliest years of their child's life. In Louisiana, our systems are disjointed, under-resourced, and not sufficiently responsive to families.

Simply put, we have to do better. Our children are far too valuable not to. **We believe we can create an equitable, unified, child- and family-centered early childhood system that focuses on racial equity and ensures families have access to seamless, high-quality early childhood development, health, and educational services.**

That is why we created Geaux Far Louisiana—to dream big for our littlest and most vulnerable ones, particularly our children from prenatal to age three. As the old African proverb says, “If you want to go fast, go alone. If you want to go far, go together.” The Geaux Far Louisiana planning process engaged thousands of families, service providers, community leaders, and advocates for young children and their families from across the state. We are honored to present the enclosed plan, which represents the dreams of Louisiana's families for our young children and articulates a path to achieving this vision that unites our coalition.

Now the real work begins to make this vision a reality in Louisiana. We need your help. Implementing this plan will require an unprecedented level of investment and effort across communities and the public and private sectors. It takes nothing short of a paradigm shift. Geaux Far Louisiana requires all of us to recognize that providing for the health, well-being, and education of our young children and their families is a public good, and a valuable and worthwhile investment. We encourage you to get involved in making this dream a reality at www.geauxfarla.org. Together, we can Geaux Far for Louisiana's children!

Sincerely,



Libbie Sonnier, Ph.D.

Executive Director of the Louisiana Policy Institute for Children
Geaux Far Louisiana Steering Committee Co-Chair



Rochelle Wilcox

Executive Director of Wilcox Academy of Early Learning
Co-Founder of For Providers By Providers
Geaux Far Louisiana Steering Committee Co-Chair
Louisiana 2022 Early Learning Leader of the Year



I've never met
a family
that didn't
want better
for their children.
They might
not know how.
Here is
where it starts.

Libbie

Executive Director of
Louisiana Policy Institute for Children



HOW ARE LOUISIANA'S CHILDREN?

All families in Louisiana want their children to be healthy, happy, and to thrive. Healthy families and young children, prenatal to age five, are the backbone to thriving communities and economic vitality for our state. Yet, Louisiana has failed to adequately invest in our youngest children and their families, particularly during the critical period from prenatal to age three, despite mounting evidence that this is one of the best investments a state can make. In fact, according to Nobel laureate economist [James Heckman](#), **high-quality birth-to-five programs for children who have been historically marginalized deliver a 13% return on investment**. Louisiana will never realize this return unless we put our young children and their families first. Doing so, however, requires honesty about where we have failed to date .

Louisiana has largely lacked the public and political will to invest in our children and families, particularly in the prenatal to age three period and with families of color. Historic and institutional racism are embedded in the systems we have developed to serve families with young children. Our early childhood systems isolate services and make it difficult for families and their young children to navigate the public supports and programs that are supposed to be designed to assist them. Our siloed and disconnected state government—where economic benefits and child welfare are in one agency, early learning is in another, a third agency oversees family health, and families are largely left out of decision-making—is evident to families. As a result, Louisiana has an inequitable, uneven, and confusing web of services for families with young children, decades of gross underinvestment, and a legacy of racist policies that have left us unable to improve family and child outcomes or close unacceptable racial disparities.

Louisiana has an inequitable, uneven, and confusing web of services for families with young children, decades of gross underinvestment, and a legacy of racist policies.



**Almost 1/3 of all
Louisiana children
under age 5
live in poverty**

For over a generation, Louisiana has consistently ranked at the bottom among the United States for all positive measures related to children and their families. In the annual [Annie E. Casey KIDS COUNT](#) rankings of child well-being across numerous domains, Louisiana's 33-year average ranking among states is 49th, exactly where Louisiana stands in the latest [KIDS COUNT](#). Louisiana has the second-highest poverty rate in the nation and significant economic inequality. Almost one-third of all Louisiana children under age five live in poverty, and Black children are three times more likely to live in poverty than white children. The state's infant and maternal mortality rates consistently exceed national averages with sobering disparities by race. [Nine out of 10 Louisiana children under age three from economically marginalized households lack access to publicly funded child care](#) and most cannot afford to pay for it on their own. But the families of the more than 300,000 Louisiana children under age five don't need a report to tell them about these challenges. They experience them every day. Today, from the moment a child is conceived in Louisiana until they enter kindergarten, support for their success is inconsistent at best, and, too often, simply nonexistent.

While
the challenges
are enormous,
there are reasons
for hope.



While the challenges are enormous, there are reasons for hope. There is a growing movement across race, gender, and geography to prioritize children and families in Louisiana. This movement is evident in first-time local investments in early care and education in communities from Jefferson Parish to Shreveport. It shows in the coalition that brought grassroots organizers, business leaders, parents, early childhood educators, advocates, and a wide range of civic groups and elected officials together to pass a historic ballot initiative of nearly half a billion dollars in new local investments in early care and education for infants and toddlers in New Orleans over the next 20 years. And it shows in the Louisiana Legislature, which recently saw bipartisan votes that made [kindergarten mandatory](#), extended [Medicaid coverage to 12 months postpartum for new moms](#), increased access to doulas, and [mandated perinatal mood disorder screenings](#) to improve maternal and child health, particularly for women and babies of color. Louisiana's Fiscal Year 2023 state budget includes both [record funding for early care and education](#), as



well as the first investment in early childhood well-being in over a decade with the revival of the Early Childhood Supports and Services program.

Geaux Far Louisiana seeks to build on this momentum to ensure we continue to grow the public and political will we need to enable the success of all of Louisiana's young children and their families. This is especially important for children under age three, when the bulk of brain development occurs, and for families of color who have been systematically denied access. While the challenges facing young families in Louisiana are enormous, the groundswell of diverse families, early childhood service providers, community members, systems leaders, and advocates dedicated to creating a comprehensive early childhood system that effectively supports them is significant. Together, we can and must Geaux Far for our young children and their families.

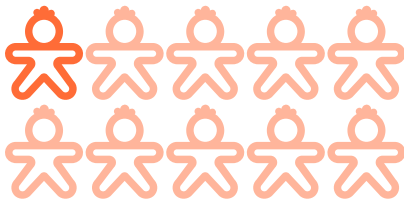


WE NEED TO START EARLY

The prenatal-to-three years may be the most important. Research shows that 80% of a child's brain architecture is developed by the time they turn three years old. This developmental period forms the foundation for all future behavior, learning, and health. It also represents the period when many parents are learning to parent for the first time. Despite the importance of the prenatal-to-three years, Louisiana continues to see enormous disparities—particularly by wealth, race, and geography—for children in this age range. Programs, services, and resources are lacking during these critical years, which contributes to Louisiana's abysmal outcomes in maternal and child health, child and family well-being, and school readiness. While more than nine in 10 four-year-old children from families that are considered economically disadvantaged are served in Louisiana's LA-4 preschool program, only one in 10 marginalized children under age three are served in a publicly-funded early care and education program. For Louisiana's children and families to thrive, we have to start earlier.

80% of a child's
brain architecture
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**Only 1 in 10
economically
marginalized children
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early care and
educational program**

This urgency is why the prenatal-to-three years are foundational to Geaux Far Louisiana’s goals, objectives, and strategies. **All objectives and strategies intentionally and deliberately include a focus on prenatal-to-three.** If systems and services don’t include and work for this population, too much is lost. Certain strategies only apply to the prenatal-to-three population, such as the expansion of doula services and family support during the perinatal period; scaling of home visiting for newborns and their families; and the creation of lactation rooms in public and private spaces.

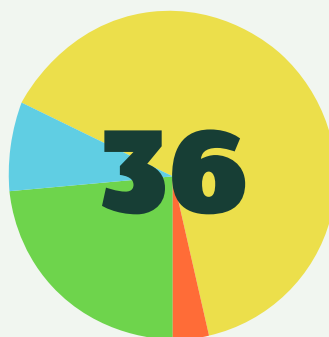
Other strategies incorporate prenatal-to-three as a critical basis for families to support the success of their children. For example, multiple strategies focus on ensuring families with young children learn about and connect to services and supports that start with a focus on infants and toddlers and move up from there. Likewise, the challenging work in early care and education has as its foundation the inclusion of infant and toddler services as a starting point. It all starts with our babies—celebrated, welcomed, and included in all aspects of Geaux Far Louisiana.



MEET THE STEERING COMMITTEE

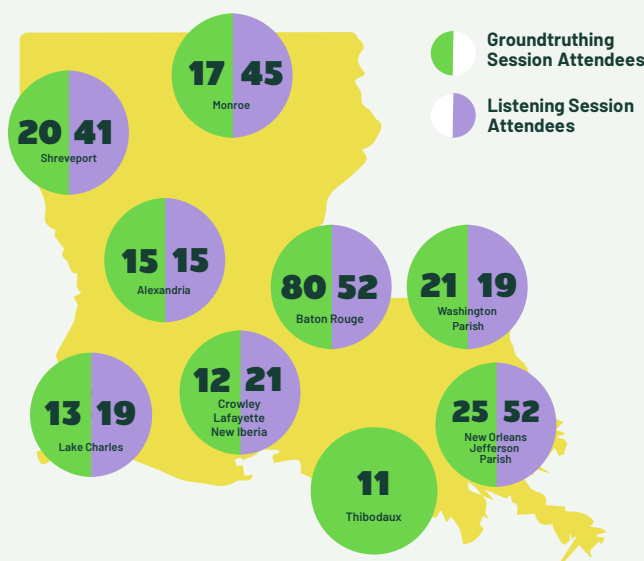
The Geaux Far Louisiana Steering Committee was designed to reflect the regional, racial, and ethnic diversity of Louisiana, as well as a commitment to racial and social justice.

- 13 Louisiana Parishes Represented
- 9 Full Group Meetings
- 2 Steering Committee Retreat
- 8 Working Group Meetings



- 65% Parents
- 23% Providers
- 8% Business Owners / Leaders
- 4% Elected Officials System Leaders

REACHING 1,100+ PARTICIPANTS



Our work was informed by a community engagement process led by the Power Coalition for Equity & Justice and included:

- 13 Listening Sessions Across Louisiana Spring 2022
- 306+ Listening Session Attendees
- 11 Groundtruthing Sessions in July and August 2022
- 264 Groundtruthing Session Attendees
- 510 Online Survey Participants

GEAUX FAR LOUISIANA STEERING COMMITTEE

Todd Battiste
Amanda Brunson
Chasity Caesar
Konstance Causey
Cheruba Chavez
Dawn Collins
Cynthia DiCarlo
Susan East Nelson
Kristi Givens
Antoinette Hoard
Tessa Holloway
Jayme Johnson
Michelle Joubert
Mattilyn Karst
Katie Magee
Tim Magner
Stephanie McGuffee
Khanh Nguyen
Thunga Nguyen
Cristel Padilla
Karen Powell
Jen Roberts
Frankie Robertson
Amanda Robinson
Christy Ross
Hien Sanchez
Kimble Scott Wallace
Morgan Shannon
Joetta Shields-Pitts
Libbie Sonnier
Olivette Temple
Angelia Turner
Kahree Wahid
Yasmin Welch
Rochelle Wilcox
Bryanna Williams

THE GEAUX FAR LOUISIANA PLANNING PROCESS

Given the alarming and urgent needs of Louisiana's young children and their families, Geaux Far Louisiana was established to create a comprehensive plan and policy agenda for the transformation of Louisiana's early childhood systems. The Geaux Far Louisiana planning process was designed to center the lived experiences and voices of the parents, maternal and child health professionals, and early childhood providers who are closest to the challenges Louisiana families face. Given the racial, economic, and gender disparities in Louisiana, this required a clear commitment to racial equity from the beginning.

This plan has been driven by a 36-member Steering Committee. The majority of Steering Committee members are parents with young children and/or providers of early care and education, health, or wellness services. Representatives of government, as well as policy, advocacy, and community organizations, rounded out the committee. The Steering Committee drew its membership from 13 Louisiana parishes, and was designed to reflect the regional, racial, and ethnic diversity of Louisiana, as well as a commitment to racial and social justice.

The process has engaged more than 1,100 parents, grandparents, doulas, pediatricians, nurses, mental health professionals, advocates, educators, child care providers, community leaders, and representatives of non-profit organizations and government agencies from communities across Louisiana. People came together through a series of listening sessions, held throughout the state, in Spring 2022 where people shared their current realities and their hopes and dreams for the future. In Summer 2022, on behalf of the Geaux Far Steering Committee, the Power Coalition for Equity & Justice went back to communities to share the draft plan and ensure it matched their truths and aspirations during groundtruthing sessions.



I'm here as a mother of a disabled child. Kids can't speak for themselves. Once you have a group of people that come together like this, they are a force to be reckoned with.

Amanda

Geaux Far Louisiana
Steering Committee



GEAUX FAR LOUISIANA GOALS

Geaux Far Louisiana identified five goals to create an equitable, unified, child and family-centered early childhood system that centers racial equity and ensures families have access to seamless, high-quality early childhood development, health, and educational services:

A Family- and Provider-Driven System:

Families and providers are engaged and prioritized in leadership and decision-making throughout the state's early childhood system.

- 1.1 Formal Decision-Making Structures
- 1.2 Effective Government-Family-Provider Partnerships
- 1.3 Early Childhood Leadership



A Net That Works:

All families have access to an inclusive, caring, well-coordinated network that helps them meet their basic needs and supports child development.

- 2.1 Informed, Supported Families
- 2.2 Accessible, Coordinated Systems



A Healthy Start:

All families receive family-centered, comprehensive, whole-person physical and mental health care, from pregnancy, through the early childhood years, and beyond.

- 3.1 Universal Health Care Access and Availability
- 3.2 Support for Parents Through the Early Years
- 3.3 Improved Quality of Health Care and Providers



Child Care for Everybody, Everywhere:

All families have equitable access to affordable, high-quality early care and education that is well-funded and responsive to the needs of families, children, and the educators and providers who make it possible.

- 4.1 More Affordable, Responsive Child Care Options
- 4.2 High-Quality Early Learning Programs
- 4.3 Competitively Compensated Early Care and Education Workforce



Family Friendly Workplaces

All employers in Louisiana have family-friendly policies that support employees with prioritizing the well-being of their children.

- 5.1 Infant and Toddler Feeding Supports
- 5.2 Workplace Supports



GOAL 1



1.1 Formal Decision-Making Structures

1.2 Effective Government-Family-Provider Partnerships

1.3 Early Childhood Leadership

A FAMILY- AND PROVIDER DRIVEN SYSTEM

Families and providers are engaged and prioritized in leadership and decision-making throughout the state's early childhood system.

Louisiana's families must be prioritized to raise healthy children. Government plays a critical role in setting policies, developing and supporting program implementation, and providing funding for the systems with which families interact from pregnancy throughout childhood. A network of early childhood providers across health, education, and social service programs engages directly with families every day to carry out these policies and implement programs. Ensuring our early childhood system effectively and equitably supports the success of our children requires strong partnerships across government, providers, and families.

The families and providers who are directly impacted by the state's early childhood system must be central in decision-making when it comes to a wide range of policy, funding, and implementation decisions. Without their involvement in the decision-making process, our policies and programs often do not respond to their needs and cannot be implemented effectively. Too often, however, families and early childhood providers are not meaningfully supported in participating as full partners and leaders in decision-making and are only engaged after major decisions are made. We can change this.



In coalitions like this, when having all at the table, the vision around what can happen and the policies that come out, are going to be really impactful for decades to come.

Morgan

Director of Strategic Partnerships
Power Coalition For Equity & Justice
Activist



Families and early childhood providers are not meaningfully supported in participating as full partners and leaders in decision-making and are only engaged after major decisions are made. We can change this.

OBJECTIVES AND STRATEGIES

Geaux Far Louisiana recommends the following objectives and strategies to engage and prioritize families prenatal-to-five and early childhood providers in leadership and decision-making throughout Louisiana's early childhood system.

1.1 Formal Decision-Making Structures

Louisiana's early childhood system includes **formal leadership and decision-making structures that incorporate families and providers** in guiding governance and implementation by:

1.1.1 Creating and sustaining family academies throughout Louisiana that support families and providers in developing the knowledge and networks to meaningfully participate in planning, policy development, and implementation for Louisiana's early childhood system. This support can build on existing civic leadership development and advocacy training programs, including the [Parent Leadership Training Institute, Louisiana Councils Advocacy Network \(LaCAN\)](#), and numerous others run by non-profit and civic groups.

1.1.2 Revising the makeup and roles of state policy bodies that impact young children and their families to ensure at least 55% of the members of each board, commission, advisory council, and related state policy body are parents, caregivers, or early childhood providers who actively and meaningfully participate in planning, policy development, and implementation.

1.1.3 Updating public comment policies and procedures to enable multiple languages and methods for public comment so that the families and providers most impacted by state policies are able to engage more fully in the policy-making process.

1.1.4 Appointing a representative of early education to the [Board of Elementary and Secondary Education \(BESE\)](#) so that there is leadership of early learning providers at the highest level of executive branch decision-making for the state's early education system.

1.2 Effective Government-Family-Provider Partnerships

Louisiana's **government staff partner effectively with families and providers** who represent the racial and geographic diversity of Louisiana by:

1.2.1 Promoting and holding regular state and regional listening sessions for legislative and executive staff who support the early childhood system to improve understanding of provider and family experiences, and the impact of state policies and decisions on them.

1.2.2 Providing orientation about Geaux Far Louisiana during staff onboarding in state agencies that support the early childhood system to ensure public sector employees understand the plan and partner with parents and advocates to implement it.

1.2.3 Creating and disseminating educational tools about the progress of the state in policy and program implementation to celebrate progress and address challenges.

1.2.4 Providing training and support to enable state agency staff to improve their active listening and problem-solving skills, as well as their engagement, partnership, and collaboration with families and providers to support effective partnerships.

1.3 Early Childhood Leadership

Dedicated high-level positions in Louisiana government support the early childhood system by:

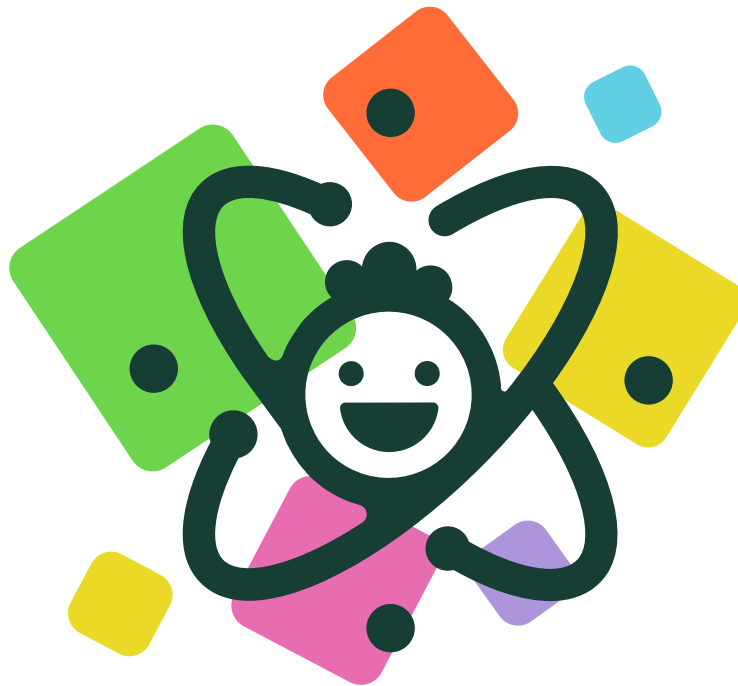
1.3.1 Creating a Deputy Superintendent for Early Care and Education at the Louisiana Department of Education to ensure the highest level of leadership and attention to the complex, multi-faceted work of the early care and education system, and its connections to the broader early childhood system.

1.3.2 Creating an Assistant Superintendent for Family and Community Engagement at the Louisiana Department of Education, and similar positions at the [Louisiana Department of Health](#) and [Louisiana Department of Children & Family Services](#), to ensure dedicated, focused, and consistent attention to meaningfully including families and providers in planning, policy development, and decision-making.

1.3.3 Sustaining the Director of Early Childhood Systems in the Governor's Office to ensure focused attention across agencies on supporting young children and families.



GOAL 2



2.1 Informed, Supported Families

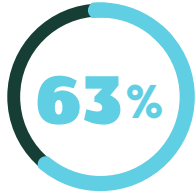
2.2 Accessible, Coordinated Systems

A NET THAT WORKS

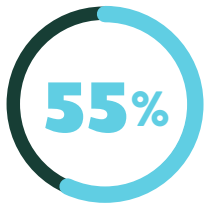
All families have access to an inclusive, caring, well-coordinated network that helps them meet their basic needs and support child development.

Children don't come with instructions. In Louisiana, from the moment a child is conceived until they enter school (and beyond), families want information, resources, and support to address the basics of food, housing, health, safety, quality child care, and economic stability. [ZERO to THREE's National Parent Survey](#) found that 63% of parents find their responsibility for a child's development in the first five years of life terrifying, 54% of parents wish they had more information on how to parent, and 48% of parents say they don't get the support they need when they are feeling overwhelmed or stressed. All too often in Louisiana, even when resources are available to support their success, families struggle to find good information and navigate a complicated web of eligibility requirements across multiple agencies with policies and laws that have historically created barriers for families of color. Despite one of the highest poverty rates in the nation, only [four in 100 Louisiana families living in poverty receive cash assistance through the Temporary Assistance for Needy Families \(TANF\) program](#)—a rate that is the lowest in the nation. The [KIDS COUNT 2021 Data Book](#) reminds us, “Children who live in nurturing families and supportive communities have stronger personal connections and higher academic achievement. Parents struggling with financial hardship have fewer resources available to foster their children's development and are more prone to face severe stress and depression, which can interfere with effective parenting. When communities are safe and have strong institutions, good schools and quality support services, families and their children are more likely to thrive.”

All too often in Louisiana, even when resources are available to support their success, families struggle to find good information and navigate a complicated web of eligibility requirements across multiple agencies with policies and laws that have historically created barriers for families of color.



Parents find their responsibility for a child's development in the first 5 years of life terrifying



Parents wish they had more information on how to parent

OBJECTIVES AND STRATEGIES

Geaux Far Louisiana recommends the following objectives and strategies to move Louisiana toward ensuring all families have access to the resources and networks they need to succeed.

2.1 Informed, Supported Families

Family-directed families with young children have **quality, culturally competent supports to help them know where and how** to access the information, resources, and services they need when they need them, starting during pregnancy, by:

2.1.1 Connecting families to community resources through trained, culturally inclusive community touchpoints, hubs, and messengers with reliable information and resources that can help advance overall family well-being. This connection can build on existing [Louisiana Family Resource Centers](#), [the Louisiana Council's Advocacy Network](#), [211 Louisiana](#), [Families Helping Families](#), [school-based health centers](#), [community learning hubs](#), [community schools](#), and [TrainingGrounds' We PLAY Center](#).

2.1.2 Launching a website and app for families that helps them understand key parenting and child development practices, and find resources and services. Examples of existing resources include [FindHelp.org](#), [vroom.org](#), [Wunder.org](#), [Bright by Text](#), [DFWChild](#), [ShoutHealth](#), and [Learn the Signs. Act Early](#).

2.1.3 Expanding home visiting so every family of a newborn in Louisiana has multiple contacts with somebody who is trained to support family-directed efforts, assess family needs, connect them to services, and follow up, from pregnancy through early childhood. This connection will require expanded home visiting and community outreach capacity, additional federal and state funding, and investments from Medicaid and private insurance.

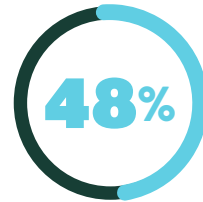
2.2 Accessible, Coordinated Systems

Family service providers across sectors work together to meet the needs of families with young children, including immigrant families who are often not eligible for government services, by:

2.2.1 Moving toward universal access to programs and services that help families meet their basic needs through common and expanded income eligibility with sliding scale options and removal of barriers (including requests for unnecessary information) to allow more families to qualify for multiple programs across agencies at once. This movement can build on existing efforts to expand [Broad Based Categorical Eligibility](#) in Louisiana and involve state and federal efforts to align and expand eligibility for a wide range of programs and services such as Supplemental Nutrition Assistance Program (SNAP), Medicaid, early care and education assistance programs, and [Low-Income Home Energy Assistance Program \(LIHEAP\)](#).

2.2.2 Using publicly funded early care and education to connect families with other services. Recent investments have expanded access to high-quality early care and education for young children in Louisiana and built the capacity of local early childhood community networks to build on existing models and partnerships through programs like Head Start, Early Head Start, the New Orleans [City Seats](#) program, [EarlySteps](#) and [TIKES](#). Early care and education can be expanded as a key access point to connect families to additional resources and services when they need them.

2.2.3 Building stronger coalitions to advocate for greater access to the resources and supports families with young children need, including housing, nutrition, and economic opportunity. This work can build upon existing efforts by the [Power Coalition for Equity and Justice](#), the [Louisiana Budget Project](#), [Louisiana Fair Housing Action Center](#), the [Louisiana Public Health Institute](#), and others working across sectors and issues.



**Parents say they
don't get the support
they need**



GOAL 3



3.1 Universal Health Care Access and Availability

3.2 Support for Parents Through the Early Years

3.3 Improved Quality of Health Care and Providers

A HEALTHY START

All families receive family-centered, comprehensive, whole-person physical and mental health care, from pregnancy, through the early childhood years, and beyond.

Healthy families and healthy babies are critical to a successful Louisiana. Yet, Louisiana's current health care system leaves many prenatal-to-five children with undiagnosed and untreated mental and physical health challenges while their caregivers struggle. These challenges are exacerbated during pregnancy. Louisiana is among the worst in the nation for maternal health and infant death rates with alarming disparities by race. According to the Louisiana Department of Health, two Black mothers die in childbirth in Louisiana for every white mother and two Black babies die for every white baby. One in four mothers of infants and toddlers report less-than-optimal mental health, with worse rates for mothers of color. Nearly 50,000 Louisiana children under age five experience impairing social-emotional or behavioral health problems. For Louisiana's children under age five who are served by Medicaid, over one-third do not have regular well child visits and over half do not receive regular dental care, according to Early Childhood Risk, and Reach in Louisiana. Nearly two in five Louisiana children under age 18 have been exposed to two or more Adverse Childhood Experiences (ACEs), which contribute to adverse health outcomes. Given how important wellbeing is to a child's brain development, ensuring access to high-quality, affordable, culturally competent care for birthing parents and young children in Louisiana is critical to creating a Louisiana where all citizens are healthy enough to thrive.

One in four mothers of infants and toddlers report less-than-optimal mental health, with worse rates for mothers of color. Nearly 50,000 Louisiana children under age five experience impairing social-emotional or behavioral health problems.

Given how important wellbeing is to a child's brain development, ensuring access to high-quality, affordable, culturally competent care for birthing parents and young children in Louisiana is critical.



OBJECTIVES AND STRATEGIES

Geaux Far Louisiana recommends the following objectives and strategies to move Louisiana toward ensuring all families have access to whole person and family-centered comprehensive care.

3.1 Universal Health Care Access and Availability

Families with young children are able to **easily access affordable, high-quality health care** from the moment they are expecting through the formative first years of a child's life by:

3.1.1 Ensuring that all health practitioners (physical, mental, behavioral) accept Medicaid insurance plans to expand access to providers near them for more economically marginalized families.

3.1.2 Increasing Medicaid reimbursement rates so that providers can sustain their workforce and consistently provide more high-quality health care to families.

3.1.3 Incentivizing private insurers to reduce co-payments for all essential maternal and early childhood health care. Reducing financial barriers can improve access and increase health care provider and family collaboration.

3.1.4 Increasing access to doulas and midwives to provide perinatal care by recognizing doulas and midwives as part of the maternal health support team and compensating them through insurance reimbursement plans.

3.1.5 Providing birthing parents with access to appropriate perinatal addiction treatment services and ongoing addiction services as needed. Current efforts that can be expanded include the [Louisiana State Opioid Response Project \(LaSOR\)](#) and the [Tulane University's Project ECHO](#), which shares information about medication assisted treatment.

3.2 Support for Parents Through the Early Years

Parents and caregivers are educated and supported to **meet their own health and developmental needs while supporting their young children**, including culturally sensitive screening, referral, and connection to other services by:

3.2.1 Requiring a perinatal care visit by a mental health professional, doula, or midwife to every new parent or caregiver that includes screenings for postpartum anxiety, depression, and/or trauma prior to departure from the hospital or other birthing setting.

3.2.2 Conducting universal physical, mental, and social-emotional screenings for all birthing parents and children, including screenings for trauma, loss, depression, anxiety, and other stressors.

3.2.3 Providing comprehensive sexuality education in secondary education and community settings to improve sexual and reproductive health, reduce sexually transmitted infections and unintended pregnancy, and begin to prepare the next generation of parents by making early childhood brain development part of the curriculum.

3.2.4 Offering universally available birthing and parenting classes before and after childbirth for each pregnancy. Classes can be held beyond just hospitals and birthing centers, including in community centers, schools, religious centers, and other settings that can provide linguistically and culturally responsive access for parents and caregivers.

3.3 Improved Quality of Health Care and Providers

Health care providers serving birthing parents, young children, and caregivers have the proper **training to provide high-quality, culturally competent, and trauma-informed care** by:

3.3.1 Ensuring a well-trained, culturally responsive support team for birthing parents and families with young children, including doulas, midwives, obstetricians, and pediatricians, to provide family-centered, family-directed care. This effort can build on the [Louisiana Mental Health Perinatal Partnership \(LAMHPP\)](#), existing practices in [Early Head Start](#), and expand the presence of [Perinatal Social Workers](#).

3.3.2 Increasing access to trauma-informed care across health care providers and communities, using resources such as the [National Child Traumatic Stress Network](#) to adequately provide trauma-informed health care to families with young children.

3.3.3 Ensuring clinicians and consultants are trained and engaged in continuing education Infant and Early Childhood Mental Health (IECMH), including the use of trauma-informed models of intervention.



1 in 4 mothers of infants and toddlers report less-than-optimal mental health

Mental health conditions are the most common complication of pregnancy and childbirth, affecting 1 in 5 women and childbearing people.



GOAL 4



4.1 More Affordable, Responsive Child Care Options

4.2 High-Quality Early Learning Programs

4.3 Competitively-Compensated Early Care and Education Workforce

CHILD CARE FOR EVERYBODY, EVERYWHERE

All families have equitable access to affordable, high-quality early care and education that is well-funded and responsive to the needs of families, children, and the educators and providers who make it possible.

During their critical [early years](#), children learn the fundamentals—how to talk, count, regulate their emotions, solve problems, and express their feelings. [Research shows](#) high-quality early care and education sets a child on track for greater academic success, high school completion, and improved health and economic outcomes. Yet, most Louisiana families cannot access affordable, reliable, and high-quality early care and education programs when they need them. [According to the Louisiana Department of Education](#), nearly 85% of Louisiana children under age four who live in households that are considered economically marginalized do not have access to a publicly funded early learning program. The rates are even higher for infants and toddlers. [More than two-thirds of Louisiana's young children have all available parents in the workforce](#)—many of them in jobs with non-traditional hours that require evening and weekend care for their children. Meanwhile, Louisiana's early educators are in a precarious position. [Louisiana's child care teachers make an average of \\$9.77 per hour and lack benefits](#), forcing many to take on multiple jobs and/or depend on public assistance. This environment contributes to turnover rates among child care teachers that [exceed 75%](#) every three years. Yet, [Louisiana spends less than 1% of its state budget on early care and education and more than \\$800 million in one-time federal relief funds that have been dedicated to early care and education will run out in 2024](#). Louisiana's failure to prioritize early care and education shows: [fewer than one in five Louisiana children](#) arrived at kindergarten "ready to succeed". We can turn around these alarming statistics by expanding access to high-quality early care and education, starting with infants and toddlers.

Louisiana's failure to prioritize early care and education shows: fewer than one in five Louisiana children arrived at kindergarten "ready to succeed."



\$9.77/Hr

**Average Wage
of Louisiana's child
care teachers**

OBJECTIVES AND STRATEGIES

Geaux Far Louisiana recommends the following objectives and strategies to ensure all families have access to equitable, affordable, responsive, and high-quality early care and education.

4.1 More Affordable, Responsive Child Care Options

Early care and education programs are affordable and responsive to the needs of families by:

4.1.1 Providing early care and education to more families across more settings through Louisiana Department of Education policies and practices, including increasing the number of publicly funded contracts with early care and education programs; expanding participation of family child care providers in the public system; incentivizing employer-sponsored and non-traditional hours child care; addressing supply shortages in rural and underserved communities; and developing new Type III early learning centers.

4.1.2 Increasing public and private investment in early care and education programs by expanding existing revenue streams and securing new ones at the state and local levels.

4.1.3 Changing public policies to make child care more accessible for more Louisiana families by expanding eligibility for public programs; automatically enrolling families between Medicaid, SNAP, and the Child Care Assistance Program (CCAP); and offering sliding scale fees with phased out child care support as families' incomes increase.

4.2 High-Quality Early Learning Programs

The **quality of Louisiana's early care and education programs continues to improve** to help ensure young children achieve beneficial long-term outcomes by:

4.2.1 Building on current quality improvement initiatives by supporting the use of high-quality curriculum, incorporating additional quality rating tools, funding professional development, supporting children with disabilities, and implementing social-emotional screening tools.

4.2.2 Changing policies to ensure high-quality instruction across all early care and education settings, regardless of their public funding status. This change includes applying quality, health, and safety standards to all settings, not just those that receive public funding; creating a licensing option for family child care providers; and increasing the minimum educational requirements of assistant and lead teachers with associated compensation and training options.

4.2.3 Improving parent engagement and knowledge by helping parents understand quality measures, including how to use the state's quality ratings of early care and education programs.



**1 in 5 Louisiana
children arrive at
kindergarten
ready to succeed**

4.3 Competitively Compensated Early Care and Education Workforce

The **early learning workforce is competitively compensated and there is a strong pipeline** of trained early care and education professionals as a result of:

4.3.1 Achieving competitive compensation and benefits for the early care and education workforce by adopting and funding a standard compensation and benefits ladder for early care and education professionals. In the immediate term, this change also means assisting early learning professionals in accessing public assistance benefits for which they qualify.

4.3.2 Building an intentionally diverse early care and education teacher pipeline that reflects the linguistic and cultural richness of Louisiana by recruiting professionals from other fields, training students in high school, and retraining retired teachers.

4.3.3 Creating intentional professional development opportunities for early learning professionals by linking professional development to continuing education units; increasing the number of required professional development hours annually; offering more training to Type I (faith-based) and Type II (private) centers that do not receive public funding; and creating pipelines from a certificate to a Bachelor's degree.

< 1%

Louisiana spends less than 1% of its state budget on early care and education.

GOAL 5



5.1 Infant and Toddler Feeding Supports

5.2 Workplace Supports

FAMILY-FRIENDLY WORKPLACES

All employers in Louisiana have family-friendly policies that support employees with prioritizing the well-being of their children.

Parents need time to bond with a new child and support their development, especially in their child's first year of life. Infant feeding is of profound importance and [research shows](#) that workplaces that provide a lactation room with dedicated space, breast pumping breaks, and a caregiver-family friendly work culture makes a difference in successful infant feeding for working parents. Too many working Louisiana parents, however, are [left to choose](#) between caring for a newborn child and providing for their family financially. Workplace policies in Louisiana have not evolved to reflect the realities of today's workforce. In 2018, [71% of Louisiana children](#) lived in families where all available parents were in the labor force. Unfortunately, for many Louisiana parents of infants, they don't have the time or financial security to take much time off. When parents who are able to take time off go back to work, they often have to leave their child and don't have support in continuing breastfeeding and other practices that research shows support infant and maternal health. In Louisiana, only [two-thirds of infants](#) have ever been breastfed, well below the national average of 84%. When parents [can stay home to bond with their new child](#) and have family-friendly supports in the workplace, including infant feeding support and child care, the economic security of their families improves, they are more likely to stay engaged and productive in the workforce, and the health of both parent and child improves.

Too many working Louisiana parents are left to choose between caring for a newborn child and providing for their family financially.

Research shows that workplaces that provide a lactation room with dedicated space, breast pumping breaks, and encouragement from colleagues and supervisors to use those pumping breaks makes a difference in successful infant feeding for working parents.

OBJECTIVES AND STRATEGIES

Geaux Far Louisiana recommends the following objectives and strategies to create more family-friendly workplaces across the state.

5.1 Infant and Toddler Feeding Supports

All lactating parents have **access to public-private lactation rooms** by:

5.1.1 Supporting the creation of lactation rooms available and accessible to all working, lactating parents at their workplace. This work would include identifying state policy options to address gaps in the federal Affordable Care Act lactation support requirements, identifying financial incentives for more accessible lactation spaces, and developing a model policy to support lactating parents.

5.1.2 Making lactation rooms available in all public spaces by developing a public awareness campaign, toolkits, and policy incentives to support the creation of public lactation spaces, as well as leveraging public-private partnerships to oversee and maintain these spaces.

5.2 Workplace Supports

All families and caregivers have **workplace supports and flexibility** to bond and support the development of secure attachments with their babies and young children by:

5.2.1 Expanding paid family and medical leave programs in Louisiana so parents can bond with their new babies without worrying about financial constraints. This effort would build upon the work started by the [State's Paid Family and Medical Leave Task Force](#). It should include efforts to identify public financing mechanisms and incentive strategies so businesses can provide paid family leave—including small businesses that are not covered under the federal Family and Medical Leave Act (FMLA)—and the adoption of a model paid leave policy.

5.2.2 Creating, promoting, and incentivizing a model pooled leave policy where employees can contribute their paid time off (PTO) to other employees who need extended paid leave to care for young children.

5.2.3 Requiring employers to provide paid time off, including sick time and other flexible PTO, for parents to be active in their child's



lives, including medical appointments, visiting milk banks, etc. This work will require reviewing current state paid sick time requirements, identifying a model PTO policy that includes paid sick time, and identifying policies that promote employers' expansion of PTO.

5.2.4 Promoting employer-sponsored child care as part of employment benefits packages by researching, identifying, and promoting the adoption of model policies.

5.2.5 Working with businesses to support the expansion of publicly funded child care to all families as critical to maintaining a productive workforce.

Workplace policies in Louisiana have not evolved to reflect the realities of today's workforce.



APPENDIX

GLOSSARY OF KEY TERMS

A

Adverse Childhood Experiences (ACEs): Potentially traumatic events that occur in childhood (0-17 years). For example: experiencing violence, abuse, or neglect; witnessing violence in the home or community.

B

Board of Elementary and Secondary Education (BESE): The state administrative body for all public elementary and secondary education in Louisiana, as well as early care and education.

C

Categorical eligibility: When families or households are eligible for certain public assistance programs based solely on their participation in another public assistance program and not other eligibility criteria.

Competitively compensated: To be paid a wage with access to benefits including paid time off, insurance, retirement, etc., that is competitive with other fields that require similar education and experience.

Continuing education units: Awarded by education and training providers to show successful completion of non-credit programs and courses intended to improve

the knowledge and skills of working adults; typically, professionals in the early childhood workforce must complete a certain number of continuing education units each year.

Culturally competent: The ability to understand and respect values, attitudes, and beliefs that differ across cultures, and to consider and respond appropriately to these differences.

D

Decision-making structures: The bodies (committees, boards, commissions, etc.) that have authority to create and enact policies and programs, and/or determine who can do so. These structures can intentionally include opportunities for community members, including families and providers.

Doula: A doula is a birth professional who provides nonjudgmental, evidence-based education, advocacy, resources, and compassionate care to support a birthing person during pregnancy, labor, birth, and postpartum. While doulas do not provide medical advice, as birth professionals, doulas are collaborative care partners coaching and supporting birthing persons emotionally, physically, mentally, and, at times, spiritually.

E

Employer-sponsored child care: When a business provides help, resources, and financial assistance to their employees to assist in finding and paying for child care.

Early and Periodic Screening Diagnosis and Treatment (EPSDT): The child health component of Medicaid focused on the early detection and treatment of developmental delays. Children under age 21 who are enrolled in Medicaid are entitled to EPSDT benefits through federal requirements, and states must cover a broad array of preventive health and treatment services.

Early Head Start: A federally funded program that serves infants and toddlers under the age of three, and pregnant women. Early Head Start programs provide intensive comprehensive child development and family support services to low-income infants and toddlers and their families, and to pregnant women and their families.

Equity: When each individual/community gets what they need to survive and thrive—like access to opportunity, networks, resources, and supports—based on where individuals/communities are and where they want to go. Equity recognizes that each person has different circumstances and allocates the resources and opportunities needed to reach an equal outcome.

F

Family and Medical Leave Act (FMLA): A federal law that provides eligible employees up to 12 work weeks of unpaid leave per year, and requires group health benefits to be maintained during the leave as if employees continued to work instead of taking leave. Employees are also entitled to return to their same or an equivalent job at the end of their FMLA leave.

Family child care: A form of early childhood education in which the child care provider cares for up to six unrelated children in their own home.

Families/people of color: Families/individuals who identify racially as Black/African American, Indigenous/ Native American, Asian/Asian American, Pacific Islander/ Pacific Islander American, multiracial, and some Latinx/ Latine American, though members of these communities may prefer to view themselves through their cultural or ethnic identities rather than race-related terminology.

Family-friendly workplace: An employer whose policies make it possible for employees to more easily balance family and work, and to fulfill both their family and work obligations.

G

Groundtruthing: A process of gathering feedback on draft plans from those who are impacted by the plans' implementation.

H

High-quality: Meeting an accepted standard of excellence.

Home visiting: A service delivery strategy that matches expectant and/or new parents and caregivers of young children with a designated support person—like a nurse, social worker, or early childhood specialist—who guides them through the early stages of raising a family. Services are voluntary, may include caregiver coaching or connecting families to needed services, and are provided in the family's home or another location of the family's choice.

I

Infant: A child under the age of one.

Infant and Early Childhood Mental Health: Refers to how a child develops socially and emotionally from birth to age five.

Infant feeding: The act of feeding a young child—whether through formula, breastmilk, or a combination—starting at birth through at least the first year of life.

Infant mortality: The death of a young child before their first birthday.

L

Lactation room/spaces: Dedicated spaces in a workplace or other setting where breastfeeding individuals can comfortably, conveniently, and privately express breast milk or nurse their baby when not at home.

M

Maternal morbidity: Any short or long-term health problems that result from being pregnant and/or giving birth.

Maternal mortality: Maternal mortality refers to the death of a woman from complications of pregnancy or childbirth that occur during the pregnancy or within one year after the pregnancy ends.

Medicaid: A joint federal and state program that provides health coverage to more than 72.5 million Americans, including children, pregnant women, parents, seniors, and individuals with disabilities. Medicaid is the single largest source of health coverage in the United States. To participate in Medicaid, federal law requires states to cover certain groups of individuals. Families below certain income thresholds, qualified pregnant women and children, and individuals

receiving Supplemental Security Income (SSI) are examples of mandatory eligibility groups. States have additional options for coverage and may choose to cover other groups, such as individuals receiving home and community-based services and children in foster care who are not otherwise eligible.

Midwife: Midwives are health professionals who are trained to provide collaborative care for women and their overall well-being, including reproductive health, pregnancy, labor, birth, postpartum, and newborn care. As a whole, midwifery support is given with little to no medical intervention, however the type of midwifery training path the midwife has chosen dictates the models of care, didactic instruction, apprenticeship, and access to certain medications. According to Midwives Alliance North America, there are three paths to become a midwife in the United States: Traditional Midwife (TM), Direct-Entry Midwives, and Certified Nurse-Midwives (CNM).

Morbidity: The condition of suffering from a disease or medical condition, or the rate of a disease in a particular population.

Mortality: A term used in medicine for the death rate, or the number of deaths in a certain group of people in a certain period of time.

P

Paid family leave: A benefit in which workers can take time off in order to care for a new child or ill family members.

Paid time off (PTO): Often referred to as PTO, personal time that employees take to spend out of the office (and not working) while still receiving pay for regular wages.

Perinatal: The time period starting before birth—typically around the 20th week of pregnancy—through one year after the birth of a baby. However, sometimes the perinatal period can be defined more broadly to begin as early as before or at the start of pregnancy as it relates to birthing people’s health and mental well-being.

Pooled leave: A general pool of paid time off (PTO) to be used by fellow employees who need extended PTO from work and have exhausted all personal paid leave options available to them. Pooled leave is the result of a leave donation or leave sharing program that allows employees to donate accrued PTO, vacation, or sick leave to a general pool to be used by fellow employees.

Postpartum: The time period starting immediately after the birth of a child, typically lasting through 12 months after the birth of a baby.

Prenatal-to-three: The time period from pregnancy to a child turning three years old.

Professional development: Refers to continuing education and career training after a person has entered the workforce in order to help them develop new skills, stay up to date on current trends, and advance their career.

R

Racism: A set of theories and beliefs often reinforced by policies, laws, and social norms that establishes a hierarchy of races and ethnicities based on misconceptions and stereotypes. Racism is the process by which attitudes, actions, systems, and policies create inequitable opportunities and outcomes for people based on race. Racism is accompanied by the power to discriminate against, oppress, or limit the rights of others.

S

Sexuality education: Education that aims to develop and strengthen the ability of children and young people to make conscious, satisfying, healthy, and respectful choices regarding relationships, sexuality, and emotional and physical health. Sexuality education does not encourage children and young people to have sex.

Social-emotional health: The ability to understand and manage emotions and to form social connections and relationships with the world around us. Social and emotional development are intricately linked. For young children, social development means a child’s ability to establish and maintain close relationships with adults and other children. Emotional development is a child’s ability to express and manage emotions.

Supplemental Nutrition Assistance Program (SNAP): A federal program that provides nutrition benefits that are used to purchase food for individuals and families with incomes below a certain threshold.

T

Temporary Assistance for Needy Families (TANF): A federal program that provides states and territories with flexibility in operating programs designed to help families with children with incomes below a certain threshold achieve economic self-sufficiency. States use TANF dollars to fund monthly cash assistance payments to eligible families with children, as well as a wide range of services to promote family economic stability.

Toddler: A young child between the age of one (12 months) until age three (36 months).

Trauma-informed: An approach that assumes that an individual is more likely than not to have a history of trauma. Trauma results from an incident or series of events that are emotionally disturbing or life-threatening with lasting detrimental effects on an individual's functioning and mental, physical, social, emotional, and/or spiritual well-being. Trauma-informed care recognizes the presence of trauma symptoms and acknowledges the role trauma may play in an individual's life.

Type I early learning center: Early learning programs in Louisiana that only accept private pay tuition and are owned by a religious organization. They cannot accept public funding through the Child Care Assistance Program and do not participate in the state's rating system for early learning programs. Parents cannot access School Readiness Tax Credits for sending their child to a Type I center.

Type II early learning center: Early learning programs in Louisiana that only accept private pay tuition and are not owned by a religious organization. They cannot accept public funding through the Child Care Assistance Program and do not participate in the state's rating system for early learning programs. Parents cannot access School Readiness Tax Credits for sending their child to a Type II center.

Type III early learning center: Early learning programs in Louisiana that can accept Child Care Assistance Program and other types of public funding. They are required to participate in the state's quality rating system for early learning programs.

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