

LOW INCOME AND PREGNANCY

Services for Low-Income Children and Their Families: Comments on Lipman and Boyle, Kitzman, and Knitzer

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Introduction

Low family income constrains access to basic resources, including food, shelter and health care. Economic hardship, in turn, places stress upon relationships among family members.^{1,2} Research has accumulated on the adverse direct and indirect effects of low family income on a range of child outcomes, including cognition and achievement, physical health, and emotional, social and behavioural well-being.³⁻⁵ Experiences of family poverty during early childhood, especially when they are extended and relatively extreme, have the most detrimental effects on children's development.⁶⁻¹⁰ This finding, coupled with growing interest in the developmental significance of early childhood, has focused attention on strategies for intervening to promote low-income children's well-being.^{11,12} Lipman and Boyle, Kitzman, and Knitzer are all recognized experts in this area. Taking various tacks, their work highlights the need to enhance low-income children's development, broadly speaking, with a particular emphasis on the importance of their early

emotional, social and behavioural outcomes for subsequent functioning. Each of the researchers points to promising policy and programmatic strategies, based in part on their exemplary work, to achieve this goal.

Research and Conclusions

Using the widest lens, Lipman and Boyle review the state of knowledge on intervention and prevention strategies designed to ameliorate young children’s emotional, social and behaviour problems. In addition to calling for more rigorous program evaluations, the researchers argue for more assessments of the effectiveness of services in the community contexts in which they are delivered, as well as the development of methodological tools for determining service effectiveness. While concluding that our knowledge is limited, Lipman and Boyle identify a number of barriers — structural and perceived — that prevent the recognition of social and emotional problems in young children and hinder receipt of services. Barriers to service delivery, in particular, include regional disparities in the availability of services, the adequacy and appropriateness (including perceived) of existing services and a range of accessibility problems (e.g. transportation, child care, hours of operation and culture/language). Among Lipman and Boyle’s recommendations to removing these barriers are providing greater resources to serve at-risk populations of children and families, namely those who are low-income. Efforts to raise community awareness about young children’s social and emotional development and problematic behaviours and the potential benefits of services should be undertaken alongside such initiatives.

Knitzer takes a narrower approach by considering programs specifically targeting low-income and at-risk children’s social and emotional problems. After identifying the magnitude of the problem — which is quite large with respect to low-income children’s readiness for school and their prevalence of clinical disorders — she analyzes the evidence. Knitzer, like Lipman and Boyle, concludes that existing evaluations of programs for low-income children targeting emotional, social and behaviour problems are relatively scarce. However, she acknowledges that current interventions, many still underway, have paid increasing attention to low-income children’s behavioural problems either through targeted services in school, home or clinic settings, or through the inclusion of social and emotional outcomes in program evaluations. These interventions, Knitzer speculates, will yield further insights into ameliorating low-income children’s emotional and social problems. She points to programs that work in a coordinated manner with parents as well as caregivers and teachers to promote low-income children’s emotional well-being as a particularly promising avenue. Knitzer also emphasizes the need to

consider the connection between young children’s socio-emotional and academic functioning. Similar to Lipman and Boyle, Knitzer reiterates the need for greater political investment in addressing young children’s social, emotional and behavioural well-being.

Kitzman focuses exclusively on home visiting as a strategy for providing services to families with young children, notably those who are low-income. Drawing on several recent reviews of the home visiting literature, much of it based on her own and her colleagues’ well documented work, she takes a more optimistic view of the efficacy of home visiting programs than Knitzer (albeit still a sober-eyed view). She surmises that home visiting programs are associated with children’s enhanced health and development — although not necessarily in the emotional, social and behavioural domain — and more optimal child-rearing environments. Yet Kitzman acknowledges that findings are mixed, in large part, because of variability across programs in theoretical models, targets of service, service intensity, implementation and quality, to name a few key dimensions that have likely contributed to this inconsistency. She identifies several features of home visiting programs that may lead to more positive outcomes. These characteristics include meeting the needs of both parents and children — these needs must extend beyond providing social support — ensuring programs are delivered to capacity and targeting programs to the most vulnerable families.

Implications for Policy

A common theme to emerge from these three papers is that the state of our knowledge regarding strategies to promote low-income children’s social, emotional and behavioural development is incomplete. Whether we need to develop better program models more generally, as Lipman and Boyle and Knitzer argue, or specifically with respect to home visiting, as Kitzman proposes, the call for more program evaluations is clear. These evaluations should be theory-based, use rigorous methods and include a focus on children’s emotional, social and behaviour outcomes. As well, this work should consider links between children’s emotional and social health and their success in school and their parents’ health and behaviour.

That said, policy-makers must act, even in a state of incomplete knowledge. The authors of these three papers recognize this situation and make several, often tentative, recommendations. Knitzer and Kitzman advocate programs that take a multi-dimensional approach. Meeting the needs of low-income children entails working with those adults whose relationships with children are central to their well-being, specifically parents as well as caregivers and teachers. These

services can be provided in a variety of settings (home, child care/school and clinic) and need to be part of a coordinated effort. As Lipman and Boyle and Knitzer note, the fact that the need for services far outpaces the availability and receipt of services should be of paramount concern to policy-makers. Addressing a number of barriers is straightforward, but increasing capacity entails substantial investment. However, the cost to children, families and society is too high to ignore the importance of promoting low-income children's emotional, social and behavioural well-being.

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