

Let's create a DOMINO EFFECT for Mississippi's workforce.

If the Mississippi legislature takes action on **four policy recommendations**, we can create a domino effect that reduces cross-sector worker shortages, cuts red tape, and strengthens our economy.



RECOMMENDATION 1

MISSISSIPPI NEEDS TO:

Recruit and retain qualified teachers in childcare settings.

WHAT CAN LEGISLATORS DO?

Allocate lottery funds (or other unallocated funds) to a program that provides professional development and wage supplements directly to participating childcare staff.

WHY NOW?

- Low pay is causing childcare teachers to leave this essential field of work for better paying jobs in other sectors.^{1,2} The average childcare worker in Mississippi makes less than the average dishwasher, cashier, or retail worker. They make less than half the average annual income of a school-based preschool teacher.³ This leaves parents - especially parents of children under age 4 - without the childcare they need to remain in the workforce or education programs.
- When parents don't have childcare, our state loses money. **Mississippi loses around \$673 million annually due to gaps in childcare - \$553 million of that stems from worker absences and employee turnover.**⁴

RECOMMENDATION 2

MISSISSIPPI NEEDS TO:

Reduce childcare costs for single parents so they can enter or remain in the workforce.

WHAT CAN LEGISLATORS DO?

Remove the requirement that single parents cooperate with child support enforcement to be eligible for the Child Care Payment Program (CCPP).

WHY NOW?

- When parents can't afford childcare, they often leave the workforce.⁴ **We've heard from Mississippi employers that childcare interruptions have left them short-staffed - especially in industries that hire a lot of single parents, such as restaurants.**⁵
- In Mississippi, the average cost of care for one infant is 11.7% of the median income.⁶ The average cost of care for two children (i.e. an infant and a 4-year-old) takes up 22% of a typical family's household budget.⁶
- CCPP exists to help make childcare more affordable for working parents. We can increase access to CCPP and reduce bureaucratic red tape by removing the child support requirement.

RECOMMENDATION 3

MISSISSIPPI NEEDS TO:

Create long-term cost-savings by reducing health problems and deaths associated with pregnancy.

WHAT CAN LEGISLATORS DO?

Continue Medicaid coverage through 12 months postpartum.

WHY NOW?

- In the short term, extending Medicaid coverage is estimated to cost the state \$7 million per year.⁷ **However, extending coverage can reduce costs and strengthen the workforce in the long run.** For instance, women with untreated pregnancy-associated health conditions are more likely to miss work, be less productive or accurate at work, or become unemployed.⁸
- National evidence suggests that reducing “churn” (cycling on and off coverage) in the Medicaid program lowers monthly per capita spending and reduces administrative overhead.⁹ Providing continuous Medicaid coverage through pregnancy and 12 months after birth can simplify the redetermination process for both administrators and mothers, reduce healthcare costs, and improve health outcomes for women and their children.⁹

RECOMMENDATION 4

MISSISSIPPI NEEDS TO:

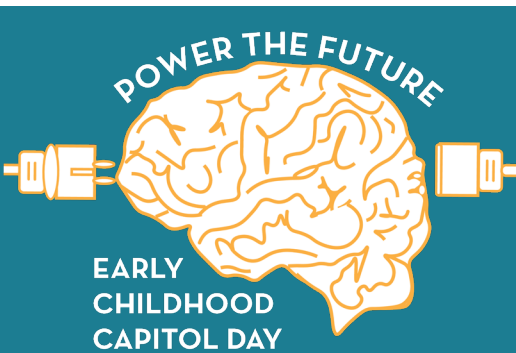
Reduce special education costs and help children thrive through statewide early intervention services.

WHAT CAN LEGISLATORS DO?

Create an Early Intervention task force and pilot project.

WHY NOW?

- Given our state’s challenges, such as poverty, rurality, and the high level of prematurity at birth, Mississippi likely has more children in need per capita than most states. Today, we are only able to serve 1.5% - 3% of children.
- Qualified early intervention professionals are leaving Mississippi because state requirements prevent them from taking jobs here.
- **We know that screening children early can hasten treatment, remediate many developmental issues prior to kindergarten, and reduce the need for special education services once they enter school.** A recent analysis of six states found that early intervention services helped children avoid special education services at age 3, allowing states to avoid between \$7.6 million and \$68.2 million (depending on the state) in expenses related to special education.¹⁰



Over a dozen early childhood organizations in Mississippi support these recommendations.

**Join us for Early Childhood Capitol Day on January 18th to learn more!
2:00 - 4:30: Capitol Rotunda | 5:00 - 6:30: Reception at the Old Capitol Inn.**

This event is hosted by the Mississippi Early Learning Alliance, the Systems Change Lab of the Social Science Research Center at MSU, Excel by 5, and the Graduate Center for the Study of Early Learning.

1. Mississippi State Early Childhood Advisory Council (2022) Mississippi Early Childhood System Asset Map: Strengths and Opportunities Report. Retrieved on October 7, 2022 from mssecac.org.
2. Bassok, D. & Doromal, J. (2022) How Can We Improve Early Childhood Education? Use Public Dollars to Pay Teachers More. *The Brookings Institution*. Retrieved on October 7, 2022 from [brookings.edu](https://www.brookings.edu).
3. MS Department of Employment Security (2022). MS Occupational Employment and Wage Estimates. Retrieved on June 2, 2022 from mdes.ms.gov
4. U.S. Chamber of Commerce Foundation, the MS Economic Council & the MS Children’s Foundation of Mississippi. (2020) Untapped Potential in Mississippi. Published by the U.S. Chamber of Commerce Foundation.
5. Mississippi’s Early Childhood Investment Council (2022). Child care educators are the workforce behind the workforce. *The Daily Journal* [Letter to the Editor]. [djjournal.com/opinion/letters_to_editor/child-care-educators-are-the-workforce-behind-the-workforce/article_ccc9fc36-c646-55b5-9d4d-18d18db931a.html](https://www.dailyjournal.com/opinion/letters_to_editor/child-care-educators-are-the-workforce-behind-the-workforce/article_ccc9fc36-c646-55b5-9d4d-18d18db931a.html)
6. United Way. (2019) United for ALICE: Mississippi State Overview 2019. Retrieved on June 22, 2022 from [unitedforalice.org/state-overview/mississippi](https://www.unitedforalice.org/state-overview/mississippi)
7. Mississippi Legislature. (2022, December 1). Medicaid - Room 216, 1 Dec., 2022; 1:30 P.M. [Video]. YouTube. [youtube.com/watch?v=FDmuDZjUogA&t=14845](https://www.youtube.com/watch?v=FDmuDZjUogA&t=14845)
8. So O’Neil et al (2021). The High Costs of Maternal Morbidity Show Why We Need Greater Investment in Maternal Health. *Commonwealth Fund*. <https://doi.org/10.26099/nz8s-4708>
9. Eckert E. (2020) Preserving the Momentum to Extend Postpartum Medicaid Coverage. *Womens Health Issues*. 2020 Nov-Dec;30(6):401-404. doi: 10.1016/j.whi.2020.07.006. Epub 2020 Sep 9. PMID: 32917466; PMCID: PMC7480528.
10. Prenatal-to-3 Policy Impact Center (2022). Prenatal-to-3 State Policy Roadmap 2022: Early Intervention Services. Retrieved Dec. 14 from pn3policy.org/pn-3-state-policy-roadmap-2022/us/early-intervention.