



IDEAS  
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RESULTS

# Tribal Early Care and Education Programs

## An Overview

A sustained movement to ensure that all children have access to quality childcare must acknowledge that different circumstances required different approaches. This is particularly true when looking to provide high-quality, culturally appropriate early childhood opportunities for American Indian and Alaska Native (AI/AN) children.<sup>a</sup> Too often the needs of tribal communities are an afterthought to Congress and policymakers. Policies that affect

AI/AN children and families need to be designed with them at the center.

When discussing tribal communities, it is important to note the historical and contemporary injustices facing the AI/AN people of North America who have endured colonization, genocide, and disease as well as forced relocation and removal by the U.S. government.

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**EARLY CHILDHOOD  
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<sup>a</sup> AI/AN refers to the original inhabitants of a place. In this context, AI/AN refers to the AI/AN peoples of the United States.

Despite these traumas, AI/AN people have survived and kept their culture, traditions, and languages intact. To this day, tribal communities continue to resist structural barriers and embody courage, strength, hope, and resiliency.

Increased funding and support of tribal early childhood programs can help AI/AN children and families to heal and thrive, in resistance to historical trauma and adversity. This brief summarizes available data about AI/AN children and families and provides an overview of current federal programs supporting these communities.

## OVERVIEW OF TRIBAL YOUTH AND FAMILIES

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Nationwide, there are 574 federally recognized tribal nations and Alaska native villages and 326 federal Indian reservations.<sup>1</sup> Across these communities, there are more than 165,000 AI/AN children under the age of 4 years old. As Table 1 illustrates, the demographic, social, health, and health care disparities for Native populations are startling when compared to the general population.

AI/AN communities face

systemic barriers to sustained employment, physical health care, mental health supports, and housing. As a result, persistent, generational poverty has created conditions that challenge children's ability to thrive, beginning at birth.

Substance abuse is a persistent concern for AI/AN communities.<sup>2</sup> Native infants face the highest rates of neonatal abstinence syndrome, and alcohol use during pregnancy is one of the leading causes of AI/AN birth complications.<sup>3</sup> Health and safety disparities persist beyond infancy, as AI/AN youth experience double the injury-related death rate of their geographic peers.<sup>4</sup>

AI/AN children have the highest rate of child abuse and neglect, and are overrepresented in the foster care system at a rate 2.7 times greater than the general population.<sup>5</sup> Child neglect also appears in the form of poor childhood health and nutrition. For example, AI/AN children from ages three to five have the highest untreated tooth decay, more than four times higher than white children.<sup>6</sup> AI/AN children are in households that are nearly twice as food insecure than other households.<sup>7</sup>

**The AI/AN people of North America continually advocate for greater resources for their children and families—a reflection of their strong cultural belief systems rooted in family, community, and healing.**

**Table 1. Data Summary of AI/AN Youth and Families**

<b>Metric</b>	<b>AI/AN Population</b>	<b>National</b>
Poverty rate for children from birth to five, 2017 <sup>8</sup>	36.2%	19.6%
Extreme poverty rate for youth under the age of 18, 2017 <sup>9</sup>	16.4%	8.0%
Labor force participation rate, 2018 <sup>10</sup>	60%	63%
Unemployment rate, 2018 <sup>11</sup>	6.6%	3.9%
Infant mortality rate, 2017 <sup>12</sup>	9.2 deaths per 1,000 live births	5.8 deaths per 1,000 live births
Sudden infant death syndrome, 2017 <sup>13</sup>	76.8 deaths per 100,000 live births	35.3 deaths per 100,000 live births
Neonatal abstinence syndrome, 2016 <sup>14</sup>	15.9 per 1,000 live births	6.7 per 1,000 live births
Opioid death rate among women, 2010 <sup>15</sup>	7.3%	4.2%
Postpartum visits among mothers, 2009-2010 <sup>16</sup>	81.8%	90%
Child abuse and neglect, 2018 <sup>17</sup>	15.2 per 1,000 children	9.2 per 1,000 children
Food insecurity in households with children, 2008 <sup>18</sup>	28%	16%
Children without health insurance, 2017 <sup>19</sup>	14.1%	5%
High school graduation rate, 2018 <sup>20</sup>	74%	85%
College enrollment rate, 2017 <sup>21</sup>	20%	40%
Bachelor's degree completion rate within six years, 2014 <sup>22</sup>	41%	60%
Teenage birth rate, 2017 <sup>23</sup>	3.3%	1.9%

The early years and early grades play a critical role in bridging health, educational, and economic disparities for AI/AN children.

The Head Start program has been successful in improving school readiness for AI/AN children. Over the course of the 2015-2016 school year, AI/AN children who attended Head Start programs operated by federally recognized tribes showed progress in most areas of cognitive assessment and improvements in their social-emotional skills.<sup>24</sup> However, more investments can be made to meet AI/AN community needs for quality early childhood supports—for example, the Child and Adult Care Food Program, Supplemental Nutrition Assistance Program, and child abuse prevention program all have the potential to bridge this gap.

The AI/AN Head Start Family and Child Experiences Survey found that children in AI/AN Head Start programs experienced gains in language, literacy, and math skills across the 2015-2016 program year. However, they did not show any gains in early writing skills. Children also showed improvements in social skills, approaches to learning skills, and executive functioning.<sup>25</sup>

AI/AN children are one of the most at-risk groups for negative early learning experiences. The Children's Equity Project and Bipartisan Policy Center's Start with Equity report found that AI/AN children are disproportionately excluded and mistreated in early childhood environments.<sup>26</sup> Of note, AI/AN children are also disproportionately the subjects of restraint and seclusion.<sup>27</sup> For example, in California, AI/AN boys are 2.5 times more likely—and AI/AN girls are 3.7 times more likely—to be suspended from an early childhood program.<sup>28</sup>

The early life experiences of AI/AN children shape later life outcomes. AI/AN youth have the lowest education attainment levels of any racial or ethnic group in the country. Native young adults also face difficulties in mental health and teen pregnancy. Suicide is the second leading cause of death among AI/AN young adults, and the birth rate for AI/AN teens is the highest teen birth rate for all races and ethnicities.<sup>29</sup>

## FEDERAL OPPORTUNITIES TO SUPPORTING AI/AN POPULATIONS

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These data demonstrate AI/AN youth may face varying barriers to meeting their full potential. While existing federal programs—including the Child Care and Development Block Grant, Tribal Head Start and Early Head Start, and the Tribal Maternal, Infant, and Early Childhood Home Visiting program—provide support to communities, they only reach a small number of children. The

Administration of Children and Families reports that only 21% of AI/AN children attended a nursery or preschool program during a three-month period.<sup>30</sup> Further, only an estimated 4,177 AI/AN families received home visiting services in 2019, out of 339,400 AI/AN eligible families.<sup>31</sup>

To provide context, all 50 states and the District of Columbia received MIEHCV grants, yet only 23 of 574 federally recognized AI/AN tribes and villages received MIEHCV grants due to the limited funding.<sup>32</sup> Evaluation data suggest that the Tribal MIECHV program has positive effects on the families receiving services, such as improved

While Indigenous children outside of reservations are eligible for non-tribal federal early care and education programs, these programs do not target Indigenous children specifically and may overlook this population.

maternal and newborn health and an increase in family economic self-sufficiency.<sup>33</sup> This means that the lack of adequate funding for tribal communities causes families to miss out on much needed supports. However, the true extent of the unmet need for early childhood care is unknown. Many of the data about AI/AN children are outdated and do not reflect the realities of community today. To begin to estimate need, the Administration of Children and Families launched the American Indian and Alaska Native Early Childhood Needs Assessment Design Project in 2016.<sup>34</sup>

Existing federal programs are designed and funded to reflect the needs of states and localities, which may overlook tribal communities. Unlike funding allocations for states which are often based on population, funding levels for tribal organizations are often a set percentage of the total allocation, regardless of the population or needs of the community. Exceptions include the Individuals with Disabilities Education Act Part B Grants to States and IDEA Part C Early Intervention, which use tribal count data to determine fund amounts. However, the tribal count data requirement poses

**found Tribal Home Visiting grantees demonstrated improvements in the following areas:**

- 85% in child injuries, abuse, neglect, or emergency room visits
- 77% in crime or domestic violence
- 77% in family economic self-sufficiency
- 62% in maternal and newborn health
- 59% in school readiness and achievement
- 69% in coordination and referrals

a cost burden to potential grantees, which cannot be offset by previous grant awards.<sup>36</sup> Of note, some federal programs exclude tribes and tribal organizations entirely, such as the competitive Preschool Development Grant and IDEA Part B Section 619, Preschool Grants for Children with Disabilities.<sup>b</sup>

Another limitation of tribal early care and education programs is their focus on AI/AN children who live on reservations or other trust lands, rather than all AI/AN children. For example, the tribal count data used to calculate funding only includes children on reservation land. However, 78% of the AI/AN population live outside of tribal statistical areas, while 22% live on reservations or other public trust lands.<sup>37</sup>

In addition, some tribal early education programs are administered by the Bureau of Indian Education, which makes these programs only accessible to children enrolled in BIE-funded schools. Therefore, AI/AN children living outside of reservations are potentially not served by either tribal or non-tribal early childhood programs.

As a result, the existing federal early care and education landscape is positioned to underserve AI/AN communities. Federal early care and education programs must improve so that services for AI/AN families are comparable to non-native society. The United States has trust obligations to ensure the survival and welfare of AI/AN peoples.<sup>38</sup> Early childhood is a foundational stage for AI/AN youth, just as it is for all children, and well-funded supports during early childhood can improve the life-long educational, health, and economic outcomes of AI/AN communities.

Below is a summary of the federal programs which serve AI/AN children in order to provide an overview of the current tribal early care and education landscape.

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b Since 2011, the Preschool Grants for Children with Disabilities (IDEA Part B Section 619) program no longer provides funds to the Bureau of Indian Education. In fiscal year 2020, states were allocated \$394 million to support special education services for children with disabilities from age three to five, whereas tribes received no funds.

# Appendix: Key Federal Programs Supporting Tribal Children, Early Care, and Education

## U.S. Department of Health and Human Services

### Administration for Native Americans

The Administration for Native Americans, or ANA, is an agency that distributes discretionary funding to tribes to support community-based projects in addition to training and technical assistance. Grant funds from ANA fund tribes in their pursuit of a variety of projects related to social and economic development, cultural preservation, and environmental preservation. In FY20, the agency had an overall appropriation of \$60,000,000.

### Child Care and Development Fund

The Child Care and Development Fund provides child care assistance to American Indian and Alaska Native tribes under the CCDBG Act of 2014. The Department of Health and Human Services must allocate tribal grantees no less than 2% of discretionary CCDF funding and up to 2% of mandatory CCDF

funding. In fiscal year 2020, tribes were originally allocated \$58.3 million in mandatory funding, with a 2% set-aside, and \$335 million in discretionary funding, which made up 5.75% of total discretionary funds. The FY2020 allocation followed trends from FY2018 and FY2019, which saw an overall increase in CCDBG appropriations and an additional tribal set-aside. Under the CARES Act, all 265 tribal grantees received a total supplemental CCDBG allocation of \$96.3 million.<sup>39</sup>

Tribal children have dual eligibility for state or tribal programs, meaning they can be served using either state or tribal CCDF funds. However, tribal CCDF funds are only available for tribal children who live on or near the reservation. Estimates for the number of children served under the tribal CCDF program are not readily available. In FY2018, state CCDF programs served around 13,200 AI/AN children from birth to age 13, which represents 1% of all children served by CCDF.<sup>40</sup>

Tribal grantees were required to submit FY2020-2022 CCDF Plans as their applications for funding. As of February 2020, 37 tribes have their plans approved and 184 tribes have approval with conditions, pending corrective action.<sup>41</sup> In some cases, Tribal Lead Agencies must

**Table 2. CCDF Funding Allocations for Tribal Grantees**

Funding Stream	FY2016	FY2017	FY2018	FY2019	FY2020
<b>CCDBG (Discretionary)</b>	\$76 million	\$78.5 million	\$300.5 million	\$302 million	\$335 million
<b>CCDF Mandatory</b>	\$58.3 million	\$58.3 million	\$58.3 million	\$58.3 million	\$58.3 million
<b>CARES</b>	-	-	-	-	\$96.3 million
<b>CCDF Total</b>	\$134 million	\$137 million	\$359 million	\$360 million	\$489.6 million

**Table 3. Summary of CCDF Requirements by Tribal Allocation**

Large allocations	Medium allocations	Small allocations
<ul style="list-style-type: none"> <li>• Subject to the majority of CCDF requirements</li> <li>• Exempt from some requirements, including, but not limited to: Consumer education website, the requirement to have licensing for child care services, and the training and professional development framework.</li> <li>• Subject to the monitoring requirements, but allowed to propose and alternative monitoring methodology in their plans.</li> <li>• Subject to the background check requirements, but allowed to propose and alternative background check approach in their plans.</li> </ul>	<ul style="list-style-type: none"> <li>• Allowed same exemptions as the large allocation category</li> <li>• Exempt from operating a certificate program</li> </ul>	<ul style="list-style-type: none"> <li>• Exempt from most CCDF requirements, including those exemptions for large and medium allocations categories.</li> <li>• Only subject to:               <ul style="list-style-type: none"> <li>◦ Health and safety requirements</li> <li>◦ Monitoring requirements</li> <li>◦ Background check requirements</li> <li>◦ Quality spending requirements (except the infant and toddler spending requirements)</li> <li>◦ Eligibility definitions of Indian children and Indian reservation/service area</li> <li>◦ The 15% admin cap</li> <li>◦ Fiscal, audit, and reporting requirements</li> </ul> </li> <li>• Submit an abbreviated plan</li> </ul>

work with states to respond to corrective action, which highlights the importance of state-tribal coordination.

Distinct from states, HHS provides flexibility toward tribes by using a tiered compliance system, where tribes must meet different requirements depending on the size of their CCDF allocation. According to the CCDF rules, tribes that receive under \$250,000 are considered small allocation; those that receive between \$250,000 and \$1 million are medium allocation; and tribes receiving more than \$1 million are large allocation tribes. Small and medium allocation tribes are exempt from

establishing a certificate program, and all tribal grantees are exempt from the consumer education website, market rate survey, and increased access for high poverty requirements.

Consistent with previous legislation, the 2014 reauthorization allows Tribal Lead Agencies to obligate CCDF funds toward child care facility construction or renovation with explicit approval. HHS administers the National Center on Tribal Early Childhood Development to provide tribal grantees with technical assistance.

*Head Start—including Early Head Start and Partnerships*



Head Start is an early childhood development program which provides educational, health, nutritional, and social services for children in families below the poverty level. Tribal Head Start programs administered by federally recognized tribes offer traditional language and cultural practices to help preserve the heritage of participating families. However, Head Start leaders cite barriers in finding qualified staff who are fluent in native languages and cultural practices.

Today, there are 150 Head Start and 58 Early Head Start programs administered by federally recognized tribes. These programs operate in 26 states, and in some cases, their service areas cross state lines. These programs serve around 25,000 children and 500 pregnant women.<sup>42</sup> In total, there are around 44,000 children of AI/AN heritage served in both tribal operated and non-tribal programs.<sup>43</sup> In FY2019, about \$320 million was awarded to AI/AN tribal governments for Head Start and Early Head Start.<sup>44</sup> In FY2020, an additional \$4 million

was allocated to re-establish the Tribal Colleges and Universities Head Start Partnership Program, which promotes early education careers and collaboration with Head Start personnel.<sup>45</sup> Under the CARES Act, \$750 million was allocated for Head Start program nationally, with a portion of relief funds likely to be dedicated to AI/AN programs.<sup>46</sup>

In order to improve Head Start and Early Head Start services for AI/AN families, the Office of Head Start convenes tribal consultation sessions with local leaders and publishes summary reports on their website. During these sessions, tribal leaders highlighted resource challenges with the Head Start and Early Head Start programs.<sup>47</sup> Often, tribal leaders requested more funds for facility renovation, sanitation infrastructure, and transportation. In addition, tribal leaders called for waivers on cultural qualifications for staff, as it was difficult to recruit and retain such staff when additional financial supports were also not made available.

*Temporary Assistance for Needy Families*



Temporary Assistance for Needy Families (TANF) is a block grant program designed to help needy families care for their children and secure stable jobs. Like states, federally recognized tribes can apply for funding to administer and operate their own TANF programs. To apply, tribes must determine their definition of “needy” and designate program activities in their three-year TANF plans to HHS. States are no longer responsible for assistance to needy families served by tribal TANF programs.

As of May 2019, there are 74 approved tribal TANF programs serving 284 federally recognized tribes and Alaska Native villages as well as non-reservation AI/AN families living in 130 counties. The total annual amount of tribal TANF funds is around \$200 million.<sup>48</sup> The Consolidated Appropriations Act, 2021 (P.L. 116-260 ) extends TANF funding through the end of FY 2021 (September 30, 2021). Further, HHS has granted some flexibility with tribal TANF administration considering the COVID-19 pandemic.

*Maternal, Infant, and Early Childhood Home Visiting (MIEHCV)*

MIEHCV provides grants to states,

territories, and tribes in order to support women and families with children from birth to five who live in at-risk communities. MIEHCV is authorized by Title V of the Social Security Act and is administered by the Health Resources and Services Administration in partnership with the Administration for Children and Families. Home visiting promotes positive parenting, improves maternal and child health, and prevents child maltreatment and neglect.

In 2018, the MIECHV Program was allocated \$400 million per year through FY2022. The program included a 3% set-aside for tribal communities, which reserved around \$12 million per year for tribes. only 23 of the 574 federally recognized.<sup>49</sup> From 2012 to 2018, a total of around 3,750 AI/AN children and parents were served by the Tribal Home Visiting program.<sup>50</sup>

**U.S. Department of Education**

For FY2020, the tribal set-aside for all elementary and secondary programs resulted in a total of \$268 million going to the Secretary of the Interior and the Bureau of Indian Education.<sup>51</sup>



*Individuals with Disabilities Education Act (IDEA) Grants to States Program (Part B)*

IDEA Grants to States (Part B) funds tribes to provide special education services for students from age three to 21. In FY2020, IDEA Part B allocated around \$99 million to the Bureau of Indian Education.<sup>52</sup> The amounts allocated reflect the need for assistance for the education of children with disabilities on reservations aged five to 21, inclusive, enrolled in elementary schools and secondary schools for Indian children operated or funded by the Secretary of the Interior.<sup>53</sup>

*Early Intervention for Infants and Toddlers with Disabilities (IDEA Part C)*

IDEA Infants and Toddlers with Disabilities (Part C) funds tribes in order to provide early intervention services for infants and toddlers with disabilities, ages birth through 2 years old, and their families. In FY2020, tribes were allocated around \$104.9 million out of a total of \$477 million allocated to all states and territories.<sup>54</sup> The Department of the Interior distributes grants to individual tribes and consortiums based on tribal count data submitted to the Bureau of Indian Education. The count includes AI/AN infants and toddlers from birth to age two who reside on a reservation, receive early intervention services from the tribe, and have been identified or referred to receive services.<sup>55</sup> The total Part C allocation for tribes will be distributed based on the submitted child count divided by the total number of children served by all

tribes and consortia.<sup>56</sup> IDEA Part C disproportionately underserves AI/AN children. In 2017, AI/AN infants and toddlers were slightly less likely to be served under Part C, while white children were more likely to be served than all other groups combined.<sup>57</sup>

*Comprehensive Literacy State Development<sup>c</sup>*

The Comprehensive Literacy State Development program is a competitive discretionary grant to advance the literacy skills of children from birth to 12 years old, including limited-English-proficient students and students with disabilities. Grantees must partner with an early childhood education provider and coordinate the program from elementary to high school. Most recently, in FY2020, a total of only \$190 million was allocated for the program, of which 0.05% must be reserved for the Bureau of Indian Education.<sup>58</sup>

*Promise Neighborhoods*

The Promise Neighborhood program provides competitive five-year grants for low-resource communities to improve educational and developmental outcomes for youth from birth until college. Eligible organizations for the program include Indian tribes and tribal organizations. Since its origination in 2010, the program has awarded six grants to tribal communities out of the total 73 grantees.<sup>59</sup> The competition has a specific tribal funding slate in order to ensure similar applicants are

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c The Comprehensive Literacy State Development program was [previously named](#) the Striving Readers Comprehensive Literacy program, prior to the passage of the Every Student Succeeds Act.

placed in the same application pool.

In FY2020, \$25 million was appropriated for the Promise Neighborhood program, which was a fraction of the previous \$78 million in FY2019. This low funding level reflects President Donald Trump's FY2020 budget priorities, which proposed cutting the program.<sup>60</sup>

## U.S. Department of Interior

### *Family and Child Education*

The Family and Child Education program (FACE) is a family literacy initiative that operates in 49 out of 187 Bureau of Indian Education-funded schools.<sup>61</sup> FACE provides literacy services at home and local centers in order to support families with children under the age of five establish the skills necessary to start school. For FY2020, the Bureau of Indian Education requested \$20.8 million for the FACE program. In the previous year, \$18.8 million was appropriated and served around 2,200 children and 2,000 parents.<sup>62</sup>

### *Child Welfare*

The Indian Child Welfare Act protects the safety of American Indian and Alaska Native children by providing guidance on child abuse, neglect, and adoption cases. The goal of ICWA is to promote the stability of Native families and establish standards for the removal and placement of Native children into homes which share their culture. For FY2020, the Department of the Interior requested \$13.3 million for the Indian Child Welfare program, which was \$5 million less than the previous fiscal year.<sup>63</sup>

In December 2019, Congress

approved new funding for Native children in the welfare system under the Family First Transition Act. The new funds reserve at least 3% of the appropriated \$500 million for Indian tribes and tribal organizations, who have a plan approved under Title IV-B, Subpart 1 of the Social Security Act.<sup>64</sup> Individual tribal disbursements will be based off each tribe's share of the total tribal child population.



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