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**from
beating
the
odds to
changing
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odds**

recommendations for journalists

covering early childhood



**From beating the odds
to changing the odds**

Recommendations for journalists
covering early childhood

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*“There can
be no keener
revelation of
a society’s
soul than
the way in
which it
treats its
children.”*

Nelson Mandela¹





introduction:

The connection between journalism and early childhood

Early childhood is a critical developmental period because it influences the adults we become. Beyond glib affirmations that “children are our future,” there is real science behind the notion that young children’s experiences are shaped in fundamental ways by policymakers’ decisions. From funding for preschool and nutrition to transformative laws like paid family leave that support children and families, policy has a direct impact on early childhood experiences, the adult health and social outcomes those children will experience, and, ultimately, the well-being of our society as a whole. The decisions a society makes today about how to support early childhood development will influence the future health, educational, and economic prospects of entire populations. Robust, well-reported news coverage can inform and improve the decisions we make together, as a society, about early childhood.

News coverage is an important part of the public conversation about early childhood. The media can elevate issues, influence how the public and policymakers perceive them, and set the stage for a policy response.²⁻⁵ Journalists, editors, and op-ed contributors make decisions on a daily basis, consciously or unconsciously, about how to frame issues like early childhood. Aspects of framing include the language used, perspectives included or left out, sources quoted, information highlighted, and the potential solutions that are reported and considered.

Early childhood development — and the crucial role of journalism in covering it — is important not simply because of warm, fuzzy feelings for little kids, but because of growing insights, from multiple bodies of science, showing that what happens from pre-conception into early childhood has a profound impact on health outcomes into and throughout adulthood. This holds true whether researchers examine the lifelong impacts of childhood trauma,⁶ the multigenerational effects of neighborhood conditions,⁷ or the societal benefits of early education.⁸ The story of early childhood is complicated because it happens across time, effects interact, and findings come from different but complementary bodies of science. How, then, can journalists incorporate complex scientific findings into news stories about children that are typically focused on immediate events?

To begin to answer that question, we first examined existing news coverage on early childhood, analyzing 127 news articles from 15 of the nation's major newspapers. Then, we talked with journalists whose stories stood out as exemplars of comprehensive, nuanced reporting on the issue; we were particularly interested in those news stories that linked findings from across scientific disciplines. Finally, we convened a small group of experienced journalists to discuss the challenges of reporting comprehensively on early childhood and to generate recommendations for how to do better. We explored how reporting could reflect the full continuum of human development and opportunities to improve conditions in which children are born, grow, and develop.

In this report, we present what we've learned. We first articulate a public health framework for understanding the emerging science on early childhood, and we then assess what that means for news coverage. Based on our discussions with journalists, we recommend how individual reporters and the field of journalism can achieve more thorough reporting on early childhood. In the last section of this resource, we provide concrete examples by applying these recommendations to four stories from our news analysis to demonstrate how new questions might help expand reporting on early childhood. We conclude with an appendix annotating key research papers, organizations, and other resources.

We offer our recommendations against the backdrop of a challenging time for journalism. Newsrooms are under-resourced, as many grapple with how to sustain revenues in the digital age. Even so, as a society, we rely on journalists to find the stories that help us navigate and make decisions about our world. The stakes are high, and we believe solid journalism will make a difference in the health of future generations.

The recommendations we present are a starting point. We welcome your thoughts, further suggestions, and ongoing dialogue about how to improve reporting on early childhood.*

* Contact us at info@bmsg.org.

foundation:

A public health framework for understanding early childhood

Our thinking about early childhood is informed by the public health perspective, which identifies how public policy and systems design can advance the health of populations. Public health approaches seek to improve conditions so that everyone — no matter where they are born or what color their skin — has an equitable chance to maintain health and avoid disease and injury. For example, public health approaches might include better design of how communities access healthful, nutritious, affordable foods; changing how we develop and fund safe and secure housing; or improving the ways we create and support businesses so that economic opportunity reaches everyone. Public health refers to the idea that everyone deserves the opportunity to lead a healthy life as “health equity.”⁹ The emerging science makes it clear that to achieve health equity, we must address the adverse conditions of early childhood that disadvantage entire populations. In other words, children’s health should not be a consequence of the zip code where they happen to be born.*

A growing body of research tells us that environments and exposures experienced in early life impact health and social outcomes across the entire lifespan:

Early childhood education (ECE) addresses the interval from birth to age five.

ECE encompasses a wealth of influences including the importance of high-quality child care, preschool, kindergarten, and early elementary school, as well as environmental and experiential impacts on brain development.⁸

* Increasingly, research shows that where people live affects their life expectancy and health. A population-based analysis of life expectancy across United States counties, for example, found that geographic disparities in life expectancy in our nation are large and growing and can be explained in large part by differences in race and ethnicity, as well as socioeconomic factors, such as income, education, and employment status. See: Dwyer-Lindgren et al. (2017). Inequalities in life expectancy among US counties, 1980 to 2014: temporal trends and key drivers. *JAMA Internal Medicine*, 177(7), 1003-1011.

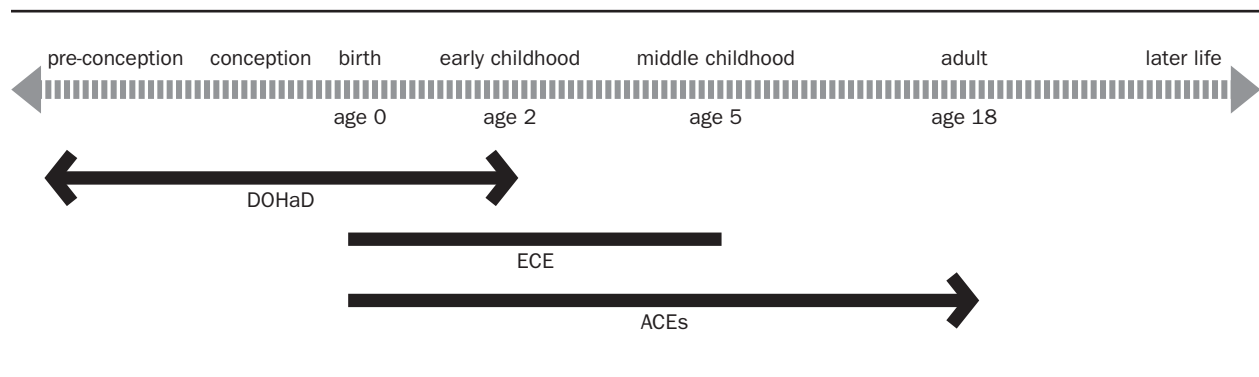
Adverse childhood experiences (ACEs) research explains the effects of psychological and/or physical trauma — including “toxic stress” — experienced during childhood on cognitive functioning and overall health. ACEs science emphasizes trauma-informed treatment to help mitigate the effects of early adverse experiences, along with strategies to build resilience in children, families, and communities.⁶

Developmental origins of health and disease (DOHaD) explains how environmental influences — including nutrition, high levels of sustained social stress, and exposure to toxicants — can trigger underlying genetic susceptibilities, leading to the development of chronic diseases such as obesity and heart disease, some cancers, and cognitive problems. Such processes can begin as early as pre-conception, when the health of the future mother’s reproductive system is established, and continue after childbirth up until about the age of two. These developmental effects can even be carried forward across generations.⁷

Together, these three bodies of knowledge have expanded our understanding of a continuum of overlapping effects on children that influence health outcomes across society and across generations (Figure 1). From a public health perspective, it makes sense to consider early childhood research from these three arenas of study in relation to one another and within the larger context of the lifespan. As such, the most comprehensive stories about early childhood could draw upon each of these overlapping and mutually informing bodies of research.

Each realm of science independently offers direction for improving the lives of children and the adults they become: ACEs underscores the benefits of introducing trauma-informed systems; ECE suggests how high quality child care and early education can improve a variety of outcomes; and DOHaD points to eliminating environmental toxins, mitigating social stress, and improving nutrition to benefit entire communities across generations. Taken together, the three bodies of research suggest that sectors like education, health care, and business impact childhood development. The three disciplines also point to some common risks, such as poverty.

Figure 1: Continuum of lifespan



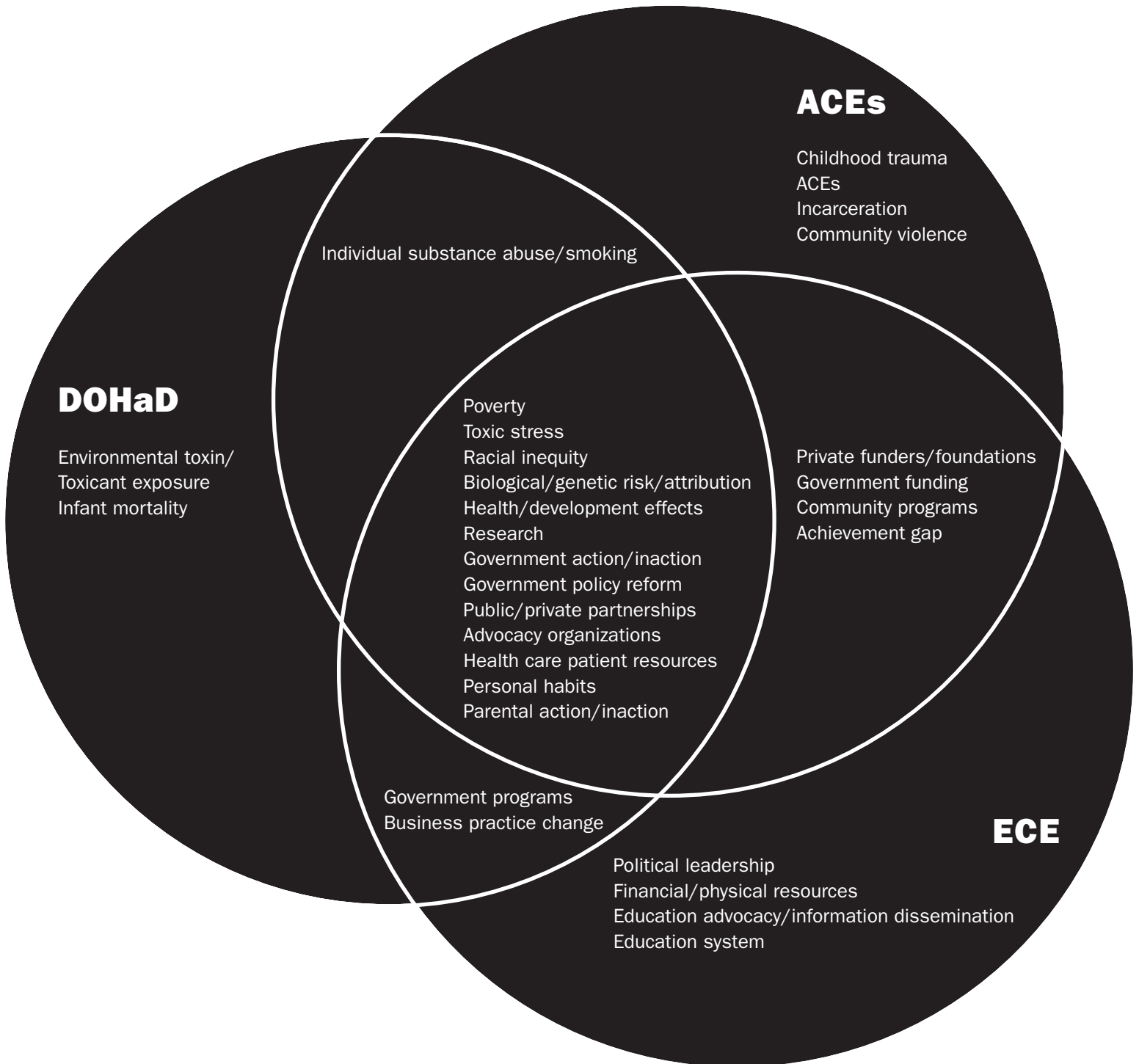
implications:

What is the current news story about early childhood?

We were curious about whether this more comprehensive story was being told in current reporting on early childhood. We were particularly interested in how it was being reported on in the context of sectors such as education and business. With the public health framework in mind, we conducted a content analysis of 127 news stories published in 15 high-circulation and geographically representative newspapers around the country, each indexed by LexisNexis as including mention of “education” and/or “business.” Most stories (76%) focused on only one of these three bodies of research (primarily early childhood education), roughly a quarter (24%) focused on two, and only two stories addressed all three. Thus, while early childhood is an expansive story, we found that it tended to be reported narrowly.

Bridging the science from the three bodies of knowledge will help reporters tell more interesting and comprehensive stories about early childhood. For example, stories about nutrition that draw from DOHaD research could also lead to questions about potential effects on future academic performance and the historical contexts that give rise to discrimination, uneven community resources, and other forms of enduring trauma. Similarly, the effects of sustained social stress on child development appear in all three bodies of science, thus reinforcing the severity of this pervasive risk factor. Reporting on only one perspective on early childhood in isolation misses the opportunity to reveal intersecting social implications, whereas reporting on the interconnections among the three perspectives helps explain that the societal conditions that give rise to risk in one are the same as those that give rise to risk in all. These include poverty, social stress, lack of resources, inadequate opportunity, racism, unsafe or unhealthful conditions, and exposure to toxins. As such, journalists can highlight potential synergy among solutions.

Points of story intersection in reporting on early childhood



Example: The education gap story

The intersection between education and poverty was a common theme in the stories we found about early childhood. But when poverty appears in stories about early childhood, it is as an obstacle rather than a target for social change. For example, many of the stories in our study mentioned the educational achievement gap, but this coverage omitted some important complexities. In general, stories presented the achievement gap as a symptom of children and families living in poverty: “[P]overty too often strangles academic achievement.”¹⁰ Almost universally, the problems of poverty and the achievement gap were presented in a unidirectional relationship: Poverty leads to disparities in academic achievement. For example: “We have to think about how to give these kids a meaningful education. ... We have to give them quality teachers, small class sizes, up-to-date equipment. But in addition, if we’re serious, we have to do things that overcome the damages of poverty ...”¹¹ These are all important and necessary suggestions, but they represent only half the story.

Rarely did a story complete the circle by describing the achievement gap as a perpetuating force in poverty. One story that did make this connection noted: “American students from prosperous backgrounds scored on average 110 points higher on reading tests than disadvantaged students. ... It is perhaps the main reason income inequality in the United States is passed down the generations at a much higher rate than in most advanced nations.”¹²

Of course, not every news story can report every cause of problems in early childhood. But the more that stories acknowledge connections among factors in the environment that effect early childhood health and development, the more complete and expansive the story will be. And, the potential to tell this more comprehensive story extends beyond the circular relationship between poverty and the achievement gap: Presenting the effects of this relationship within the life course and informing the story with the risks as identified by these three bodies of science could also give a more explicit picture of the outcomes at stake. The science on ECE, ACEs, and DOHaD can help journalists tell the intergenerational story of childhood development at the same time as they report on children in our current moment.

We know this is possible because we saw evidence of it in our news analysis. An example of a more integrative approach was from a story in which one advocate arguing in support for early childhood said, “Toxic stress is really bad in young children, because it can impact and harm the developing brain architecture.’... Those circumstances, and the people most at risk of being harmed by them, lead eventually to lack of job readiness as a result of inadequate education, and reliance on social services ...”¹³ News consumers who see the sciences linked this way, in stories about real communities, will be better equipped to understand the interrelation of systems and, more important, what needs to be changed in those systems if families are to be healthy and thrive. By connecting immediate risks to outcomes and effects across the lifespan, news coverage can help others see what is at stake and, more specifically, point to a more expansive range of solutions available to society to improve conditions for everyone. Unfortunately, few stories we found illustrated early childhood comprehensively across the lifespan.

Without this more comprehensive approach, readers are left with a narrative in which education is presented as a type of bootstrap for kids to pull themselves up out of poverty: “*Studies show students grow up more likely to read and do math at grade level, graduate high school, hold a job, form more stable families of their own ...*”¹⁴

Less emphasized (9% of stories) was how to address the structural or root causes of poverty so that the proposed educational interventions are more likely to succeed and ongoing risk is reduced. What remains is the implication that the solution to the poverty-achievement gap cycle is for individuals — and children, in particular — to rise up and overcome the conditions that surround them. In other words, ***the overarching story is about children beating the odds, rather than society changing the odds for children.***

“Beating the odds” aligns with established narratives in the U.S. about rugged individualism and personal initiative.¹⁵ The problem here, of course, is that we are talking about childhood, and early childhood at that. We can certainly encourage children to do well in school, but we cannot expect that they pull themselves out of poverty. That is up to the adults who are in charge of the policies that can improve conditions for whole populations, no matter their race, location, or class.

A story about changing the odds could include individual children and their families, but also the contexts that surround them. Americans famously believe that hard work, discipline, and self-determination are all it takes to succeed; underlying this rugged individualism frame is the value of personal responsibility — even when talking about very young children. However, while individual efforts are important for children’s health, the problem with relying exclusively on the individual frame is that it hides the influence of other factors in people’s success: the social, economic, and physical conditions in which people live, learn, work, and play. Changing those conditions requires more than just personal responsibility. Collective measures such as policies shape the environments that surround people and can affect whether children can play in their neighborhoods, for example, get to their schools safely, or have nutritious food to eat and secure places to sleep. Other policies, such as subsidies for child care or prenatal care, can determine whether our society supports new parents in raising their children. Policies can also ensure that resources are distributed equitably for all communities and their children.

The question then becomes: What would it take to support more comprehensive reporting about early childhood as a complex, interconnected, scientific, social, and practical issue, during which the foundation for everything that follows is being constructed?

We brought this question to journalists who had been reporting on issues of early childhood, some of whom wrote exemplary articles captured in our content analysis. Their recommendations, supplemented with our analysis, follow.

recommendations:

Telling stories about changing the odds for children

While the bodies of research described above indicate that what happens in early childhood has long-term implications, we found that news coverage doesn't yet regularly reflect what would it take to change the experience of young children across society as a whole. What we need is journalism that delves deeply into the implications of the science not only for individual children and families but for whole communities. We need to see stories not about how children can beat the odds but, rather, about how we can change the odds for children.

Individual actions and personal responsibility are important and do have bearing on children's health outcomes. But if news stories don't go beyond children overcoming obstacles — as we often saw in our news analysis — it will be harder for the public and policymakers to understand how environments also have dramatic effects on population health. The question is, how can reporters tell stories about changing the odds and not just beating the odds — and what do they need to do this? We offer the following recommendations for reporters, for journalism at large, and for philanthropy, based on the findings from our news analysis and the suggestions of the reporters and editors we consulted.

Recommendations for reporters

Journalists' stock in trade is the "Question." So, for each recommendation, we identified questions that reporters could pose whose answers could illuminate the connections to the science of early childhood. We applied these questions and recommendations to actual news stories in Appendix I on pages 34–42.

Overall, we recommend that reporters include more context in their stories, avoid the pitfalls of incomplete or narrowly painted portraits of individuals and families, report on solutions, and ask about values. In this section, we provide suggestions, as well as perspectives from experts in the field, on how to incorporate each of these recommendations:

17 **Include context**

Report on environments, including the root causes of poverty.

Cultivate sources who understand science and systems.

Q&A with Venise Wagner and Sally Lehrman:

How to develop your own B-roll

21 **Avoid pitfalls in individual storytelling**

Connect individuals to the conditions surrounding them.

Place "hero" stories like graduations, scholarships or other personal achievements within a broader context.

Cast institutions as characters in stories to illustrate systemic issues.

23 **Report on solutions**

Describe the problem, but also investigate solutions, including prevention

Q&A with Rikha Sharma Rani from Solutions Journalism Network:

Avoiding hero worship with the "howdunnit" story

26 **Ask about values**

Avoid assessing solutions and accountability solely in terms of monetary return on investment (ROI).

Include context

Report on environments, including the root causes of poverty.

What are some causes of poverty in this community?

How did we get to this point?

Widen the lens on early childhood by telling stories that extend beyond the details of an individual's experiences to examine the effect of systems and environments that surround children and communities across the lifespan. Journalists can bring the broader context into stories about early childhood by describing the environments that contribute to poor health or, alternatively, by

describing the kind of place that supports health for everyone. The science behind ECE, ACEs, and DOHaD point to the risk factors — and fixes — that can be launch pads for storytelling. Comparing the resources, opportunities, and experiences in two communities is one way to illustrate the deficits or benefits in environments.

For example, poverty is the product of policy and societal decision-making: There is clear evidence that groups in our society have been systematically excluded from home ownership,¹⁶ education,¹⁷ and economic opportunity. Instead of discussing poverty only as a cause for inequality, discuss what factors lead to certain communities shouldering the burden of poverty, why people of color are faced with greater disadvantages than white people, and why members of low-income communities are faced with greater disadvantages than those with more power and economic resources. How have these broad societal issues taken hold locally? Then, ask how these factors affect child development and health across the lifespan.

Journalists can highlight the roles of social and physical environments in determining health outcomes by weaving the causes of poverty into stories about other topics, not just those that are explicitly about poverty or inequity. For example, in a story from our news analysis about the rate of public school students who live in poverty, one reporter quoted Mississippi's state Superintendent of Education, who noted that quality preschool is the key to helping low-income children because *"you can't assume they have books at home, or they visit the library or go on vacations. You have to think about what you're doing across the state and ensuring they're getting what other children get."*¹¹ Without the detail that brings the social environment into view, news consumers are likely to assume that the differences in children's achievement are solely the result of genetics or behavior. The science on early childhood education can be included in stories to explain to audiences why those conditions are not just good for individual children but necessary for community health and well-being.

Cultivate sources who understand science and systems.

What helps kids who live here be healthy, or what stands in the way?

What does the science say about the social or economic factors that support children's healthy development?

Reporting on systems and their influences on whole populations is one way to help news consumers understand the impact of environments on health and child development. Sources in your story can illuminate the broader social contexts that impinge on early childhood. These might be researchers, advocates, or residents who can explain the connections between environments, social context, and the health and development of young children.

For example, economists could explain the interconnections between early childhood education and the history of economic development — or lack thereof — in communities. Sources could also be workforce specialists who can describe how early childhood programs enhance job opportunities now and in the long term, or environmental quality experts and city planners who can illustrate the collective decision-making that led to placing polluting industry and highways in close proximity to communities and housing. The science demonstrates strong connections between these broader social forces and children's health, but most of the public doesn't get exposed to the science. News stories can help make these connections clear. The right sources can link the broader scientific findings on the phases of early childhood to health and economic disparities between different groups.

In addition, sources who are steeped in the research about the long-term impact of early childhood experiences and exposures can provide important context about how the choices that policymakers make today can impact children's entire lifespans, as well as the health of future generations.

One key to discussing the disproportionate burdens and disadvantages affecting communities of color and low-income communities is to report about privilege and the resultant lifelong and multigenerational advantages that dominant groups benefit from under the current system. For example, when reporting on deficiencies in certain schools, to paint the full picture for your audience, you can contrast them with schools that are fully resourced and go even further by asking how those disparities came to be.

How to develop your own B-roll:

Q&A with Venise Wagner and Sally Lehrman, authors of *Reporting Inequality: Tools and Methods for Covering Race and Ethnicity*

Venise Wagner, associate professor of journalism at San Francisco State University, and Sally Lehrman, senior director, Journalism Ethics Program, and director, Trust Project, Markkula Center for Applied Ethics, Santa Clara University, have written *Reporting Inequality: Tools and Methods for Covering Race and Ethnicity*, a book to help journalists address similar challenges to those we identified in the news analysis of early childhood and in our discussions with reporters. Just like early childhood development, health equity is complex, touching nearly every aspect of society. Their observations hold many lessons for any reporter seeking to take a complex topic and make it visible and meaningful in daily news. One of their recommendations is to prepare B-roll on the context of early childhood ahead of time — even for print reporters. We asked them to elaborate on their idea.

Berkeley Media Studies Group: What made you decide to write a book about reporting on health equity?

Venise Wagner: Much of the coverage in mainstream news media about disparities tends to focus attention on the individual choices people make rather than the larger social and institutional contexts that shape how people approach these problems and often influence the kinds of choices people have. We wrote *Reporting Inequality* to help journalists make connections across the beat structures because, in real life, many issues of disparity go beyond the boundaries of beats. Sally and I worked together at the Hearst-owned *Examiner* and have collaborated since then to improve representations of people of color in the news and develop tools and modules we could use in the classroom. Over the years, the project has morphed into a comprehensive set of reporting strategies that draw on the scholarship of sociologists and social psychologists. These are important frameworks that journalists can learn a lot from. We also have drawn on the public health model of social determinants of health to better understand the root causes of disparity. Our methods can be applied to several beats, including education, health, housing, wealth, and criminal justice, and in linking across beats.

Sally Lehrman: We are beginning to see more coverage of disparate outcomes and inequities by race, such as educational achievement, health disparities, policing, etc. But in a vacuum, these can turn into “blame the victim” or “blame the community” stories. We wanted to teach reporters how to cover the structural inequities across institutions, policies, and practices that hold inequity in place and constrain the choices and opportunities for people of color in the U.S.

BMSG: What are some of the biggest challenges that reporters face when reporting on issues of racial or health equity?

VW: The demands of today's newsrooms move at lightning speed. Reporters have to write more stories in less time, which means they don't have extended periods or additional resources to go deep, to look into the historical, institutional, or even the structural contexts that shape how health equity plays out in our country. Additionally, as news holes have shrunk, today's journalists have the added pressure of explaining complex issues in shorter pieces.

SL: The health statistics can be disheartening and overwhelming to the people they describe. Journalists also face reductionist thinking that attributes health inequities to genetic differences or to behavioral failures. Reporters must find opportunities to show the ways in which institutional policies and practices have a concrete impact on people's lives and, often, to look outside their own beat to show how decisions made in planning departments, schools, transportation, and other arenas affect health unevenly across race.

BMSG: Do you have suggestions for reporters so they can include health and racial equity in stories effectively, given the time constraints of busy newsrooms? What does it mean for a print reporter to generate B-roll?

VW: B-roll provides visual background for TV news stories. Print reporters can create a reservoir of B-roll of sorts for themselves so they can more easily add context to stories on deadline. We suggest journalists report on the context in their down time, on a slow news day, for example. That's the time that you spend gathering B-matter or B-roll for those complex stories that are bound to break in the future. As an example, if you are an education reporter, you know at some point you will be writing about test scores in your local district. On a slow news day, you can gather B-matter about the historical contexts of school segregation and the many ways that impacts student outcomes. When the test scores are released, you can add a paragraph explaining that context to readers.

SL: Health reporters can review the work being done on the social determinants of health, such as World Health Organization reports on the issue, HealthyPeople2020, and the reports of counties that are developing plans to address social determinants of health. They can use these to develop better questions when a story breaks and to identify angles that reach beyond health determinism to show how institutional decisions have disparate impact. And similar to the education example Venise offers, a health reporter can prepare for breaking news on health disparities by gathering information about the structural and historical context that contributes to inequities, such as segregation, translation services, and the built environment in affected communities, among others.

Venise Wagner and Sally Lehrman's book, *Reporting Inequality: Tools and Methods for Covering Race and Ethnicity*, will be published in fall 2018 by Routledge.

Avoid pitfalls in individual storytelling

Connect individuals to the conditions surrounding them.

What agencies or programs exist in this community to help children and families?

Profiling an individual or family who has experienced childhood trauma or difficulty with early childhood can engage readers and help them relate to the story. However, if these individual stories are not linked to their larger social contexts, the stories will make it harder for audiences to understand the social conditions and environments that inhibit a

healthy start for many children. More robust reporting on early childhood will elucidate the challenges within broader systems and communities.

Place “hero” stories like graduations, scholarships, or other personal achievements within a broader context.

How many kids are not succeeding in this school district?

How does that compare to other areas?

What obstacles are kids facing?

Stories about children and families beating the odds can be inspirational and hopeful, but they often fail to convey the larger social context. This can leave readers with the notion that the only solution to poverty, inadequate educational opportunities, and other community-wide challenges is for individuals (often parents, when considering young children) to fend for themselves. If you’re reporting on an individual who has succeeded in difficult circumstances, ask: How can the inspirational story illuminate a larger point about systems?

One way is to include information about how systems or actors in their wider environment contributed to that success (and others’ successes). For example, in a story about a homeless high school student bound for college, the reporter highlighted the services surrounding the student that helped him to achieve this educational success: “[*The Toussaint Academy*] works to reverse the outcomes expected for youth like Marco — among them, homelessness in adulthood. [Staff member Mark Lim] said finding and serving unaccompanied teens plays an important role in reducing the number of people on the streets.”¹⁸ Another example comes from a story about a child with disruptive behavior, in which the reporter detailed the external factors that gave rise to these issues, including the early interventions that could have changed her trajectory and outcome dramatically.¹⁹

Cast institutions as characters in stories to illustrate systemic issues.

Are there data showing differences between zip codes, neighborhoods, census tracts, or communities?

Write stories in which institutions or neighborhoods serve as the characters. Leading with location or geography can be one compelling way to convey broader societal context. If an issue can be associated with a geographic region, this will help readers understand that early childhood health and development is as much about social context as it is about individual children or families.

Using data that are compared by zip code, neighborhood, or census tract can be particularly informative in demonstrating the differences in the environments young children and their families inhabit. In a story about a low-income Cherokee community in North Carolina, for example, the reporter described how an intervention that provided money to every member of the tribe drastically improved the outcomes of the children from families that had been living below the poverty line: *“A cash infusion in childhood seemed to lower the risk of problems in adulthood. That suggests that poverty makes people unwell, and that meaningful intervention is relatively simple.”*²⁰ This story illustrates how children’s emotional and behavioral problems are unequivocally linked to external, structural factors. By describing the wider environment and community circumstances, the reporter demonstrates that these issues go beyond the individual.



If an issue can be associated with a geographic region, this will help readers understand that early childhood health and development is as much about social context as it is about individual children or families.

Report on solutions

Describe the problem, but also investigate solutions, including prevention.

What more could be done that hasn't already been done?

What has been done in other communities? Could it work here?

What are the opportunities that could open the doors you need opened?

How far back would we have needed to go to prevent this?

How does this finding connect to other sectors or disciplines? What are the implications for policy, education, health care, etc.?

Ask sources not only about the scope of the problem, but also what would be needed to solve it and how to address its root causes. While after-the-fact strategies are important, focusing solely on how to help people recover from early childhood trauma and adversity could create a sense that these problems are inevitable. Prevention, on the other hand, emphasizes the root causes of problems in early childhood. In our news analysis, we found that of the articles that discussed the achievement gap or poverty, only 16% made reference to interventions that address the many structural and root causes of poverty. If news stories investigate the sorts of solutions that point to structural changes in systems, it will be easier for policymakers and the public to imagine tangible changes.



Avoiding hero worship with the “howdunnit” story: Q&A with Rikha Sharma Rani from Solutions Journalism Network

The Solutions Journalism Network takes a unique approach to getting beyond typical journalism focused on problems to dig deeper into solutions. We asked Rikha Sharma Rani about how that approach, especially investigating “how,” could help reporters covering early childhood.

Berkeley Media Studies Group: How does Solutions Journalism Network approach reporting on complex issues like early childhood?

Rikha Sharma Rani: We urge reporters to reflect on what is missing from coverage about a particular issue and then try to fill that gap. When conceptualizing a story, reflect on what is needed to advance the public conversation. Is it a story that exposes the depth and scale of the problem? Is it a descriptive, character-driven story that elicits outrage or spurs people into action? Or, if the problem is well understood but responses to it are not, is it a story about what solutions are being deployed and their results?

I think the last question is particularly relevant to reporting about early childhood. We know — because there has been extensive research and reporting about it — how crucial the early childhood years are in terms of cognitive development. Similarly, we know that trauma experienced in early childhood persists well into adulthood. What we know less about is how people are addressing these issues and what insights we can draw from that work. Solutions journalism can help fill that gap. But what’s important is the asking. When covering issues as complex as early childhood, it’s important for reporters to step back, assess the state of play, and then produce content that, hopefully, moves the conversation forward.

BMSG: What are some best practices for bringing context into stories about policy?

RSR: Context is important for most stories, but it's especially important for stories that deal with issues as complex and multifaceted as public policy. No policy is perfect. Embrace that fuzzy, gray space. If your story is about an innovative new policy, don't shy away from talking about its limitations. If it was expensive to implement, say so. If it was borne out of circumstances that are unlikely to be replicated, say so. If it was effective, show evidence and try to identify the drivers of success. If it wasn't, tell the audience what lessons can be drawn from the experience. Being transparent about a policy's strengths and weaknesses makes your story more credible, and it lets your audience know that they can trust you.

BMSG: What does it mean to ask “Howdunnit?” Where can reporters go with that question?

RSR: Journalists are trained to ask the “5 Ws” [who, what, when, where, and why], but, increasingly, they're also asking the “H”: How? How did this city dramatically reduce the percentage of kids suffering adverse childhood events? How did this state double the number of kids enrolled in early childhood programs last year? We liken the “howdunnit” to shows like *CSI* or *House*. From the very first scene you know what happened, but you watch because you want to know how it happened. As a reporter, drill down into the fine-grain details of the processes people use when turning great ideas into real, measurable successes. No detail is too small! Being relentless about the “how” can take your story in a whole new direction or reveal a new story waiting to be told.

BMSG: How can reporters find out more about Solutions Journalism Network?

RSR: Go to solutionsjournalism.org and join our online network, The Hub! Hub members have access to all of our journalism resources, including our signature Solutions Journalism toolkit, funding opportunities for freelancers, newsroom case studies, and tons more. You can also join local chapters in the San Francisco Bay Area, D.C., Portland, New York City, Seattle, and Los Angeles. And, finally, you can follow us at [@soljourno](https://twitter.com/soljourno) on Twitter.

Ask about values

Avoid assessing solutions and accountability solely in terms of monetary return on investment (ROI).

Aside from monetary ROI, how can you tell this is working? (Or) Why is this important?

What does it mean to invest in children?

Why do you care about this? Why does it matter?

Why does this matter for people who don't have children?

A common way of assessing the value or success of early childhood programs is to calculate the return on investment (ROI), as measured by future dollars saved or other monetary benefits. This can be a tempting device to convince skeptics of the value of early childhood programs. However, from a framing perspective, one pitfall of a narrow ROI interpretation is that it presents the benefit of good early childhood development as being fundamentally about money rather than whether the next generation, and our society, can thrive.

Instead, ask: What does it mean to invest in children? What does it mean for children and families now, and what does it mean for our larger community in the future? Push beyond answers

limited to the reduced costs of social and health programs to reveal the non-monetary benefits of a healthy populace.

To expand the concept of “return” in ROI, report on the non-monetary benefits accrued by communities that invest in early childhood development. To explore alternate frameworks for assessing success and accountability, ask sources about how their communities are doing compared with communities that show better outcomes for children. Certainly, there are economic benefits for communities that invest in young children and their families, but are there also benefits for democracy? For the arts? For other aspects of the communities we inhabit together?

Readers connect with stories based on shared values. Ask sources about why investing in early childhood matters for people without children. Research on the impact of early childhood education, adverse childhood experiences, and early environmental exposures indicates that what happens in early childhood can reverberate well into adulthood, and even to the next generation. Including sources who can speak to the long-term stakes of this critical period can make the issues compelling for all readers.

Recommendations for journalism

The science on early childhood is challenging. Incorporating it into daily news is no simple task. The field of journalism, from journalism schools to news organizations, could make it easier for daily reporters, editors, and producers if they:

Provide training for students and mid-career journalists.

Journalism programs should help reporters understand the nuanced science behind early childhood development, including the links between environments and the risk of disease. Schools can have formal and informal cross-training with schools of public health (such as the dual masters program in journalism and public health at the University of California, Berkeley). Fellowships and trainings specifically on early childhood would help reporters navigate the science, identify trusted sources of data, and find informative sources, such as the Bob and Charlee Moore Institute for Nutrition and Wellness at Oregon Health & Science University (find contact information for this and other resources in Appendix II). Academic institutions could administer these fellowships and trainings with support from charitable foundations.

Expand diversity in newsrooms.

Increase racial and socio-economic diversity in the newsroom, and create opportunities for journalists to work with a variety of communities. This will foster a greater understanding of early childhood issues as they relate to inequality. When journalists are endowed with the background context necessary to accurately portray these complex stories — either from their personal lives or their professional experiences — their deeper understanding will improve reporting on social issues and the environmental factors that exacerbate them. The Maynard Institute for Journalism Education is one organization focused on expanding the diversity of newsrooms.

Share information and story ideas.

Organizations like Solutions Journalism Network, the Dart Center for Journalism and Trauma, the USC Annenberg Center for Health Journalism, the Poynter Institute, and the Association for Health Care Journalists are a few examples of organizations to whom reporters can pose questions and find answers, discover leads, and cultivate sources on a variety of topics, including early childhood. Beat-specific listservs can also prove to be an important resource for the journalism community — particularly for new reporters or reporters switching beats.

Just as children will grow into healthy adults when they are surrounded by nurturing environments, journalists will be able to do their best work when their organizations, and the field at large, support their reporting.

**Engaging community members in stories about early childhood:
Q&A with Michelle Levander from the
USC Annenberg Center for Health Journalism**

Michelle Levander is founding director and editor-in-chief of the Center for Health Journalism at the USC Annenberg School of Journalism. The Center helps journalists investigate health challenges and solutions in their communities, serving as a catalyst for change. When we presented her with the challenges inherent in bringing three bodies of science together in reporting about early childhood she said, “When context is important, engaged journalism can help.” The Center, founded in 2004, has helped journalists and newsrooms practice “engaged journalism” for many years. We asked her to explain the concept and how it can be applied to create more comprehensive reporting on the society-wide implications of early childhood development.

Berkeley Media Studies Group: What is “engaged journalism”?

Michelle Levander: “Engaged journalism” is better journalism. Engaged journalism involves the community in the storytelling. It means asking community members to help frame or define what the story “is.” Reporters connect with stakeholders in inclusive and creative ways early in the reporting process, reaching out with special text messaging tools, with radio or newspaper “call-outs,” or by partnering with local nonprofits for in-person gatherings. And when stories air or are published, engaged journalists take steps to ensure that the “right” audiences see the reporting in a format that works for them. That can mean, for instance, partnering with a local diocese to send postcards in English and Spanish²¹ with key takeaways to a farmworker community that does not read your newspaper, but could benefit from information in your articles, as one of our Fellows did. Or emailing Congressional or state legislative aides or local medical associations to encourage distribution²² to ensure that policymakers and clinicians are aware of reported findings, a step taken by another of our Fellows.

BMSG: How do you think that approach can help reporters meet some of the challenges in reporting comprehensively on early childhood?

ML: Too often, reporters parachute into a community and then leave after extracting enough information to produce a dramatic story. A lot of nuance can get lost in the process. Engaged journalism builds trust and sends a message to communities that you are reporting both *for* them and about them. Ed Williams, of the *New Mexico Searchlight*, describes how, with our support, he embarked on a reporting and engagement project²³ with a fundamentally different framework as he sought to profile a stigmatized community weighted down by a decades-old opioid epidemic.

BMSG: Do you have an example of how this has been done?

ML: This kind of storytelling can take many shapes, but here are some examples: soliciting community questions or concerns to shape a story, inviting residents to participate in testing for pollution in their homes and schools, creating a platform for people to tell their own stories, or bringing together diverse constituencies to launch conversations about solutions. This approach can help journalists find sources, discover new angles, learn about a topic, build an audience, tell richer stories and — most importantly — spark impact and connection.

Michelle Levander can be reached at levander@usc.edu.

Recommendations for philanthropy

This report is meant for working journalists and journalism educators, but since the decline in journalism revenues precipitated by the dot-com boom of the 1990s, philanthropy has been ever more engaged in supporting journalism, from national investigative reporting to hyperlocal news. In this precarious political moment with bona fide news under unprecedented assault, funders should up the ante and double down on their investments to strengthen the field.

With regard to early childhood, funders can:

Provide mid-career support for training. Programs such as Investigative Reporters and Editors and the National Institute for Computer-Assisted Reporting, the USC Annenberg Center for Health Journalism, or a variety of training programs offered by the Poynter Institute could be funded to tackle the complexities of reporting on early childhood.

Support professional associations, which can, in turn, help to increase newsroom diversity and perspectives on early childhood. These groups include the National Association of Hispanic Journalists, National Association of Black Journalists, Native American Journalists Association, Asian American Journalists Association, Association of Health Care Journalists, and the Solutions Journalism Network.

Endow chairs in journalism schools to develop curricula and training on answering the challenges raised in this report for reporting daily news on early childhood with context and complexity.

Convene researchers and reporters so they can share data and stories. Foundation grantees can be rich sources for working journalists, but only if they have a relationship with one another.

Support journalism on the interconnected science of early childhood with investigative journalists, such as those at Reveal from the Center for Investigative Reporting, ProPublica, and others, along with local news outlets that can report on early childhood issues at the municipal and regional levels.



conclusion

Journalists construct stories to be widely read and bring meaning and connection to their readers and viewers. The continuum of early childhood and the interconnections of the three bodies of science that help us understand it offer myriad avenues for stories that can have local and national impact, especially when those stories marry the science of early childhood development to social impact at the community level. These are, at essence, stories about justice and injustice, opportunity and challenge, and what might be necessary to create change. Society has a responsibility to provide every child with the opportunity to lead a healthy, full life. Reporters play a pivotal role in helping policymakers and the public understand that environmental factors and policy decisions shape early childhood for everyone across the entire lifespan. When news coverage elevates the external factors that can give rise to early health problems and disparities, policymakers will be better equipped to make informed choices that will ensure healthy development and lifelong opportunity for all children.

Reporters can expand the narrative about early childhood by conveying the complex set of circumstances that inform the trajectory of individual children and families. A more comprehensive picture of early childhood goes beneath the surface to explore root causes of problems affecting children. These approaches provide audiences with a deeper understanding of effective solutions and will allow us, together, to create healthier and more equitable environments for all children.

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appendix I

“Before and after” news stories

Following are two articles that appeared in our research sample of news stories about early childhood — one on school breakfast programs and another on children’s health data. Both articles employ different frames that could be widened to include a more comprehensive story about early childhood. We revised these articles, applying the public health framework, recommendations, and questions discussed in this report to provide concrete examples of how one could expand reporting on early childhood. The stories are reprinted with permission.

Story 1: Moving from defeatism to solutions

Picture bleak for many children, by Christina Rosales on June 12, 2013
The Dallas Morning News

Story 2: Examining trends and reporting on inequity

Poverty decreases, by Tom McGhee and Yesenia Robles on March 24, 2015 for *The Denver Post*

We present the “after” stories only as suggestions to jumpstart your thinking about how to include the science on early childhood, and its implications, in daily news. It won’t always be possible for news organizations to allocate more space or resources to reporting on early childhood. But when they can, the comprehensive and nuanced coverage about early childhood will help policymakers and the public understand why the environments our society creates for children and families matter for everyone’s health.

Story 1: Moving from defeatism to solutions

BEFORE

Picture bleak for many children

By Christina Rosales

June 12, 2013

The Dallas Morning News

Despite continuing economic growth in Dallas-Fort Worth, hundreds of thousands of area children are at risk of going hungry and living in poverty, according to a report released last month by Children At Risk.

The nonprofit research advocacy group worked with North Texas social service providers, schools and researchers to collect and analyze data to show what many of them already know anecdotally, said Jaime Hanks Meyers, the nonprofit's managing director in North Texas.

The report shows that more than a quarter of Dallas County children live in poverty, and a total of 360,000 in North Texas' nine counties. Other findings include a lack of adequate mental health care and a 20 percent food insecurity rate in Dallas County and 17 percent in Tarrant County.

"Public policy is a main focus for us," Hanks Meyers said. "We're going to struggle to meet all the needs of our kids. We have to work together in all of this. Education, obesity, hunger — one organization cannot solve all of this."

The report offers suggestions that have been proved to work for years. An example, Hanks Meyers said, is school breakfast programs, which can improve a child's physical and mental health, as well as academic performance.

According to the report, about 420,000 eligible North Texas students did not take advantage of the breakfast program at their schools. Children At Risk proposes in the report that Texas lawmakers require schools with a high percentage of students on free or reduced-price lunch to serve breakfast in the classroom.

There are other areas that North Texas can improve upon, said Michelle Kinder, executive director of the Salesmanship Club Youth and Family Centers. The Dallas nonprofit works with at-risk youths and their families through education and therapy services.

"We as a community need to recognize the impact of the toxic stress that comes with living in poverty," Kinder said. "We need to work more in sync in the mental health world and education world."

According to the report, Texas ranks last in the country in mental health spending per capita. And 20 percent of families in North Texas reported being unable to access mental health services they needed for their children.

"We know what to do," Kinder said. "The question is, can we make it a priority?"

AFTER

Breakfast in the classroom could help address poverty, hunger

Headline rewritten to be positive instead of defeatist, as well as to reference root causes and solutions

~~Despite continuing economic growth in Dallas-Fort Worth, hundreds of thousands of area children are at risk of going hungry and living in poverty, according to a report released last month by Children At Risk.~~

School breakfast programs can improve children’s physical and mental health, with lasting benefits that can compound over their lifetime. Today, advocates are asking Texas lawmakers to require schools with a high percentage of students on free or reduced-price lunch to serve breakfast in the classroom.

According to a report released last month by Children at Risk, a nonprofit research advocacy group, about 420,000 eligible North Texas students did not take advantage of the breakfast program at their schools.

The nonprofit research advocacy group worked with North Texas social service providers, schools and researchers to collect and analyze data to show what many of them already know anecdotally, said Jaime Hanks Meyers, the nonprofit’s managing director in North Texas.

The report shows that more than a quarter of Dallas County children live in poverty, and a total of 360,000 in North Texas’ nine counties. Other findings include a lack of adequate mental health care and a 20 percent food insecurity rate in Dallas County and 17 percent in Tarrant County. **A long history of local social and economic policies that discriminated against African American and other communities of color have created deep disparities.**

ASK:

- What are some causes of poverty in this community?
- How did we get to this point?
- Why is there this economic disparity?
- What policies, conditions, priorities are at the root of the inequity?

Information about the long-term impact of child poverty helps make it clear to readers why reducing child poverty rates matters.

“Public policy is a main focus for us,” Hanks Meyers said. “We’re going to struggle to meet all the needs of our kids. We have to work together in all of this. Education, obesity, hunger — one organization cannot solve all of this.”

The report offers suggestions that have been proved to work for years. An example, Hanks Meyers said, is school breakfast programs, which can improve a child’s physical and mental health, as well as academic performance.

When children grow without resources like health care and healthy foods, they are at higher risk for developing health problems, both as children and adults. Data from the Centers for Disease Control and Prevention show that children who grow up in poverty are at increased risk for a wide range of health issues, such as diabetes, heart disease, cancer, drug abuse, and alcoholism.

ASK:

- What has been done in other communities? Could it work here?
- What are some preventive solutions?
- What would working “more in sync in the mental health world and education world” look like? What would that take?
- What are the opportunities that could open the doors you need opened?

There are other areas that North Texas can improve upon, said Michelle Kinder, executive director of the Salesmanship Club Youth and Family Centers. The Dallas nonprofit works with at-risk youths and their families through education and therapy services.

“We as a community need to recognize the impact of the toxic stress that comes with living in poverty,” Kinder said. “We need to work more in sync in the mental health world and education world.”

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“We know what to do,” Kinder said. “The question is, can we make it a priority?”

Story 2: Examining trends and reporting on inequity

BEFORE

Poverty decreases

By Tom McGhee and Yesenia Robles

March 24, 2015

The Denver Post

For the first time since 2008, the percentage of Colorado children living in poverty decreased, but the recovery has been spotty, with minority kids and those in rural areas still facing the highest rates of child poverty, according to a new report.

“This is great news for Colorado,” Lt. Gov. Joe Garcia said Monday at the unveiling of the annual Colorado Kids Count report. “But we know there are far too many children growing up in households where they don’t have the resources they need.”

The report measured poverty defined as those living in households with income levels at, or below, \$23,550 for a family of four among children in 2013, the last year that statistics were available. It found that 17 percent of the state’s 1.2 million children lived in poverty.

That represents about 207,000 children and youths under 18 years of age, but it is a decrease from about 224,000 children, or 18 percent, in 2012.

The drop is small but could represent the start of a welcome downward trend, said Chris Watney, president and CEO of the Colorado Children’s Campaign, a nonprofit that publishes the report every year.

“I know the state has seen a lot of indications of economic recovery,” Watney said. “I’m very hopeful that’s going to be a trend moving forward.”

Rural rates still high

Overall, the poverty rate remains higher in rural counties than urban counties.

Since the recession began in late 2007, the poverty rate among urban counties rose from 18 to 19 percent, and from 20 to 23 percent among rural counties.

Poverty continues to be highest among black and Latino children, though it has decreased in both communities. In 2012, 41 percent of black kids were in poverty, compared with 33 percent last year.

Among Hispanic children, the percentage edged down from 31 percent in 2012 to 29 percent in 2013.

Historically, people of color have been at a disadvantage throughout the country, and that is reflected in Colorado's numbers, said Sarah Hughes, research director for the Colorado Children's Campaign.

The recession also hit minority communities a little harder than others, she said.

Among the state's 64 counties, Saguache, in the San Luis Valley, had the highest child poverty rate last year at 43 percent.

Saguache, Alamosa and Costilla counties, all in the valley, have had at least 20 percent of their overall population living in poverty during the last 20 years, and are considered "persistently poor," according to the report.

"These families are having a really hard time breaking the cycle of poverty," Hughes said.

County breakdown

The report breaks down data among the 25 counties with the largest child populations, ranking them based on a well-being index that considers 12 indicators, including teen birth rates, number of children in poverty, those who are uninsured, and high school dropout rates.

Among counties included in the well-being index, Fremont County had the highest child poverty rate in 2013 31 percent. Montezuma County was next at 30 percent.

Douglas County had the lowest child poverty rate 4 percent.

For the first year, Denver did not rank the worst in the state under the same index.

"Denver improved a little on most of the indicators," said Hughes. "At the same time, Montezuma County got a little worse."

Denver specific data shows Denver children made improvements with graduation rate increases, a drop in the number of uninsured children, and a teen birth rate that decreased to 33.3 per 1,000, down from 39.7 per 1,000 in 2012.

In 2013, Denver also had an increase in fourth graders not proficient in state reading tests, and an increase in the number of children classified as homeless in the schools.

The Kids Count report analyzed several new measures this year, including the number of kids who have "adverse childhood experiences," teens who use painkillers for nonmedical purposes, and the child care capacity of each county.

Some of the new analysis was based on data from the Colorado Healthy Kids Survey.

Yesenia Robles: 303 954 1372, yrobles@denverpost.com or twitter.com/yeseniarobles

AFTER

Despite drop in poverty, rate still highest among kids of color — Advocates ask why

Headline rewritten to bring specificity and focus to the topic of the story and to highlight the issue of racial equity.

For the first time since 2008, the percentage of Colorado children living in poverty decreased, but the recovery has **not been equitable. Black and Latino** kids and those in rural areas still face the highest rates of child poverty, according to a new report.

Be specific: The data in the annual Colorado Kids Count report concern Black and Latino children rather than minority children overall.

“This is great news for Colorado,” Lt. Gov. Joe Garcia said Monday at the unveiling of the annual Colorado Kids Count report. “But we know there are far too many children growing up in households where they don’t have the resources they need.”

ASK:

- Why are there children who grow up without the resources they need?
- What is needed to prevent this?

The report measured poverty defined as those living in households with income levels at, or below, \$23,550 for a family of four among children in 2013, the last year that statistics were available. It found that 17 percent of the state’s 1.2 million children lived in poverty.

That represents about 207,000 children and youths under 18 years of age, but it is a decrease from about 224,000 children, or 18 percent, in 2012.

The drop is small but could represent the start of a welcome downward trend, said Chris Watney, president and CEO of the Colorado Children’s Campaign, a nonprofit that publishes the report every year.

ASK:

- How do we ensure that this economic recovery is helping everyone, particularly the most vulnerable children and families?
- What more could be done that hasn’t already been done?

“I know the state has seen a lot of indications of economic recovery,” Watney said. “I’m very hopeful that’s going to be a trend moving forward.”

Rates among rural, kids of color still high

This economic recovery, however, is not lifting up children most affected by poverty.

Overall, the poverty rate remains higher in rural counties than urban counties.

Since the recession began in late 2007, the poverty rate among urban counties rose from 18 to 19 percent, and from 20 to 23 percent among rural counties.

Poverty continues to be highest among black and Latino children, though it has decreased in both communities. In 2012, 41 percent of black kids were in poverty, compared with 33 percent last year.

ASK:
 • What are the causes of these disadvantages? Explain the history behind this trend.

Among Hispanic children, the percentage edged down from 31 percent in 2012 to 29 percent in 2013.

Historically, people of color have been at a disadvantage throughout the country, and that is reflected in Colorado’s numbers, said Sarah Hughes, research director for the Colorado Children’s Campaign.

The recession also hit minority communities a little harder than others, she said.

Among the state’s 64 counties, Saguache, in the San Luis Valley, had the highest child poverty rate last year at 43 percent.

Saguache, Alamosa and Costilla counties, all in the valley, have had at least 20 percent of their overall population living in poverty during the last 20 years, and are considered “persistently poor,” according to the report.

“These families are having a really hard time breaking the cycle of poverty,” Hughes said.

Historically, there has been a lack of investment into these communities, such as job training, quality primary care, and neighborhood safety, which could help families break this cycle. Studies show that poverty and the inability to access resources like these can create health risks in children that continue into adulthood, compounding the effects of this inequity.

ASK:
 • Why should Coloradans care that rural kids and kids of color are more likely to grow up in poverty?
 • Why do you think it’s important that Colorado address child poverty in communities of color?

ASK:
 • What are the obstacles standing in their way?
 • What have other communities done to change this situation?

County breakdown

The report breaks down data among the 25 counties with the largest child populations, ranking them based on a well-being index that considers 12 indicators, including teen birth rates, number of children in poverty, those who are uninsured, and high school dropout rates.

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In 2013, Denver also had an increase in fourth graders not proficient in state reading tests, and an increase in the number of children classified as homeless in the schools.

The Kids Count report analyzed several new measures this year, including the number of kids who have “adverse childhood experiences,” teens who use painkillers for nonmedical purposes, and the child care capacity of each county.

These new measures show us where the most pressing problems are and what changes are needed in schools, health care, and other institutions that help children in Colorado realize their fullest potential.

Some of the new analysis was based on data from the Colorado Healthy Kids Survey.

ASK:

- Why? What has contributed to Douglas County’s economic prosperity?
- What are some of the advantages that families in Douglas County have that other Colorado families don’t? (Lots of employment opportunities? Natural resources? Strong schools? Well-maintained infrastructure?)

Use the opportunity of the Kids Count report to add sidebars and/or follow up stories on solutions the community is exploring on teen birth rate, reading levels, homelessness, drug abuse, and other issues in the report.

appendix II

Key research papers, organizations, and other resources

Early childhood education (ECE)

Center on the Developing Child at Harvard University

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Center on the Developing Child at Harvard University (2007). *A science-based framework for early childhood policy: Using evidence to improve outcomes in learning, behavior, and health for vulnerable children.*

http://developingchild.harvard.edu/wpcontent/uploads/2015/05/Policy_Framework.pdf

A report building on systematic analyses and development of a new framework for guiding childhood policy based on evidence from early brain development research and program evaluation.

Heckman J., et al. (2013). Understanding the mechanisms through which an influential early childhood program boosted adult outcomes. *American Economic Review*; 103(6): 2052-2086

A study evaluating the later life outcomes of the Perry Preschool program, an early childhood intervention program targeting disadvantaged African American children in Ypsilanti, Michigan. The evaluation, which collected data from participants and controls at preschool age through age 40, found the program to have positive effects on cognition and academic motivation, which, in turn, are linked to achievement scores and health outcomes.

Heckman J. J. (2011). The Economics of Inequality: The Value of Early Childhood Education. *American Educator*; 35(1): 31.

An analysis of the data from the fields of biology, psychology, and economics, which find that investments in early childhood are beneficial both in terms of social justice and economic efficiency for all. The research shows that early childhood education promotes equity in human development as well as societal productivity.

Kirp D.L. (2013). *Improbable scholars: The rebirth of a great American school system and a strategy for America's schools*. New York, NY: Oxford University Press.

An examination of how to reform and rebuild public education in the U.S. and close the achievement gap for all students.

Adverse childhood experiences (ACEs)

ACEs Too High

ACEs Too High is a news site that reports on research about adverse childhood experiences, including developments in epidemiology, neurobiology, and the biomedical and epigenetic consequences of toxic stress.

www.acestoohigh.com

Contact: Jane Stevens, editor of ACEs Too High and founder and publisher of the ACEs Connection Network, which comprises ACEsTooHigh.com and its companion social network, ACEsConnection.com.

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Centers for Disease Control and Prevention: Division of Violence Prevention. ACE Study: Publications.

<https://www.cdc.gov/violenceprevention/cestudy/about.html>.

This website with key ACEs-related journal articles collected by the CDC is categorized by topic areas: chronic diseases, health risk behaviors, mental health, methodological issues, reproductive and sexual health, special populations, victimization and perpetration, and other health and social issues.

Felitti V. J., et al. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine*; 14(4): 245-258.

The pioneering Adverse Childhood Experience (ACE) study, conducted by researchers at Kaiser Permanente and the Centers for Disease Control and Prevention, which found that the more traumatic factors someone experienced as a child, the higher their risk for negative health outcomes, such as alcoholism, depression, and obesity.

Institute for Safe Families & The Research and Evaluation Group at Public Health Management Corporation (2013). Findings from the Philadelphia Urban ACE Survey.

<https://www.rwjf.org/en/library/research/2013/09/findings-from-the-philadelphia-urban-ace-survey.html>.

The Philadelphia Urban ACE Survey builds on the findings of the seminal 1998 Kaiser ACEs study, which confirmed the negative impact of childhood traumas, such as abuse and household dysfunction. This study examined the impact of ACEs within a more urban and racially diverse population and found that childhood experiences of racial or ethnic discrimination were also a contributing factor for negative health outcomes in adulthood.

Nurius P. S., et al. (2016). Stress pathways to health inequalities: Embedding ACEs within social and behavioral contexts. *International Public Health Journal*; 8(2): 241-256.

This analysis of survey data suggests childhood adversity has long-lasting impacts on health. The extent of exposure to adverse childhood experiences was found to be associated with early onset of chronic disease, which was additionally amplified by low socioeconomic status.

Shonkoff J. P., et al. (2009). Neuroscience, molecular biology, and the childhood roots of health disparities: Building a new framework for health promotion and disease prevention. *JAMA*; 301(21): 2252-2259.

A discussion of how future research and policy would benefit from considering the developmental origins of physical and mental ill health. Addressing adverse experiences that create developmental and biological disruptions early in life may lead to greater improvements in adult health outcomes.

Developmental origins of health and disease (DOHaD)

The Bob and Charlee Moore Institute for Nutrition & Wellness at Oregon Health & Science University

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Barker D. J. (2012). Developmental origins of chronic disease. *Public Health*; 126(3): 185-189.

Chronic diseases in adults are largely preventable, particularly by investing in the health and nutrition of girls and women. Barker asserts that protecting mothers against malnutrition and other adversities should be a cornerstone of public health efforts.

Barker D. J., & Thornburg K. L. (2013). The obstetric origins of health for a lifetime. *Clinical obstetrics and gynecology*; 56(3): 511-519.

A new model for identifying the developmental origins of chronic disease. Variations in the nutrition supply during fetal development are linked to alteration of the gene expression process related to diseases, including coronary heart disease and type 2 diabetes.

Messer L., et al. (2015). Developmental programming: Priming disease susceptibility for subsequent generations. *Current epidemiology reports*; 2(1): 37-51.

Proposal of a model demonstrating how developmental influences during gestation exacerbate the already disproportionately adverse health outcomes for racial and ethnic minorities. A call for future research to consider social environmental conditions of pregnant women in assessments of health disparities and their causes.

Richardson S. S., et al. (2014). Don't blame the mothers. *Nature*; 512: 131-132.

A report on how the experiences of pregnant women impact their offspring and their long-term health. Developmental origins of health and disease should guide policy; however, researchers warn of dangers in societal overreach in blaming mothers for their children's ill health.

Winett L., Wulf A., & Wallack L. (2016). Framing strategies to avoid mother-blame in communicating the origins of chronic disease. *American Journal of Public Health*; 106(8): 1369-1373.

A discussion of how to avoid “mother-blame,” or the tendency to hold mothers almost uniquely culpable for their offsprings’ later disease risk, in the context of epigenetics and DOHaD research.

Winett L., Wallack L., Richardson D., Boone-Heinonen J., & Messer L. (2016). A framework to address challenges in communicating the developmental origins of health and disease. *Current Environmental Health Reports*; 3(3), 169-177.

Evidence-based recommendations for translating findings from DOHaD research into an applicable health promotion and disease prevention framework. This paper offers support for communication and conceptualization challenges around upstream population-level solutions to the developmental causes of disease.

Reporters play a pivotal role in helping policymakers and the public understand that environmental factors and policy decisions shape early childhood for everyone across the entire lifespan.

The question is, how can reporters tell stories about changing the odds and not just beating the odds — and what do they need to do this?



What would it take to support more comprehensive reporting about early childhood as a complex, interconnected, scientific, social, and practical issue, during which the foundation for everything that follows is being constructed?



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