Data Linkages Between Public Health and Education Programs for Young Children with Special Needs

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Background

- Health and education programs are important in supporting optimal outcomes for young children with special needs. However, little is known about capacity across the U.S. to link data for children served in state Individuals with Disabilities Act (IDEA) Part C early intervention (EI) and Part B Section 619 early childhood special education (ECSE) programs with public health data.
- Public health is influenced by education and social welfare. Therefore, data linkages to other early childhood (EC) programs, K-12 education, and social services programs could also be used as a tool to promote public health.
- Because young children with or at risk for disability or developmental delays are often served by multiple programs, states with these connections are better positioned to use data to improve programs' positive impact and maximize public investments.
- This poster presents findings from a national study on states' EI and ECSE data systems, and how extensively these data are integrated with public health, education, and social services data.

Methods

- Online survey in summer 2013 of state EI and ECSE coordinators and data managers.
- Response rates from the 50 states, DC, and Puerto Rico: 94% for EI and 96% for ECSE.
- Questions addressed state capacity to link EI and ECSE child-level data to multiple health, education, and social service programs' data.
- Respondents were also asked if establishing such linkages was a state priority.

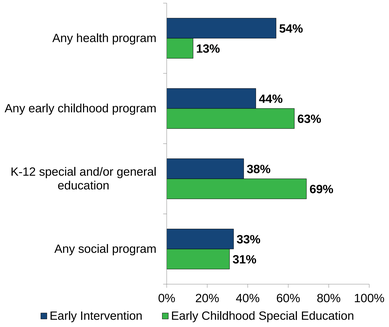
Definition: As defined in the survey, linking refers to the process of joining or connecting records about a child in one data system or dataset to the same child in another data system or dataset; records could reside in the same data system, or in separate data systems that have been linked at least once.

Findings

Comparison of EI and ECSE Linkages (Figure 1)

- Linkages to health programs were more common for EI than for ECSE, as more than half of states (54%) reported linkages between EI and at least one health program, compared with 13% for ECSE.
- Conversely, linkages to other early childhood (EC) programs and K-12 education data were more common for ECSE than for EI: 44% and 38% of states reported EI-EC and EI-Education linkages, respectively; and 63% and 69% of states reported ECSE-EC and ECSE-Education linkages, respectively.
- Results were similar for linkages to social service programs, with almost the same percentage of EI and ECSE coordinators (33% and 31%, respectively) reporting linkages to at least one social service program.

Figure 1. States Reporting Linkages Between Statewide EI & ECSE Data Systems and at Least One Type of Health, Early Childhood, K-12 Education, and Social Service Program Data System



Linkages to Health Programs (Figure 2)

- Linkages to all eight of the specific public health programs asked about in the survey were reported for EI in at least one state, while there were very few linkages for ECSE to six of the programs, and no linkages to vital records or all-payer claims (insurance).
- Both EI and ECSE were most commonly linked with Medicaid/SCHIP (42% and 12%, respectively) and EHDI (37% and 8%, respectively).

Abbreviations: SCHIP = State Children's Health Insurance Program; EHDI = Early Hearing Detection and Intervention; WIC/SNAP = Women, Infants, and Children/Supplemental Nutrition Assistance Program.

Linkages to Early Childhood (EC) and Education Programs (Figure 3)

- Both EI and ECSE were linked to each of the eight specific EC programs in at least one state.
- Almost one-third of states (29%) reported EI to ECSE linkages.
- Both EI and ECSE were most commonly linked with K-12 general (14% and 79%, respectively) and special education (41% and 87%, respectively).

Linkages to Social Service Programs (Figure 4)

- As for EC and education programs, both EI and ECSE are linked to each of the four specific social programs in at least one state.
- The most common linkages for EI were to child welfare (21%) and foster care (12%), while the most common linkages for ECSE were to Temporary Assistance to Needy Families (TANF) and homeless services (both 14%).

Figure 2. Linkages Between Statewide EI, ECSE, and Specific Health Program Data Systems

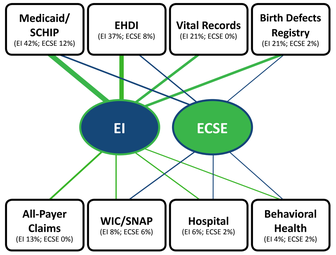


Figure 3. Linkages Between EI, ECSE, Other Early Childhood Programs, and K-12 Education Data Systems

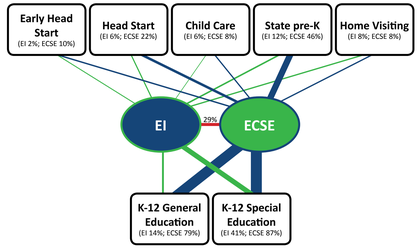
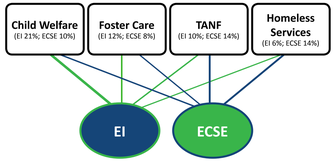


Figure 4. Linkages Between Statewide EI, ECSE, and Social Services Program Data Systems

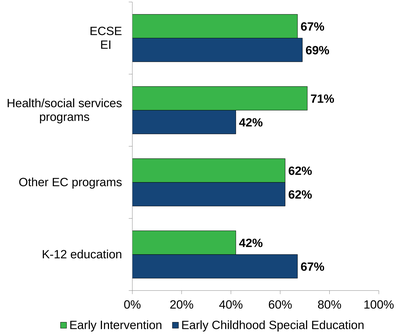


Note: Thickness of line represents relative proportion of states with linkages.

Priorities for Developing or Maintaining Linkages (Figure 5)

- About two-thirds of EI and ECSE coordinators reported linkages to the other program as a priority (67% and 69%, respectively).
- Developing linkages to health/social services programs was reported as a priority by 71% of EI coordinators, compared with only 42% of ECSE coordinators.
- An equal number of EI and ECSE coordinators reported priorities for linkages to other EC programs (62%).
- More ECSE coordinators reported priorities for linkages to K-12 education (67%) than EI coordinators (42%).

Figure 5. State Priorities for Linking IDEA Early Childhood Data Systems to Other Health, Social Service, and Education Data Systems



Conclusions and Implications

- States have made progress in developing the capacity to link early childhood health, education, and social service programs data, but the low percentages for many linkages indicate that there is considerable room for improvement.
- Linkage patterns reflect to some degree the influence of federal policies requiring coordination between programs (e.g., EI and child welfare), the historically greater focus on health in EI, and ECSE's location in state education agencies.

Public Health Implications

- Cross-system linkages increase state capacity to use data to improve the health and well-being of young children with special needs.
- Policy and administrative structures can promote or inhibit the development of these linkages.
- More information is needed about why so few states can link EI with other early childhood programs and ECSE with health programs.
- This information can inform greater policy attention to supporting the creation of these data linkages.

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