March 17, 2020

The Honorable Mitch McConnell  The Honorable Chuck Schumer
Majority Leader  Minority Leader
317 Russell Senate Office Building  322 Hart Senate Office Building
United States Senate  United States Senate
Washington, DC 20510  Washington, DC 20510

RE: In Support of the Families First Coronavirus Response Act

Dear Leader McConnell and Ranking Member Schumer:

We are heartened by the swift action Congress has taken to address the COVID-19 pandemic and encourage the senate to take additional action to address the needs of infants and toddlers. The Families First Coronavirus Response Act (the Act) will provide benefits to more than 65 million workers. This legislation is an important first step that will provide critical supplemental resources to address this pandemic and represents a down payment on what American families and the economy needs to weather this public health event. We strongly urge the Senate to take up and pass the House version of this bill, which contains crucial support for families struggling with both the public health as well as the extended economic disruptions of COVID-19.

ZERO TO THREE is a national non-profit organization that translates the science of early childhood development into useful knowledge and strategies for parents, practitioners, and policymakers. We work to ensure that babies and toddlers benefit from the family and community connections critical to their wellbeing and healthy development.

The Families First Coronavirus Response Act contains several key policy proposals that will bring needed stability to infants, toddlers, and their families as well as address the many concerns we are hearing from families and communities across the country. Recently, ZERO TO THREE surveyed our national network of parents about how COVID-19 was impacting them in their communities. The stories they tell bring important clarity as to why the Senate should pass the Families First Coronavirus Response Act right away. We have compiled these stories and included them below with the key specifics of why the Act is so necessary for babies and their families. Specifically:

Increasing funding to the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). The Act would provide an additional $500 million for nutritious foods for low-income pregnant women or mothers with young children who lose their jobs or are laid off due to COVID-19. The need for expanded WIC funding is encapsulated in this message from Jamie from Gillette, WY:

“Formula is running out in my town. There needs to be some effort to change the situation, otherwise babies will not get what they need.”
This program serves as a first line of defense for babies facing hunger. WIC’s target population is low-income pregnant, postpartum and breastfeeding women, infants, and children under 5 who are at nutritional risk. The pandemic is stressing food supply chains, and it is critical that children of families in need have access to the food they require to thrive.

**Emergency expansion of the Supplemental Nutrition Assistance Program (SNAP).** The *State of Babies Yearbook: 2019* shows that nearly 1 in 6 young children live in households that do not have access to a sufficient amount of nutritious foods. Christy from Talent, OR is experiencing this firsthand:

> “Schools in Oregon are being closed for two weeks. That means that my daughter’s child care center is closed. My little girl doesn’t get to go to child care, which she loves, and it gives her two meals a day. I am worried we will not have enough food.”

The Act would expand SNAP to provide food to households with children that would otherwise receive free or reduced-price meals if not for their schools being closed due to COVID-19. In addition, states would be allowed to request special waivers to provide temporary, emergency benefits to existing SNAP households; a proven policy that showed a positive impact during the economic downturn of 2007-2009.

**Creating emergency paid sick days and paid leave.** Many workers do not have access to paid sick days or may rely on those days for other family needs. The COVID-19 pandemic has created new challenges for families like Cate’s from Norfolk, VA:

> “I am a hospital (inpatient critical care) worker and a military wife. I have no sick leave or paid time off available, and I have three kids. School is cancelled for at least 2 weeks. This is insane. We can, and must, do better.”

In addition to the creation of emergency paid sick days for those diagnosed with COVID-19 or held under quarantine, the Act includes provisions allowing workers to care for a child that is unable to care for themselves due to the closing of a school, child care, or other care program as this crisis wears on. Both of these programs are critical in guaranteeing financial security as well as allowing individuals that have contracted COVID-19 the ability to convalesce without the fear of losing their job.

**Full federal funding of extended unemployment compensation.** There are many workers that have recently found themselves out of work due to public health related closures such as stadium support workers for professional sports teams, cruise ship support workers, hotel domestic staff, and child care providers. Child care workers are particularly susceptible to the economic downturn and we are concerned that, with the mandatory closure of child care centers and in-home child care, many providers that will go without pay. Jen from Fletcher, VT shares this concern:

> “I run a child care center, and we are following the lead of the Department of Health on when and if we close. Parents and staff are stressed. Staff are worried because they will not be paid, and families seem most worried about access to child care.”

The Act works to directly address the concern of COVID-19 related rises in unemployment as some states will be disproportionately impacted by public health closures. In the event that a state experiences 10 percent or more in their unemployment rate due to the virus, full federal funding will be
provided for Extended Benefits, which normally require 50 percent of funding to come from states. This policy provides stability for parents in the employment market as well as for states that may be taking on unexpected costs associated with managing COVID-19. By providing these additional funds, states can better accommodate stability and expansion in programs important to babies and toddlers such as Early Head Start, SNAP, and WIC.

**Increased federal funding for emergency medical assistance.** COVID-19 is placing significant strains on state Medicaid programs and new complexities for families living with specialized healthcare needs. Susan from Oxford, MS is dealing with this firsthand:

> “I have two medically complex children. If my husband and I get sick, there is almost no one who knows how to care for my son with the most complex needs. Plus, we have been required to requalify for his Medicaid. They changed the date, and now they want materials by next Wednesday. Unfortunately, however, everything is shut down, and I can’t get the required paperwork.”

If enacted, the Act would increase the share of the federal medical assistance percentage (FMAP) by 8 percent during the COVID-19 public health emergency. These additional funds will be key to ensuring that Medicaid beneficiaries, particularly infants and toddlers, have access to safe and affordable medical diagnostic and treatment services.

**We hope that you will act quickly to pass the Families First Coronavirus Response Act and send it to the President for his signature.** We consider the act to be a tremendous first step but do believe that much more must be done for infants, toddlers, and families that will address their immediate needs as well as infuse critical resources into communities that will likely be the hardest hit by the pandemic-related economic contraction.

COVID-19 has become a global event that will redefine our understanding of disaster preparedness. We have already experienced resource shortages and panic. Market contractions and public program instability will be felt most intensely by low-income families, particularly those with very young children. The Senate has the opportunity to provide needed stability to these families as well as the many others that be impacted by the pandemic. The Act is a good first step and sets the stage for lasting improvements to our disaster preparedness infrastructure as well as the social programs that protect our country’s most overburdened and under-resourced children and families.

To this end, we strongly urge the Senate to pass the Families First Coronavirus Response Act quickly and to continue to support policies that will strengthen foundations for all children and families during this challenging time.

Sincerely,

Dr. Myra Jones-Taylor Ph.D.
Chief Policy Officer
ZERO TO THREE