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ABSTRACT

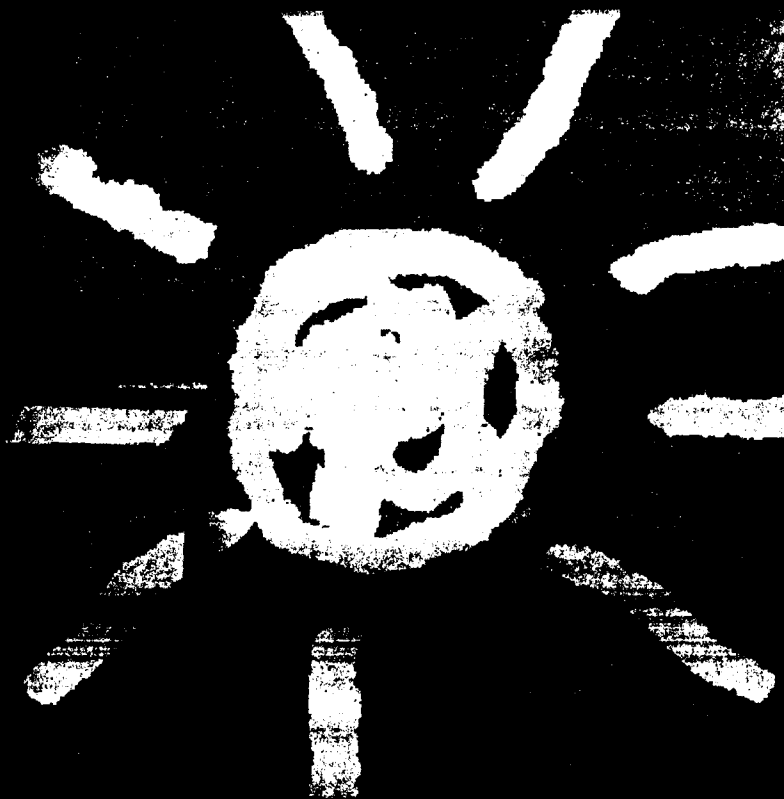
This report of the Quality 2000 Initiative documents the quality crisis in early care and education in the United States, discussing the reasons for this crisis and suggesting a plan for improvement. Part 1 of the report: describes the mediocre quality of care cited in the Cost, Quality, and Child Outcomes Study, the erosion of quality since 1980, and problems in staff training and educational levels; details the roots of the quality crisis; and maintains that the knowledge and political will to develop an effective early care and education system are in place. Part 2 discusses eight recommendations for developing this system: (1) use a wide range of approaches to achieve quality; (2) focus on goals and results for children; (3) place parents and families at the core of early care and education programs; (4) require staff to be licensed; (5) expand the content of training and education; (6) eliminate exemptions and streamline and enforce facility licensing; (7) raise new funds and set aside ten percent for quality and infrastructure; and (8) create local and state early care and education boards. Part 3 of the report, "Realizing the Vision," examines a range of existing initiatives or programs that can be built upon. This part also identifies three key strategies--conceptual exploration, comprehensive demonstration, and broad-based mobilization--and concludes with a call to action, suggesting who should do what to carry out the vision. The report's four appendices list task force and related meeting participants, consultant-partners, and commissioned working papers. Each part contains references. (Author/KB)

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NOT BY CHANCE

Creating an Early Care and Education
System for America's Children

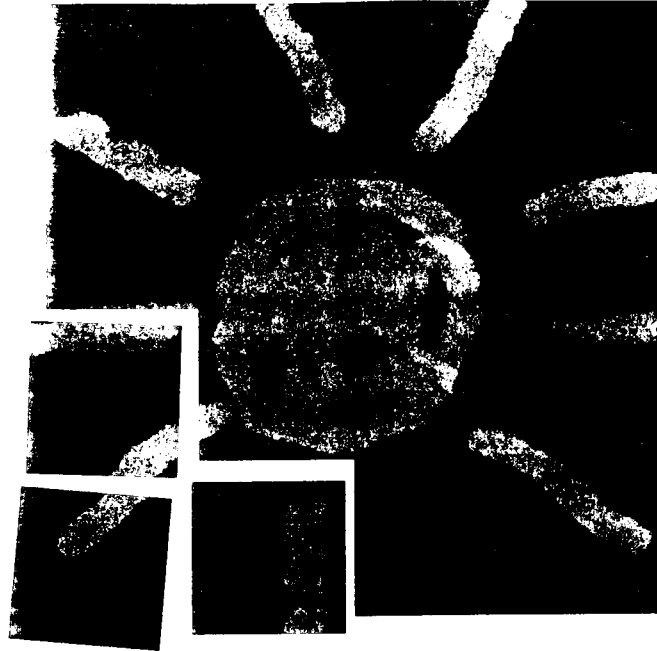
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Abridged Report

The Quality 2000 Initiative



NOT BY CHANCE

**Creating an Early Care and Education
System for America's Children**

Sharon L. Kagan

Nancy E. Cohen

**Abridged Report
The Quality 2000 Initiative
1997**

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Tanika sits at a long table with her classmates in the four-year-old room of the Early Learning Preschool. Next week is Thanksgiving, and the children are making turkeys out of brown and orange paper. Mrs. Poole shows them how to trace the shapes, cut them out, and paste them together. Most succeed in making their turkeys look something like the teacher's.

Nicole sits cross-legged on the rug, a sneaker in her lap, in Mrs. Ryan's living room, where she spends most of her days. She still can't tie her shoes. Mrs. Ryan shows her how to hold the laces and tells her to keep at it, but no matter how hard Nicole tries, the loops keep unlooping. Mrs. Ryan tells her to make three more tries. Nicole is frustrated, and confused about when one "try" is finished and the next one begins.

Any day now, five-month-old Andrew will be sitting up by himself. For now, he is propped up against cushions on the carpeted floor of the Shining Star Child Care Center. Jessica, who is responsible for the infant group, wants to be sure that Andrew doesn't topple over while she attends to two eight-month-olds and a toddler badly in need of a diaper change. Andrew shakes a rattle. He looks up expectantly, then shakes it harder. He begins to cry. Jessica tells herself that waiting tables would pay better and might be a lot less stressful.

n these settings, Tanika, Nicole, and Andrew—and millions of young children like them—spend up to 50 hours a week. In rooms like these across the nation—in child care centers, preschool programs, family child care homes, and nursery schools—American youngsters play and pretend, hear stories and have snacks, and fill the long hours between drop-off and pick-up. The children are used to these places; they have adult supervision; and—in most cases—their parents have selected the programs. To most casual observers, everything seems to be all right.

But everything is NOT all right. Today, an overwhelming majority of young children in child care spend their days in settings that have been found to be of poor to mediocre quality¹—settings that compromise children's long-term development. Preschoolers fare poorly, but infants and toddlers face dire situations, with two out of five spending their days in settings that threaten their immediate health and safety.² It's not just the children who endure difficulties. Families cannot locate quality services; program providers, though often having the knowledge, lack the resources to make needed changes; and policy makers are often confused about what to do to improve services.

Indeed, a growing number of Americans are concluding that America's services to its children and families constitute a national crisis . . . perhaps, as has been suggested, one of the greatest domestic problems our nation has faced since the founding of the Republic.³

Not By Chance: Creating an Early Care and Education System for America's Children, based on the work of the *Quality 2000* Initiative, is about these children,^a these parents and families,^b and these services. It documents the quality crisis in early care and education,^c showing that in this nation—in contrast to most other industrialized nations—good early care and education programs are beyond the reach of most families. *Not By Chance* discusses why such a pervasive crisis exists and suggests a plan for improvement. It offers a comprehensive response to the child care and early education dilemma by providing a visionary, long-range, and research-based strategy. Its eight actionable recommendations are predicated on, and dedicated to, the proposition that we can and must do better by American children—that we simply can no longer take chances on their—and our—future. *Not By Chance* suggests that we must create an early care and education system—because children matter—and because what we do for them matters immensely.

Not By Chance came into being with the support of many people. Foremost among them was *Michael Levine* of the Carnegie Corporation of New York, whose vision for the early care and education field is inspired, and whose concern for young children and quality programs is unfaltering. He recognized the imperiled state of early care and education, and created in *Quality 2000* an intellectual forum for a thorough re-examination of the challenges and opportunities before the field. He, *David Hamburg*, and *Vivien Stewart* understood, supported, and guided this effort. To them, and to the Carnegie Corporation of New York, we give thanks.

Other foundations joined the effort to support special issues. We gratefully acknowledge the involvement of *Valora Washington* and the support of the W. K. Kellogg Foundation for the results and outcomes portion of this work. Her courage in venturing forward on the child results journey is admirable. *Deanna Gomby* and the David and Lucile Packard Foundation gave support to advance thinking in the finance component of *Quality 2000*. We thank her and the Foundation for their help at a critical juncture on a key component of the *Quality 2000* effort. *Luba Lynch* and the A. L. Mailman Family Foundation graciously helped to support the dissemination efforts. *Stacie Goffin* and The Ewing Marion Kauffman Foundation were involved in an allied project on systems integration; many of the lessons from this effort found their way into our thinking and our work. *Quality 2000* thanks them as well.

We gratefully acknowledge the assistance of a group of colleagues who contributed their time and knowledge to this project. These collaborators provided visionary leadership, keen insights, and provocative ideas to the initiative—and also made it much more fun for us, the authors, to work on. *Martin Gerry* (of the University of Kansas) and *Cheryl Hayes* (of The Finance Project) helped us with the funding and financing issues. *William Gormley* (of the Georgetown Graduate Public Policy Program) consulted in the areas of government and business roles. *Nancy Kolben* and *Patty Siegel* (of the National Association of Child Care Resource and Referral Agencies) led the work on the essential functions of the infrastructure and on change strategies. *Anne Mitchell* (of Early Childhood Policy Research) was the lead consultant in the area of professional development. *Deborah Phillips* (of the National Research Council's Board on Children and Families) helped launch the project as a Co-Principal Investigator; later, she focused her efforts on the reconsidering quality component. *Sharon Rosenkoetter*



(of Associated Colleges of Central Kansas) worked on child and family results issues. And *Carol Stevenson* (formerly of the Child Care Law Center and currently of the David and Lucile Packard Foundation) helped formulate the investigation of facility licensing. We also owe great thanks to *Rima Shore* for editing this report.

Colleagues at the Yale University Bush Center in Child Development and Social Policy lent guidance and support throughout the effort. *Edward Zigler* contributed thoughtful insights to this work. *Eliza Pritchard* helped with the day-to-day work of the project, wrote several working papers, and assisted with early drafts of this report; we thank her greatly for guiding our thinking and remaining a smiling and steady presence throughout. *Michelle Neuman* contributed her expertise, patience, and fortitude throughout the final stages of this report. *Muriel Hamilton-Lee* and *Jean Rustici* contributed insight and consistent support through the entire process. *Jane Murray* supported the work of all—willingly, graciously, and effectively.

Our families lent ongoing confidence, encouragement, and support. In particular, we thank *Stephen Page* for his intellectual engagement of these issues and his ongoing support.

Perhaps the greatest credit, however, is due to our dear colleagues in the field, the good friends who willingly sat on task forces, wrote papers, reviewed recommendations, and wrestled with tough issues again and again. They are listed in the appendices. Their provocative questions constantly fed fuel to our thinking; their critical comments made the product better; their dedication to the young children, families, and professionals inspired and sustained our work. They are the spirit of *Quality 2000* and *Not By Chance*; it is only fitting that this report be dedicated to them.

Sharon L. Kagan
Nancy E. Cohen
August 1997

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hances are that unless a toddler is throwing a tantrum at the supermarket or the woman next door takes care of children in her home, most Americans have little day-to-day awareness of other people's small children. Chances are that most Americans, preoccupied with the demands of daily living, don't think about the early care and education system. Young children don't vote; they don't commit crimes; they don't join teams or win trophies. They rarely make headlines, and when they do, the circumstances are apt to be so dramatic—a baby snatched, a toddler trapped in a well—that their experiences are seen as exceptional rather than typical. In short, America's young children have received remarkably little attention from the public at large.

Why? Why is it that we, as Americans, proclaim dedication to the well-being of children, yet seem to be in a state of collective denial about the circumstances in which most youngsters spend their days? Why is it that we, as a nation, have not given children the child or health care, the supportive services, learning opportunities, or healthy communities they all need to succeed in school and grow into productive adults? Why is there a dramatic "disconnect" between our beliefs about children and the circumstances they face?

Not By Chance seeks to address these problems head-on by bringing to bear the best practices of experienced practitioners, the findings of current research, and the considered thinking of hundreds of parents, early childhood educators,

psychologists, political scientists, policy analysts, economists, finance experts, community organizers, and media specialists. Working collaboratively, scores of individuals have contributed to the evolution of thinking embraced in the *Not By Chance* report—thinking that is designed to reframe how we consider and deliver early care and education services to America's young children.

Stated most simply, the *Not By Chance* mission is that by the year 2010, high-quality early care and education programs will be available and accessible to all children from birth to age five whose parents choose to enroll them—and that these services will be supported by a well-funded, coherent, and coordinated infrastructure. This mission proceeds from the conviction that quality early care and education programs will not come into being by chance and will not proliferate without a viable, sustained, and integrated early care and education infrastructure. That infrastructure includes five essential elements: (1) *Parent information and engagement*—that parents have the information to make choices and the time to be engaged with their children's learning and their children's programs; (2) *Professional development and licensing*—that the adults who work with children are appropriately trained and credentialed so as to ensure children's maximal development; (3) *Facility licensing, enforcement, and program accreditation*—that the out-of-home facilities in which all children spend their days are adequately licensed

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so as to safeguard children's health, development, and well-being; (4) *Funding and financing*—that early care and education is sufficiently funded and financed to assure quality; (5) *Governance, planning, and accountability*—that the governance, planning, and accountability mechanisms for early care and education are sufficiently developed to sustain a system of efficient, quality services.

Not By Chance discusses children's programs and services along with these elements of the infrastructure. It posits an admittedly immodest vision for how America might proceed, recognizing that conventional thinking and strategies cannot evoke the kinds of reforms that are necessary to redress the decades of neglect that characterize American early care and education. *Not By Chance* thinks long-term—to the year 2010. As such, it does not offer a prescription for legislation for the 105th or 106th Congress, though some of the elements may be quite amenable to immediate legislative action. It is not about adding more services or more disparate programs; rather, *Not By Chance* sets new pathways for action.

Not By Chance not only suggests new ways of delivering services to young children, but also entirely new ways of thinking about youngsters and the programs they receive. *Not By Chance* suggests that in order to shift our services we must shift our thinking:

WE MUST THINK of early care and education as a single seamless system, not as a set of disparate, categorical, and idiosyncratic programs.

WE MUST THINK about services for children, their families, and their communities, rather than services for children alone.

WE MUST THINK of early care and education as encompassing family support and health, not only educational services for children.

WE MUST THINK about broad definitions of quality that encompass organizational climate and the quality of the infrastructure, rather than more narrow definitions that take into account only pedagogy.

WE MUST THINK about using concrete, age-appropriate, child-based results and goals for children and families—rather than just program inputs—as a means of accountability in early care and education.

WE MUST THINK about the professional licensing of individuals along with facility licensing as a means of improving quality services.

WE MUST THINK about collaborative advocacy by parents, professionals, and other community stakeholders, not by professionals alone.

WE MUST THINK about a long-term vision of early care and education, not a series of short-term solutions.

FINALLY, WE MUST THINK of improving early care and education as a challenge that hinges on rational analysis and planning, not on random acts of chance.

Given these ways of acting and thinking, some aspects of *Not By Chance* may be regarded as quite controversial; other ideas may be more readily accepted. Specifically, *Not By Chance* offers eight key recommendations and suggests that in order for significant change to occur, work on each must ensue. More detailed strategies accompany each recommendation. The strategies point a clear direction and provide a cohesive set of actionable items as locales, states, and the nation consider the development of an early care and education system, fully recognizing that states and communities will need to tailor the suggested strategies to meet their unique needs.

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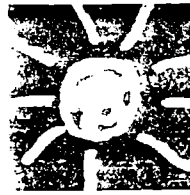


The vision, as expressed in the recommendations and strategies, is based on work in eight components: reconsidering program quality; defining the essential functions of the infrastructure; enhancing parent engagement; discerning appropriate government and business roles; considering new approaches to training and credentialing; examining facility regulation and licensing; determining alternate approaches to funding and financing; and moving to a results orientation. To tap the best resources in each area, *Quality 2000* established relationships with consultant-partners for most of the components (see Appendix A). The consultant-partners provided intellectual leadership and strategic guidance, helping to frame the work of their component. For some components, task forces were formed to pursue more in-depth work (see Appendix B); for others, a series of meetings was organized to survey the issues, explore key controversies, and identify promising strategies (see Appendix C). For each component, a series of working papers was commissioned to address critical issues (see Appendix D). This analytic work was conducted from 1992-1994, roughly. The synthetic phase, roughly 1994-95, focused on the integration of information both within and across components. Building on synthesis papers that were prepared for each component, *Quality 2000* staff, with assis-

tance from the consultant-partners, integrated the information across all eight components into a draft vision for a quality early care and education system. In 1996, with the draft vision in hand, *Quality 2000* embarked on its catalytic phase. Meetings were held with more than one hundred individuals and groups in early care and education and related fields. Comments were solicited at conference sessions, from personal interviews, and were incorporated into the final report. In addition to offering feedback to the vision, participants discussed possible action strategies for implementation.

In developing a vision for a quality early care and education system, *Quality 2000* and the *Not By Chance* report emanating from it have not sought to achieve consensus. Consensus on such broad and controversial issues might not be feasible or even desirable; a vision with which all could agree would probably not be sufficiently innovative to address the field's thornier, more intractable problems. As a result, not all who participated in the *Quality 2000* Initiative will agree with all the pieces of the vision in this report; yet this vision clearly builds on and integrates the ideas, suggestions, and comments of many contributors. In the final analysis, however, this report is the responsibility of the authors.

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Part 1

**THE QUALITY CRISIS:
REALITIES, ROOTS,
SIGNIFICANCE, TIMING**

THE QUALITY CRISIS

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THE REALITIES

Each day, 13 million American children are dropped off in early care and education settings, be they child care centers or family child care homes. This should be a heartening statistic, since research shows that high-quality early care and education can enhance the cognitive and socio-emotional development of all young children¹ and in particular of children from low-income families.²

But a growing body of research has established that few American children are enrolled in the kind of quality programs that can boost their chances for later success in school and in life. The Cost, Quality, and Child Outcomes Study found specifically that seven in ten centers provided mediocre care; one in eight was so inadequate that it threatened the health and safety of children.³ In family child care, a domain often remote from public view and considerably less studied, the situation is no better. Like child care centers, quality can vary, but overall, the percentage of programs judged to be of substandard quality ranges from 13 percent of regulated family child care homes to 50 percent of unregulated homes.⁴

The quality of care is even worse for infants and toddlers. Fully 40 percent of infant and toddler rooms in centers were found to endanger children's health and safety in the Cost, Quality, and Child Outcomes Study;⁵ a smaller study set this figure above 60 percent.⁶ These figures are particularly disturbing in light of the fact that infants and toddlers constitute the fastest-growing subgroup of children in early care and education

programs: half of all infants under the age of one are in some form of non-maternal care—most for 30 or more hours per week.⁷

The figures are also disturbing because the care children receive is steadily getting worse: recent research consistently documents a serious erosion of quality since 1980.⁸ Moreover, this drop in quality is taking place at the very time when the nation's total number of young children is increasing dramatically. In the 1980s alone, our nation's population of children under the age of five rose by 28 percent.⁹ Just as the population of young children is growing, so is the demand for early care and education. More than half of all mothers return to work within a year of their babies' births,¹⁰ so that as children enter the age of formal schooling, 80 percent of them have experienced some form of out-of-home care in their early years.¹¹ Early care and education, once the concern of few, has now become more nearly the rule than the exception, leading a national task force to recommend universal preschool for all children ages three to five.¹²

Though resources for early care and education are increasing, they are not nearly able to keep up with current and projected demand. As a result, the system is stressed, creating greater inequalities of access, availability, and fair and efficient distribution of services. The most severely affected are poor children—who now account for one-quarter of all young children.¹³ Although they have the greatest need for quality early care and education, and stand to benefit the most, poor children often have the least access to programs. For example:

- Children from low-income families are the least likely to attend early care and education programs: only 50 percent of children living in households with incomes of \$10,000 or less regularly attend early care and education programs, compared to over 75 percent of children in households with incomes in excess of \$75,000.¹⁴
- Government subsidies allow some children from low-income families to enroll in early care and education programs, but funds are limited and do not allow all eligible families to secure care for their children. Only small percentages of eligible low-income families receive government assistance in paying for early care and education.¹⁵
- Most children from low-income homes who are enrolled in preschool—59 percent—attend programs that are unlikely to provide the full range of child development, health, and parent services needed to support their school readiness.¹⁶ Working-class and lower-middle-income families are also likely to rely on inadequate care.¹⁷

The problems in early care and education are legion for poor children and families, but they impact all young children. In many states, individuals who work with young children are not required to hold any certificate or degree;¹⁸ many have only ten clock hours of training.¹⁹ Not surprisingly, staff turnover rates of 41 percent are common. Many centers and family child care homes are not linked to other community services, including health and social services. Ongoing training is sporadic and of uneven quality.²⁰ About 40 percent of center-based programs are legally exempt from regulation.²¹ Of family child care providers, as many as 80 to 90 percent are not regulated and have no contact with regulatory or supportive agencies.²² Parents often pay large percentages of their weekly wages for child care, while early care and education staff forego wages, parents forego quality, and worse, children forego opportunity.

These conditions are not new; they have festered for a long time. Their roots are important to understand if we wish to create a system that serves children not by chance or happenstance—but by design.

ROOTS OF THE QUALITY CRISIS

The quality crisis stems, in part, from historical and cultural forces that have shaped American attitudes toward non-familial supports. The American ethos has historically placed a high premium on industry and self-reliance. Public institutions were expected to act when families failed, providing services designed to compensate for families' weaknesses. With the exception of schools and libraries, this deficit approach has dominated human service delivery generally and pervades early care and education specifically. For example, infant schools—a form of non-parental care—were established early on with the mission of offering personal and moral lessons to the children of the indigent, furnishing the guidance that impoverished

parents were deemed unable to provide.²³ Later, during the depression of the mid-1870s, public kindergartens were established for the children of the needy with the aim of improving their nutrition, cleanliness, health, and work habits.²⁴ Child

care continued on this deficit track for many years, receiving federal attention and cash infusions for non-poor children only during times of national crisis. This pattern persists: today, the government supports child care for poor children

Programs for young children are still regarded as an ancillary service, despite the fact that millions of youngsters have working parents and need early care and education outside the home.

primarily, while parents of non-poor children pay for child care, often devoting substantial percentages of their earnings to it. Indeed, early care and education is still regarded as an ancillary service, despite the fact that many young children have working parents and need some form of early care and education.

Over the last decade, scholars have argued persuasively that the quality crisis in early care and education may also be rooted in the profound ambivalence within American culture toward mothers and their care-taking roles. On the one hand, we revere the primacy and privacy of motherhood and family, resisting policies and programs that appear

Parents are confused. Providers often view each other as competitors rather than collaborators. Fragmentation characterizes early care and education. The result is a non-system of services fraught with inadequacies, inconsistencies, and failures.

to intervene in domestic life. Indeed, many Americans continue to believe that out-of-home care is harmful, despite evidence to the contrary.²⁵ On the other hand, we dismiss the care of young children as mindless, custodial work, devaluing the

contributions of stay-at-home mothers as well as paid caregivers. We pursue national policies that lead to non-parental care for more and more young children, by favoring "workfare," for example, or by not providing paid parental leave.

These historical antecedents have left a profound legacy, adversely affecting the quality, durability, and distribution of early care and education services. Programs have emerged haphazardly and have been funded erratically; they have emanated from different legislative mandates, funding streams, regulatory systems, and administrative agencies. Some programs fall under the jurisdiction of state departments of education; others are overseen by departments of health; and

still others are run by departments of welfare or social services.²⁶ In fact, a recent study documented 90 different federal programs sitting in 11 federal agencies and 20 offices.²⁷ State-supported programs are just as inconsistent, varying from state to state and even within states.

The consequences are many. First, parents are confused. Because the process of finding and selecting programs tends to be so chaotic and nerve-racking, many parents end up settling for programs that are reasonably convenient and affordable, rather than holding out for high quality. Second, because resources are so scarce, providers often view each other as competitors rather than collaborators. Programs find themselves competing for space, resources, and even children.²⁸ Third, fragmentation characterizes early care and education at every level. The many scattered early care and education programs do not function as a system, so that investments are not optimized. Little comprehensive planning, data collection or links with allied services exist. The result is a non-system of services characterized by heavy demand and high expectation, but fraught with inadequacies, inconsistencies, and failures.

SIGNIFICANCE

Certainly, these conditions are not desirable, but why? Why do they matter for children, families, and the nation, and what matters most? Where should our attention be focused?

QUALITY MATTERS

Quality programs contribute significantly to children's development. Indeed, there is growing recognition that early care and education programs are important precursors of school success and of children's later success in life. In part, this is due to the fact that early care and education programs have an impact precisely at the point when children's development is rapid, dramatic,

and multi-dimensional. Neuroscientists have established, for example, that the way the human brain develops during the first years of life has a significant impact on later learning and intellectual growth, and that brain development during this period is quite susceptible to environmental influence—including the kind of care and stimulation that children receive both at home and in out-of-home settings. “We can now say, with far greater confidence than ever before, that the brain responds to experience, particularly in the first five years of life. That means that by ensuring a good start in life, we have more opportunity to promote learning and prevent damage than we ever imagined.”²⁹

High-quality early care and education programs offer this good start in life by helping children engage in relatively complex play, socialize comfortably with adults and other children and develop important physical, language, and cognitive skills.³⁰ Many of these positive effects may linger and contribute to children’s increased cognitive abilities, positive classroom learning behaviors, long-term school success, and even improved likelihood of long-term social and economic self-sufficiency.³¹ In contrast, children attending lower-quality programs are more likely to encounter difficulties with academic and social development and are less likely to reach expected levels of development.³² Poor-quality programs also undermine the development of children’s skills, with youngsters in poorer-quality programs—irrespective of family income—demonstrating less language and pre-mathematics ability and less positive self-perception than children in higher-quality classrooms.³³

Quality programs matter for families, as well as for children, because such programs allow parents to focus on employment and/or training responsibilities. When children attend quality programs, their parents are not preoccupied with concerns about their children’s safety. Further, parents whose children are enrolled in quality early care and education are less likely to have to

deal with break downs in those arrangements.³⁴ In a study by Hofferth et al.,³⁵ 15 percent of working mothers reported losing some time from work during the previous month because of a failure in their regular early care and education arrangement. Meyers³⁶ found that the odds of dropping out of a welfare-to-work program during the first year were doubled for mothers who were dissatisfied with their early care and education practitioner or program, who were using arrangements that did not meet established guidelines regarding child-staff ratios, or who did not trust the practitioner or the safety of the program. Families also benefit from the information, support, and direct services they obtain from quality programs.

Finally, quality matters for the nation, as well as for children and families. Decades of research now affirm that early care and education programs make good economic and social sense.³⁷ Economically, as we have seen, the country benefits from the increased productivity of working parents whose children are in high-quality care. Society also benefits economically because dollars invested early save on later expenditures. The 27-year follow-up study of participants in the Perry Preschool found that the children who attended this program were more likely than non-participants to graduate from high school, earn higher wages, and own a home. Participants were less likely to have committed crimes or received welfare.³⁸ Indeed, investments in quality early care and education save society future costly and lengthy expenditures for incarceration or welfare.

America also benefits because quality programs help children learn to thrive in our increasingly multiracial, multicultural, and multilingual nation.³⁹ Understanding, tolerance, and appreciation of people who are different start early, as do bias, racism, and hatred. Playing with and learning from diverse adults and children in early care and education programs, and experiencing respectful patterns of interaction, help young children grow up to be adults who thrive in a diverse world.⁴⁰

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THE INFRASTRUCTURE AND THE SYSTEM MATTER

Quality programs do not come into being automatically, nor can they be achieved in isolation. Quality programs must be part of a quality system. This system is composed of (1) *programs* that touch the lives of children and families day by day, and (2) the *infrastructure*—those key elements that act behind the scenes to support the programs. Elements of the infrastructure include:⁴¹

- Parent information and engagement
- Professional development and licensing
- Facility licensing, enforcement, and program accreditation
- Funding and financing
- Governance, planning, and accountability

Few would argue that these elements are unimportant, yet in reality, few such infrastructural supports exist. While attending to these elements individually is necessary, it is not sufficient. The elements of the infrastructure must work together. For example, requiring more training without increasing compensation will lead to staff turnover and may, in the long run, lower rather than raise program quality.⁴² Similarly, if regulation and accreditation are enhanced without attention to consumer information, parents might fail to discriminate between high- and low-quality programs, providing little incentive for programs to strive toward higher standards. Moreover, elements of the infrastructure must be linked with direct services. For example, if a well-qualified practitioner cannot locate employment and if programs for which the practitioner is qualified have staff vacancies, the early care and education system is not functioning well; there is a mismatch between the training and placement functions.

GOVERNMENT INVOLVEMENT MATTERS—BUT IS NOT A PANACEA

Americans and their elected officials are currently embroiled in a debate over the role of govern-

ment in our society. Polls tell us that many Americans across the nation believe government to be part of the problem, not part of the solution. In contrast, others believe that only a strong government can safeguard our most vulnerable citizens and ensure equity. This controversy is raging as well in the early care and education community. Those who want less government tend to view early care and education as a market commodity whose dynamics should be left to competition and consumer choice; they oppose active government investment and regulation in early care and education. In contrast, those who call for increased government involvement assert that government has a responsibility to provide basic protection for children and families, in the form of investments in regulation and other standards and supports. Indeed, there has been a long history of efforts to stipulate quality standards in federal legislation.⁴³ Proponents of a robust government role argue that government has not used existing knowledge about child development to enhance the quality of early care and education services. To date, this knowledge and research has had little discernible impact on policy.

Critics assert that current government supports for early care and education are uncoordinated and inefficient. Both states and localities are involved in facility licensing; and federal, state, and local governments are all engaged in funding—helping parents to pay for programs and investing minimally in quality enhancements. There is little role delineation according to level of government. Given this attention from multiple levels of government, one might imagine that funding and regulation would be adequate. The reverse is true. In comparison to investments in the education of school-age students, public support for early care and education is minimal. At the same time, some aspects of early care and education are overregulated by more than one authority, and other aspects are woefully underregulated—virtually ignored.

While the role of government in early care and education is debated, few suggest that government alone can guarantee a quality system.

Quality early care and education requires the investment and support of parents, business, and community organizations. Parents, who currently pay three-quarters of early care and education costs, play a critical role as consumers and purchasers of services. Business, too, is a supporter and consumer of early care and education: it has become more active in early care and education in recent years, investing in quality programs and the infrastructure. Businesses are also making their work places family-friendly. In addition, community organizations, including houses of worship, United Ways, and volunteer and civic organizations contribute funding and in-kind resources to early care and education.⁴⁴ Their continued involvement is important both because their contributions make a difference for some children and parents, and because these collaborations knit the fabric of strong communities. In short, effective early care and education demands dedication and investment from diverse parties.

TIMING

To be sure, American early care and education faces serious, large-scale problems that require creative, forceful, meticulously considered solutions. The good news is that as a nation, we now have the knowledge and know-how to begin to shape these solutions. A growing body of research has documented the kinds of policies and programs that make a difference for young children, while providing guidance on how to implement them. This fresh knowledge has opened up new avenues for thought and action, fostering the development of both a broad, bold vision and the specific, practical strategies needed to realize it. To a greater extent than ever before, policy makers have the research base needed to ensure the emergence of a system—based on reason and knowledge, not happenstance or chance that has heretofore characterized the evolution of American early care and education.

Not only do we have the knowledge to launch change, but America is amassing the political will to do so. Concerned about the nation's productivity in a global economy, political and business leaders are voicing increasing concern about our children's early years, and are demonstrating readiness for action. They are beginning to see quality early care and education services as a cost-effective way to assure a stable, well-prepared work force in coming decades.⁴⁵

At the same time, national education reform has broadened its focus to include the early years. Parents and Americans in general are realizing that the early years are critical to development. The first National Education Goal—that all children will start school ready to learn—has highlighted the crucial relationship between early care and education and later educational achievement, and has accelerated interest in young children by educators, policy makers, the media, and parents. Countless volumes on parenting and readying children for school line bookstore shelves, and more parents are engaged in parenting education efforts than ever before.

Renewed parent and public interest in early care and education, and serious concerns about the quality of services for children, have helped to foster a sense of urgency about the need for change within the early care and education field itself. Leaders in the field are looking beyond individual programs and beyond classroom practice; they are beginning to address systemic change. Communities and states across the nation have undertaken efforts to integrate early childhood services with one another, and with health and other services. Comprehensive visions of an early care and education system have been considered.⁴⁶

All of this suggests that the time to act is now. Decades of practice and research have produced the knowledge needed to strengthen the quality of programs and of the infrastructure. Significant professional advances have led to concrete strategies for change, particularly in the areas of pedagogy and child development. The

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field has developed strong, widely recognized program and curricular models emanating from numerous professional organizations and the federal government. Early childhood researchers have gained in-depth understanding of children's early years, identifying developmental milestones in the physical, emotional, social, and cognitive domains. Indeed, the quality crisis cannot be attributed to a lack of knowledge. Rather, deeply entrenched approaches, practices, and values, as well as long-standing social, organizational, and political structures, must be tackled head-on. We must use new knowledge and growing political

and public will to advance our thinking and spark significant, new action. Recommendations regarding how to accomplish this follow.

The next section of the report discusses the eight recommendations, which are grouped by theme: the Programs (Recommendations I and II); the Parents (Recommendation III); the Practitioners and Places (Recommendations IV, V, and VI); the Purse, the Public, and the Power (Recommendations VII and VIII). The report concludes with Part Three—a section on how the nation might go about implementing the vision. ☀

Part 2

THE QUALITY OF EARLY CHILDHOOD EDUCATION AND CARE

Scientists and scholars now recognize that high-quality programs have a better chance of promoting young children's healthy development, both during the preschool years and long after, than they previously suspected; by the same token, the harmful effects of low-quality programs can be more serious and long-lasting, and harder to reverse, than previously thought. But how do we define quality? How should quality be measured? What approaches are likely to boost quality? How can parents, families, and staff play a role in quality enhancement? What kinds of reform in finance and governance can help to solve the quality problem? The following eight recommendations address these issues. The specific strategies that can be used to carry out these recommendations are presented only briefly here, but are elaborated in the full report.

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THE PROGRAMS: RECOMMENDATIONS I AND II

As Mike Taylor walks back to the car, having dropped off his twins at the Elm Street Child Care Center, he wonders what makes him feel so good. The center itself is inviting and well maintained, and the classrooms are cozy with rugs and armchairs, and have interesting things to look at and explore. He likes the feel of the place—the way all three of them are welcomed each morning, as if the teachers and kids have been waiting just for them; the way they are all pulled into whatever project is underway; the conversation that weaves through every activity; the peace of mind he feels as he waves goodbye. And he likes the way the teachers have clear goals for the children and seem to have a real sense of what they want children to accomplish. But there's something else, too, and he can't quite put his finger on it . . .

We seem to be able to sense when quality exists in early care and education settings, but there is also something strangely elusive about it. What is it that puts children so much at ease? Why does Mike Taylor feel that peace of mind? Over the years, researchers have tried to explain elements of quality; often they have cited group size, child-adult ratios, and teacher preparation, education, compensation, and turnover. To be sure, these are important factors, but do they really tell the whole story of quality? Do they fully account for why some children thrive in early care and education programs and others do not? Do they really explain why some centers and some family child care homes achieve

good results for the children entrusted to them and others do not?

Quality 2000 examined these issues and concluded that there are numerous paths to quality—a wider range than previously has been assumed. We put forward two recommendations for improving program quality in the United States: first, that we take a range of innovative approaches to creating the kinds of programs that can achieve the desired results for children; and second, that we define and assess the results and goals desired for children as a consequence of their participation in early care and education programs. These recommendations are rooted in the conviction that quality programs must not be left to chance.

RECOMMENDATION I: USE A WIDE RANGE OF APPROACHES TO ACHIEVE QUALITY IN FAMILY CHILD CARE AND CENTER-BASED PROGRAMS FOR YOUNG CHILDREN AND THEIR FAMILIES

By the year 2010, all family child care and center-based programs will use a wide range of proven approaches for achieving quality—approaches that allow staff flexibility to use resources creatively and cost-effectively and to address all domains of development—including health—effectively.

Quality 2000 has documented an urgent and pervasive problem of quality in American family child care homes and center-based programs. The questions are: what should we do about it, given the massive number of programs throughout the country and the diversity among them? How can the fabric of services delivered to young children be strengthened? Fortunately, while the overall quality of American programs is poor, we can learn from many examples of inventive strategies that have raised program quality at numerous sites both here and abroad. Many of these efforts do not limit their focus to the interactions between adults and children, though to be sure, these are critical; they focus as well on the nature of the total setting, the organizational patterns within that setting, and the ways in which services meet the needs of individual children. None of these approaches works well in all settings, and each must be tailored to the context in which it is used. Improving quality, then, means acknowledging diverse approaches to quality, while fostering the exploration and implementation of fresh ideas and strategies. Improving quality means being open to experimentation and

adaptation, while fully recognizing that the needs of 21st century children may well be different from those of children living in decades past. It means using resources creatively and flexibly.

State-of-the-art practice suggests that a variety of approaches to organizing staff and children can result in quality programs. Several very different approaches are discussed below.

Give programs more leeway in deploying staff and grouping children: Those who manage and work in early care and education programs should have at their disposal alternative, more flexible approaches to deploying staff and grouping children. All programs, for example, should consider working with children in mixed-age groups. Research done in Sweden and Britain, as well as in a handful of programs in this country, show that mixed-age groups are viable in centers and can have important benefits for children. Children's learning and socialization seems to be accelerated in mixed-age groups; older children learn about leadership and responsibility and have the opportunity to consolidate their learning, while younger children learn new skills and are motivated to challenge themselves.¹

A strategy to be researched might address the viability of according programs the flexibility to assess the relationship between increased child-adult ratios and increased staff requirements. While traditionally, child-adult ratios have been seen as a key to quality,² recent research has questioned whether child-adult ratios, as a single, isolated variable, are quite so critical. Love, Ryer, and Faddis³ found

These recommendations are rooted in the conviction that children's futures must not be left to chance.

that increasing ratios from 8:1 to 10:1 for three- to five-year-old children in California did not substantially affect program quality. Other studies have found that compensation, group size, and staff turnover may be equally important predictors of quality.⁴ The point is that it might be possible to alter ratios for three- to five-year olds under certain conditions—(e.g., more well-trained, more stable, and more well-compensated staff), as is the case in

Improving quality means being open to experimentation and adaptation, while fully recognizing that the needs of 21st century children may well be different from those of children living in decades past. It means using resources creatively and flexibly.

selected other nations.⁵ America needs to understand how this change might play out, given the diversity of children and settings in our nation. It is possible that increasing ratios and increasing staff qualifications could result in cost savings, which could be

used to increase staff compensation. This idea demands carefully controlled research to explore the programmatic and fiscal effects of raising child-staff ratios for preschoolers when staff are well qualified. *Under no circumstances should this idea be construed to support changes in state child-staff ratios and staff preparation requirements before the consequences of this approach in the United States are understood.*

Focus on improving the overall organizational climate: The organizational climate of early care and education programs should create a positive, mutually reinforcing environment for all of the interactions that take place.⁶ Programs should nurture staff, parents, and families, while fostering alliances among all these partners.⁷ Staff who are valued and treated well are more likely to create environments that value children, parents, and families—environments that are conducive

to enhancing child development and supporting parents and families. In turn, parents who feel welcome in programs and feel that their concerns are understood and addressed will participate more freely and interact with staff more cordially.

Increase cultural sensitivity: The increasing diversity of our society means that practitioners must be sensitive to multiple populations, sending the consistent message that the program and its staff value the ethnic, cultural, racial, and linguistic diversity of children and families. Whether young children feel accepted or alienated in early care and education programs sets the stage for subsequent attitudes about, and performance in, school.⁸ To that end, young children need adult role models from their own culture, as well as exposure to people who are different from them; this promotes cross-cultural understanding and respect among children.⁹ As with other areas of practice, there is no one approach to serving children and families from diverse cultures and ethnic backgrounds. In fact, flexibility in practice—offering children many ways to demonstrate their learning, many ways to participate in classroom activities, and many ways to work interactively with adults and other children—are particularly appropriate in working with diverse groups of young children.¹⁰

Increase the number of accredited programs: Accreditation is yet another approach to improving quality in programs, by uplifting good programs to excellent ones. Research indicates that accreditation—a voluntary process of self-assessment and outside validation—significantly raises program quality and that accredited centers provide higher-quality services than non-accredited programs.¹¹ The field has enthusiastically embraced accreditation not only because it typically sets higher standards than facility licensing, but also because the process offers numerous opportunities for self-assessment and reflection, and thereby promotes quality and professional-

ism. Moreover, accreditation does not involve "policing."¹² To expand existing accreditation efforts, additional incentives should be provided to encourage programs to become accredited. In addition, accreditation requires programs to improve continuously over the years, and to be periodically revalidated; the revalidation process needs support. Additionally, add-on specialties that encourage programs to expand their services and capabilities could be developed as part of an expanded accreditation effort.

Create environments that explicitly support children's healthy development: Early care and education programs must make special efforts to address the physical and mental health needs of all children, especially those with special health needs. Building on the work of Healthy Child Care America,¹³ early care and education settings either need to link children to health services or provide them directly, assuring that all children have up-to-date and easily accessible immunizations,¹⁴ quality health, dental and developmental screening and follow-up, and to health and mental health consultation for all families, children, and workers. Nutrition education and nutrition services must be made available, as should health and safety education programs for all children and their families.

Link programs with other community resources—health, mental health, and social services—and support the expansion of resource and referral efforts: Early care and education programs should collaborate with one another and with other services for children and families (such as social, health and mental health services, job training and housing programs, schools and other organizations that serve children and families) to ensure that the comprehensive needs of children and families are met. Linking with resource and referral agencies, early care and education programs can also work with one another to facilitate the transitions children and

families make among programs. Resource and referral agencies can help to address unmet needs, expedite service delivery, minimize duplication, coordinate training, and assure smooth transitions for children and families. By expanding the number of and support for resource and referral agencies, linkages can also help to demystify "the system" for parents, helping them negotiate the confusing social service maze, building their self-confidence, and making them stronger advocates for their children. Moreover, resource and referral agencies can work to promote critical health linkages for children, families, and programs.¹⁵




Link family child care programs to supportive resources, including family child care networks and centers: Family child care is highly decentralized, and providers—many of whom work longer hours than their counterparts in centers—tend to be isolated. To combat this, family child care providers in the United States and some European countries have affiliated with supportive local agencies.¹⁶ Such affiliations may be informal or formal, and can include peer support and mentoring, referrals, training, home visits, hotlines, newsletters, equipment and toy lending, help with starting a family child care home and becoming regulated, and help with becoming accredited.¹⁷ At the more formal end of the spectrum, family child care providers link with each other and core organizations to form family child care networks or systems.


In some cases, family child care support organizations might also offer services to "kith and kin" providers,^d who would not be required to be licensed. Kith and kin providers include people who care exclusively for children who are related to them, as well as people who care for the children of only one friend or one unrelated family. These providers often identify themselves more as parents than early childhood professionals,¹⁸ consequently, family child care support organizations should work closely with parent and family support organizations in communities to


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offer appropriate services. Many American children are cared for by kith and kin, and as welfare reform takes hold, many more children are likely to be in these care arrangements. Providing supportive services for these providers is therefore an important key to advancing the quality agenda.


STRATEGIES

-  ***1.1. Increase the use of mixed-age groups in center-based programs, and continue to support mixed-age grouping in family child care homes.*** Training and education for staff need to be revised significantly to help practitioners understand how to work with groups of children who vary more widely in terms of ages, abilities, and interests. In particular, the implications of mixed-age groups for increasing the supply of high-quality, relatively affordable infant care need to be explored.
-  ***1.2. Promote flexibility in how staff are deployed during the day.*** Researchers, practitioners, and regulators need to identify ways for state facility licensing regulations to allow programs to deploy staff in different ways throughout the day, as appropriate for specific activities, while maintaining close staff-child relationships and quality.
-  ***1.3. Pilot and carefully examine the results from controlled research studies in which both staff training and child-staff ratios are increased for three- to five-year-olds.*** Research is needed to determine how ratios and staff training and education can be adjusted to accommodate one another; in other words, can practitioners with more training and experience effectively handle more children during certain periods of the day? Research also needs to identify the point at which alterations in ratios compromise quality for children and families. Policies should not be changed until this research has been completed and is fully understood.

 ***1.4. Improve the organizational climates of early care and education programs, making them more supportive of staff and parents.*** Researchers and practitioners need to identify the working conditions that matter most to practitioners, and pinpoint related best-practice approaches. To foster more parent involvement and enhanced staff-parent interaction, the field can build on the kind of parent engagement and equality-based practices that characterize the family support movement, as well as some model early care and education programs.

 ***1.5. Promote staff development in cultural sensitivity and cultural pluralism.*** Children, staff, and families need opportunities to identify and understand their culture and ethnicity, to understand their own roots, to reflect on their own culture and biases, and to learn about other cultures. Opportunities for the exploration of cultural diversity should be part of the pedagogy of the program. Further, staff should come from the communities served by the program, making as many community links as possible.

 ***1.6. Increase the number of accredited programs.*** Accreditation is a critical tool for raising the quality of early care and education programs, and resources should be provided for its expansion. A broad-based consumer education campaign on the value of accredited programs should be launched. At the same time, the accreditation process should make continuous improvement a requirement for continued accreditation status. The possibility of streamlining the accreditation process should be considered if this can be done without sacrificing quality.¹⁹

 ***1.7. Increase attention to health services and health education.*** Sometimes overlooked, health services (including dental, nutritional, mental, and physical health) are critical to fostering children's development and are an essential component of quality early care

and education programs. Such services should encompass screening, direct services, and health education for children, families, and providers.

1.8. Promote service and program coordination within early care and education and across various fields and agencies to promote children's full development. Early care and education programs should initiate and join efforts to coordinate community resources to meet child and family needs. For example, coordination between early care and education programs and family support programs is already occurring in some communities²⁰ and needs to be expanded. Further, linkages with health care need to be augmented, if children's full range of development is to be maximized. In addition to linking with these services, early care and education needs to create linkages among its own programs to foster efficiency, cost-effectiveness, and collaboration. Such efforts must reduce fragmentation and acrimony among providers by fostering the development of durable collaborations that engage in joint planning, joint professional development, joint purchasing, job trading and sharing, and cross-program transition activities.

1.9. Expand the number of and support for resource and referral agencies. Resource and referral agencies perform pivotal functions within communities, linking parents with services, linking programs with one another, coordinating and providing training for parents and staff, and serving as hubs for service coordination. Such agencies should be expanded and regarded as an essential core of the early care and education infrastructure, with particular focus on enhancing the role of resource and referral agencies in promoting consumer education and healthy early care and education environments for children.

1.10. Support the development of family child care support networks, and the linkage of family child care homes to centers. Preventing family child care from functioning in isolation while providing multiple routes for support will enhance quality in this increasingly popular sector of the early care and education system. Such linkages should be formalized, with all family child care homes being linked to some support services.

RECOMMENDATION II: FOCUS ON GOALS AND RESULTS FOR CHILDREN

By the year 2010, clear, age-appropriate goals and results for children will be developed. These goals will be composed of the skills and knowledge that children should be able to demonstrate across the domains of development (social, emotional, physical, cognitive, and language), and will take into consideration the child, family, and community conditions that promote such development. Appropriate child-friendly measures to assess the accomplishment of the goals will be developed.

Throughout America, there is currently a new consideration of gauging quality in terms of the results that programs or interventions produce for children and families.²¹ This trend reflects the fact that across numerous sectors of American society, success is increasingly defined in terms of results. The corporate sector, for example, measures economic success in terms of profits; the process is important, to be sure, but only as it affects the bottom line. In education and human services, success is being measured not in terms of the number or nature of services provided, but in terms of positive changes for the recipients or consumers (such as sustained employment, improved physical or mental health, improved work or school performance).

In early care and education as well, there is a need to consider placing a greater emphasis on results for the purposes of program planning and improvement, as well as for purposes of more effective evaluation and accountability. But this raises a critical unresolved question in the field: does quality inhere in the characteristics of a program, or in the results that accrue to the children and families as a consequence of their participation? To date, researchers have generally focused on the nature of programs—as measured

In early care and education, there is a need to consider placing a greater emphasis on results for the purposes of program planning and improvement, as well as for purposes of more effective evaluation and accountability.

by a variety of input variables (such as child-adult ratios, group size, staff training and education), and the manner in which services are delivered (such as the warmth of adult-child interactions).²²

Because these studies have demonstrated a strong correlation between quality

and inputs, it has been argued that inputs can serve as a proxy for quality and that measuring outputs may be unnecessary.

The persistent reliance on inputs—and a corresponding reluctance to focus on results—stems from two main concerns. First, when standardized measures have been employed, the information they have generated has often been misused.²³ The widespread use of standardized and readiness tests has led to the mislabelling, miscategorizing, and stigmatization of children, especially youngsters whose primary language is not English and children from low-income families.²⁴ In some districts, these practices have resulted in delayed school entry or enrollment in alternative “transition” classes of unsubstantiated value for up to 50 percent of all children.²⁵

Second, there is consensus neither about which results are most important for young children, nor about how to measure results. Many childhood educators and developmentalists worry that only cognitive knowledge and skills will be measured, and that developmental domains that are more difficult to capture in standardized assessments—such as health and physical development, socio-emotional development, language development, and approaches toward learning—will be ignored. They note that assessments of young children may be skewed by children’s inexperience in performing in testing situations, and by the highly episodic and developmental nature of their learning.²⁶ Moreover, many challenge the reliability, validity, and cultural sensitivity of existing assessment tools, questioning if existing instruments can be altered, or if new instruments must be created to ensure fairness and accuracy.²⁷

Despite these very legitimate concerns, a shift toward child-based goals and results—an approach that focuses on children’s development and what children can do rather than on what they lack or what the program provides—has many benefits. By defining results clearly, for example, practitioners working with young children can tailor their efforts more precisely to achieve the desired results for individual youngsters. In this way, children’s developmental needs become the basis for pedagogy—not the number of hours they attend or the number of curriculum units to which they are exposed. Moreover, when goals and results are specified, they can become the basis for evaluating programs, providing the kind of feedback that can help programs make critical decisions and raise quality.

Additionally, developmental and child-based goals and results can be helpful in assessing the overall status and progress of young children in communities, states, and the nation, holding these entities accountable for public investments in early care and education.²⁸ Once they have solid information about the extent to which chil-

dren are, or are not, achieving results, parents, practitioners, and the public can more effectively pressure decision makers at all levels to strengthen services. Moreover, as programs, communities, and states begin working toward similar goals, they can more easily learn from each other about what works—adapting one another's successful approaches.

Moving to child-based goals and results offers numerous benefits, but it also involves significant challenges. There are serious questions about how developmental, child-based results would be defined, about whether they would actually stress strengths rather than deficits, and about whether they would gauge progress across the developmental domains. Particular concern has been raised about emphasizing results in a number of specific contexts: when measuring results for children younger than age three and children who are ethnically, culturally, and linguistically diverse; when the data may be used to make "high-stakes" decisions concerning children's placement (including retention); and when results may be used as the basis for decisions about resource allocation, such as merit pay for teachers or levels of program reimbursement.²⁹

For all these reasons, a move to child-based results should take place *only if*:

There is broad participation in the identification of developmental outcomes and child-based results: Results that will be useful to the nation need to be agreed upon by a broad constituency, including parents, policy makers, practitioners, and researchers. Politicians, government administrators, business leaders, and citizens have meaningful contributions to make in the development of results as well. Given the discomfort of many in the early care and education community regarding a shift to child-based results, it is especially important that discussions of results involve diverse groups of practitioners and parents.

Appropriate results are identified: Organizing results by curriculum area (such as science or math) may be appropriate for older children, but needs to be examined critically where younger children are concerned. Learning for young children is less oriented to mastering subject matter than to gaining developmental competence in the areas of physical well-being (health) and motor development; social and emotional development; approaches toward learning; language usage; and cognition and general knowledge.³⁰ The process of defining results must take into account the fact that young children amass knowledge through integrated hands-on experiences; it must also reflect the existing realities of diverse communities, so that local variations are accommodated.

Results are carefully measured: Because young children's growth is highly episodic and variable, performance cannot be judged at a single point in time, so data must be collected via multiple observations. Data must also be collected from multiple sources, by individuals who are well trained in observing and chronicling young children's development. Measures must be age and culturally appropriate, seeking to gauge children's knowledge and skills relative to where they started, rather than in relation to absolute performance levels. Inventive assessment strategies are most desirable, so long as they are scientifically reliable and valid.

Child-based results are linked to efforts that improve the lives of children: Changes in child results need to be analyzed and understood in relation to the contexts in which children develop. Efforts to collect data on children's development and performance must be accompanied by efforts to gather information on child and family conditions (e.g., child health, family health and income, parent education), as well as on community conditions (e.g., service availability, accessibility, and quality; social conditions—poverty, vio-

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lence, drugs). Data need to be presented in ways that are linked to action and to the improvement of conditions for children.

STRATEGIES

Keeping these safeguards in mind, the following strategies should be considered for moving toward child-based results:

- ☀ **II.1. Engage multiple constituencies in the process of building consensus around goals and results that address all domains of development.** Parents, practitioners, administrators, policy makers, and the public at large should be involved in the process of identifying desired results for children. Consensus building around the content of the results is the critical first step in moving toward an acceptable, child-based, results-driven system.
- ☀ **II.2. Consider results from the perspective of children—across programs and time.** Since young children grow rapidly, results need to be gauged frequently over time. And because children are often in multiple settings during a single day or week, researchers should track them over the course of the day and over the course of their early years, noting the cumulative impact of early care and education experiences.
- ☀ **II.3. Specify child-based results at the local, state, and national levels, increasing the customization and specificity at each level.** The federal government should create broad goals for child-based results to guide states as they develop more specific goals for results. In turn, state standards should allow communities to develop their own specific benchmarks, tailored to local needs, priorities, and customs. All standards and bench-

marks should evolve with broad participation by diverse constituencies and should be subject to frequent review and alteration, when necessary (see II.1 above).

- ☀ **II.4. Develop approaches for popularizing the use of child-based results to hold programs, communities, states, and the nation accountable.** Effective programs, communities, and states where children and families achieve positive results need to be rewarded. Such rewards might include additional funding or increased latitude in decision-making. Lessons learned about how to achieve good results must be shared extensively so that less successful programs, communities, and states can build on them.
- ☀ **II.5. Report data on child and family results in ways that increase public understanding of the connection among child results, effective services, and the expenditure of public funds.** Often the reporting of results is confusing to the public, so new ways to communicate results and their implications need to be created. To that end, experiments with reporting mechanisms for different audiences, identifying which groups find which types of information useful for which purposes, should be conducted. Effective strategies should be discerned and replicated.
- ☀ **II.6. Put theory into practice by piloting the use of well-constructed, child-based results for accountability purposes.** The challenge of creating and implementing a child-based results system is complex and demands technical assistance across states and communities experimenting with results-based accountability. Innovative approaches should be shared and reviewed for adoption or adaptation.

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☼ *II.7. Develop appropriate, cost-effective approaches to assessment and data collection, building on existing assessment and data collection strategies.* Assessment approaches should make use of inventive strategies including anecdotal records, portfolios, and classroom observations and checklists. Those who administer such assessments should be well trained and the assessments should meet rigorous standards so that the scientific community and the public can have confidence in the findings.

☼ *II.8. Fund demonstration projects, evaluation, and basic research to expand the knowledge base and increase understanding of what helps children and families achieve positive results.* Support state and local networking and resource development to promote mutual technical assistance and information exchange, and to disseminate best practices widely. Such efforts provide states and localities with information that can guide current and future strategies and investments. Utilize state-of-the-art technologies, including the electronic media. ☼

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THE PARENTS: RECOMMENDATION III

On his way out of the center, Mike Taylor runs into another parent, Salena Rodriguez. Salena has become involved at the center, taking a health and nutrition class offered by one of the parents. She is thinking about running for the parent policy board and wonders if Mike will support her. She also asks Mike if he plans on coming to the parent health fair next week. Mike's work schedule is really busy, but he says he'll think about it. As Mike opens the car door, he sees one of the twins' paintings on the back seat, and thinks to himself, I really should get involved here. He wonders if he can afford to take the time off from work next week to attend the health fair, but decides that his boss wouldn't approve and besides, his work schedule is just too busy.

Mike and Salena are both concerned about their children, but circumstances dictate that they take different approaches to being with and supporting them. Does the program recognize their different needs? Does Mike's employer recognize the work-family tension he faces? Does the program accommodate their families' different backgrounds, patterns of relating to children, and work schedules? Could the program and employers do more to support families? How? Just what should be the role of early care and education programs and business in meeting family needs?

Quality 2000 examined the role of parents and families with regard to early care and education programs and business. We considered the role of parent involvement in quality programs, reviewing obstacles and exploring lessons that have been learned from successful efforts. We examined roles for business and industry. Recommendation III and its accompanying strategies represent a fresh approach to engaging parents as consumers of, and partners in, their children's programs, and fresh roles for the corporate sector.

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RECOMMENDATION III: PLACE PARENTS AND FAMILIES AT THE CORE OF EARLY CARE AND EDUCATION PROGRAMS

By the year 2010, all early care and education programs will address the needs of children, parents, and families; they will engage parents and families as partners in their children's programs. Parents will have the user-friendly information they need to be effective parents and early care and education consumers; work places will be family-friendly.

To raise quality and improve results, families must not simply be effective consumers of services or actively engaged as partners in their children's programs, but must function at the very core of early care and education programs.³¹ Research shows that parent and family engagement in early care and education programs improves results for children, increasing the likelihood of children's chances of success and achievement, and decreasing the likelihood of negative outcomes, both in school and later in life.³² Intensive parental engagement is particularly important for the development of children whose mothers have relatively low levels of education.³³

To raise quality and improve results, programs must become supportive of family needs and responsive to their differences.³⁴ Simultaneously, employers must provide work environments and policies that are friendly to and supportive of adults' multiple roles as workers and family members; they must also enable parents to be active partners in their children's programs and effective consumers of early care and education.

Family-supportive activities, in which parents are partners in their children's programs, will vary from program to program, based on family needs and program capacities.³⁵ All parents should participate in some way, but not nec-

essarily the same way. Supportive activities could include parenting support groups, family field trips and parties, home visits, making referrals to community services when needed, a video and equipment lending library, a washer and dryer for parent use, and/or selling cooked dinners to parents when they pick up their children. These types of activities build on many of the traditional conceptions of parent involvement, but in the *Quality 2000* vision, parent engagement and family support go further.

In the parent engagement/family support framework, parents are equals who bring their own valuable knowledge and experience to their interactions and activities.³⁶ Parents are encouraged to be advocates for their children and the program.³⁷ They are encouraged to initiate activities that spark their interest and that meet their needs and those of their children. This perspective transforms traditional parent involvement activities, in which parents are treated as helpers and are seen as learning from staff, into full-fledged parent engagement, in which parents are viewed as partners. Strengths are acknowledged and incorporated into programs, with a two-way flow of knowledge and responsibility between parents and staff.

In addition to providing family activities and services, qual-

ity programs are sensitive and flexible, so that they reflect parents' perspectives on the type of care and education they want for their children. Parents may not always agree with professionals.³⁸ In some cases, they may challenge basic premises of professional practice, such as the value of developmentally appropriate practices, positive disci-

To raise quality and improve results, families must not simply be effective consumers of services or actively engaged as partners in their children's programs, but must function at the very core of early care and education programs.

pline, promoting multiculturalism, and waiting to introduce English until children have developed a strong basis in their own language. Researchers and professionals need to explore which aspects of professional practice are really crucial to positive child and family results, and which aspects could be more flexible in response to parent perspectives.

A quality early care and education system also supports parents as consumers. In our free market of early care and education, parents have a choice of programs. In theory, program

Unless consumers have the solid information needed to find programs, assess their options, and make sound decisions, and unless they have a range of affordable options, early care and education for their children will be more a matter of chance than choice.

quality hinges in part on parents' ability to recognize and patronize good programs, and to force sub-standard programs to shut down or improve.


But unless consumers have the solid information needed to find programs, assess their options, and make


sound decisions, and unless they have a range of affordable options, early care and education for their children will be more a matter of chance than choice. In many cases, information that already exists in communities, such as facility licensing reports, could help parents in the decision-making process.³⁹ Additional information that parents might find useful include professional ratings of programs, accreditation status, experienced parents' ratings of programs, and tours of quality programs.


Finally, it is difficult—if not impossible—for working parents to be partners in their children's programs or effective consumers when choosing a

program without the support of their employers. Family-friendly work places offer employees benefits including time to find, monitor, and participate in children's early care and education programs and family events; understanding and responsive supervisors; flexibility in scheduling the option of part-time work; paid sick days to care for sick children; and job-protected, paid maternity and parental leave.⁴⁰

STRATEGIES

 **III.1. In every program, create multiple activities to involve parents in early care and education programs.** Parents can organize and participate in activities for parents and families; make decisions about critical program issues; assist with staff development and program accreditation; serve as program ombudsmen for parent and practitioner concerns; and promote service coordination and integration among neighborhood and community agencies.⁴¹

 **III.2. Engage parents in the governance of every early care and education program.** Experience indicates that when parents have some responsibility for running programs (e.g., making decisions regarding budget, hiring, curriculum), their involvement is more meaningful for them and for their children. Such involvement can take many forms.⁴² Parents can sit on boards of directors; in programs not required to have boards of directors (e.g., for-profit programs, family child care homes), parents can form committees (or informal groups in the case of family child care homes) that consider curriculum, staff, and other program decisions.

 **III.3. Focus on developing regular communication between practitioners and parents in which both parties are equals, contributing valuable information to the discussion.** Regular practi-

tioner-parent communication about children and about the program is the basis for parents functioning as partners with staff. Best practices and implementation options should be specified, drawing on experiences from the family support field of equal and reciprocal staff-parent relations.

☀ **III.4. Include parents' perspectives when developing quality standards—such as child results, accreditation, facility licensing, and teacher education curricula—so that parents' needs and perspectives will be better understood and addressed.** Parent perspectives on what factors are important to quality and how best to meet family needs should be one key focus of new measures of quality. The point is not that either parents or practitioners should dictate the elements of quality, but that all stakeholders should participate in authentic dialogues to gain a better understanding of varied perspectives.

☀ **III.5. Increase the linkages between early care and education programs and family support programs.** Early care and education programs should coordinate efforts with the varied family support programs that may exist in a particular community—including general family support programs and family support programs focused on, for example, the needs of Head Start families or families with children with special needs. Links should be made to family literacy programs, as well as drug and alcohol treatment programs, where necessary.

☀ **III.6. Identify and carry out innovative, effective strategies for helping parents be effective consumers, including the following:**

- Give parents access to well-trained, skilled resource and referral counselors who have the time and resources to build comfortable, trusting relationships with parents.
- Involve community workers in consumer education efforts.
- Give parents more objective information about programs, so that they can compare their options.
- Develop ways for experienced parents to help new parents find quality programs.
- Give parents more concrete images of quality programs and better mechanisms for learning about quality early care and education.
- Give parents information about how issues of race, culture, and language affect children's development.
- Expand parenting education programs in high schools.

☀ **III.7. Increase the family-friendliness of work places.** Work places must implement family-supportive policies effectively and must address work-family issues as a part of the company's overall business strategy. The direct benefits of family-friendly work places to employers and employees need to be broadly communicated and adopted, as do strategies to implement such policies. Ongoing technical assistance and training need to be provided to employers on the specifics of making businesses family-friendly places, building on work already undertaken. ☀

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THE PRACTITIONERS AND PLACES: RECOMMENDATIONS IV, V, AND VI

It's the end of a long day, and Mike Taylor is back at the Elm Street Center to pick up the twins. He pauses outside to listen, trying to pick out his kids' voices from the chorus of lively chatter. He opens the door and looks around. Julie, a veteran staff member, is sitting with several children as they draw, listening intently to them, and recalling with them the events of their day. In the far corner, Doug, a newer staff member, is trying out an idea he learned from a class at the community college. Though tired, Mike takes time to look around; the place does seem pleasant and clean. He wonders what makes the teachers so competent and the place so comfortable. Are the teachers certified? Is the center regulated?

Some of the ingredients of quality early care and education programs are obvious to Mike—the attention that staff give to each child; the familiar routines that punctuate each day; the cleanliness of the room and good condition of the toys. But other ingredients—equally important to quality programs—are less obvious to most parents. Why are Julie and Doug so good with children? How do they know just what to do and when to do it? How does the setting—the place—really affect what the staff and the children do?

Quality 2000 looked at what it takes for early care and education practitioners to do their jobs well in the settings in which children spend their days.⁶ We studied how staff are licensed and prepared in other fields and other nations, looking particularly at alternative, inventive approaches to

credentialing and professional development.^f We investigated the relationship between program quality and staff training and facility licensure, discerning ways to improve current practices. We examined whether and how policies are put in place to safeguard children's health and safety in early care and education facilities.

This research supports the widely held view that a wonderful, knowledgeable teacher can make an immense difference for children and their families; but at the same time, it refutes the notion that some individuals are simply born to be great teachers or caregivers, and that quality is available only to the fortunate few who chance to be in their care. It asserts that given excellent, ongoing training and appropriate working conditions, many caregivers can nurture and engage



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young children, leading to the secure attachments that are so crucial to healthy development.

On the basis of our investigations, we present three recommendations: first, that all staff responsible for children be licensed; second, that the content of professional training and education be expanded; and third, that all states rigorously enforce facility licensing, eliminate exemptions, and streamline regulatory requirements and processes.

RECOMMENDATION IV: REQUIRE STAFF TO BE LICENSED

By the year 2010, states will require all staff responsible for children in centers and family child care homes to hold licenses. To achieve these licenses, staff will need to complete high levels of training and education and demonstrate their abilities; to maintain these licenses, ongoing training and education—lifelong learning—will be required.

The more training and education practitioners have—both general education and early childhood-related training and education—the more skilled they are at helping young children thrive and achieve their potential.⁴³ As practitioners attend more training and become better educated, there are increases in their sensitivity and responsiveness, in the complexity of children's play with each other, and in the frequency of children being securely attached to them.⁴⁴ Well-trained and educated practitioners are less harsh and restrictive than staff with less preparation,⁴⁵ and they help children become ready to succeed in school and in life. In family child care, a recent study has also shown that increased training led to children who were more securely attached to their providers and who spent more time engaged in activities and less time wandering aimlessly.⁴⁶ Early childhood-related training and education seem to be particularly important for practition-

ers working with infants⁴⁷ and toddlers.⁴⁸ Training and education can also help practitioners form better relationships with parents, communicate with them more regularly, and develop services and activities to meet their needs.

Despite these benefits, across the nation training requirements are sparse and professional development opportunities are limited, particularly when compared to other fields in the U.S.⁴⁹ The contrast between early care and education in the U.S. and other nations is startling, as well. Other industrialized countries, particularly western European countries and Japan, require significantly more training and education of early care and education practitioners.⁵⁰ But most Americans—including parents—do not view education and training as important for people who work with young children.⁵¹ The belief that anyone can do a good job caring for young children persists, despite growing evidence that early childhood teaching is complex and demands certain skills.⁵² Licensing practitioners would establish clear training requirements and create the framework for the development of necessary skills.

We advocate creating a system for licensing individuals because—while difficult to achieve—we believe that it holds the best promise for increasing the compensation of staff; increasing the professionalism of the field; promoting the creation and coordination of quality training and education; promoting career mobility; and increasing the efficiency of facility licensing.⁸ Such a system must promote career mobility so that individuals may move from one level to another and from one

The more training and education practitioners have—both general education and early childhood-related training and education—the more skilled they are at helping young children thrive and achieve their potential.

role to another with ease. The system should continue to promote facility licensure which should be linked to individual licensure, but facility licensure should not be the primary tool to assure that individuals working with young children are well prepared. Rather, individual licenses should specify the preparatory and ongoing training staff need to work with children. Open access to entry-level positions in the field should continue, but training, education, competency, and licenses should be required for all staff members who have *responsibility* for groups of young children. This recommendation is designed to work hand-in-hand with Recommendation V concerning the expansion of available training and education, and Recommendation VI concerning facility licensing.

Individual licensing offers five key benefits.

It would help to:

- Prevent harm to children and assure the quality of programs;⁵³
- Increase the recognition and rewards for early childhood workers;
- Facilitate training coherence and coordination;
- Encourage career mobility, building career lattices with horizontal and vertical job opportunities; and
- Improve the cost-efficiency of facility licensing, since detailing staff training and education as part of the facility licensing process is cumbersome for program directors and licensing staff alike.⁵⁴

While there are many approaches to individual licensing, we offer one that can serve as an example. This approach calls for a series of three licenses for early care and education workers:

- All center directors and directors of family child care support services would be required to have **Early Childhood Administrator Licenses**. To obtain this license, an individual would need at least a bachelor's or master's degree in early childhood education or child development from an accredited institution,⁵⁵ including at least 15

credits in early childhood administration, certification in first aid, and demonstrated competency in management and working with children and families.

- All teachers in centers would be required to have **Early Childhood Educator Licenses**. Teachers of three- and four-year-old children in public schools would have the option of obtaining public school teacher certification/licenses or the Early Childhood Educator License. To obtain the Early Childhood Educator License, an individual would need to have at least an associate's or bachelor's degree in early childhood education or child development from an accredited institution;⁵⁶ have practicum experience with the age group with which they would work; be certified in pediatric first aid; and demonstrate competence in working with children and families.
- All assistant teachers in centers, as well as lead providers in large family child care homes, would be required to have **Early Childhood Associate Educator Licenses**. To obtain the license, an individual working in a center would need to have a Child Development Associate (CDA) or equivalent; an individual working in a large family child care home would need to have a CDA, the revised National Association for Family Child Care (NAFCC) accreditation, or equivalent certification. Each of these certifications requires at least 120 clock hours of formal education in early childhood development and education and the demonstration of the competencies needed to work with young children and their families. They would also need to have practicum experience with the age group with which they would work, and certification in pediatric first aid.
- Individuals who do not have training or education in child development or early childhood education, but who have an interest in and aptitude for working with young children and families, and a commitment to seeking training in the field, would have

access to entry-level jobs as assistants in child care centers or in large family child care homes or as providers in small family child care homes. Such assistants, as long as they are actively pursuing training that will lead to licensing, would be considered an integral part of the profession.

This approach to licensing dramatically advances current practice by calling for a coherent system of licensure. It also requires all staff responsible for young children to have high levels of formal training and education and to demonstrate their competency. This approach also allows flexibility in that a range of educational degrees or achievements can satisfy the requirements for the licenses. Further, it fosters vertical (up the career ladder) and horizontal (from setting to setting) career mobility. Finally, this approach takes an initial step toward promoting the compatibility of early care and education and public school licensure systems.

While offering numerous benefits, this approach also demands new and challenging roles for government and professional entities. State governments would need to collaborate with the early care and education field in managing the licensing process by means of professional licensing boards. The professional licensing boards could establish standards for each level of licensure and identify appropriate assessments for individuals to demonstrate competency. Staff must be able to afford the education and training required to secure and maintain individual licenses, so an incentive system must be created early on. Moreover, if practitioners are to be expected to pursue training and education, their wages must be raised so that they are comparable to wages in other fields requiring similar levels of responsibility, education, and experience.

STRATEGIES

Any system for licensing individuals will require dedication and focus—from the early care and education field, state administrators, and training

and higher education institutions throughout the country—to build a quality system on the existing professional development capacity in states and communities. The following strategies are designed to facilitate the transition to a system for licensing the individuals who are responsible for young children.

IV.1. Make grants available to states to plan and implement individual licensing systems.

Grants should be made to states to begin the planning and implementation of individual licensure systems, assuring that adequate compensation accompanies new licensure requirements. The proposed licensing systems should consider which entities (e.g., state licensing boards) should oversee the process, identify and administer assessments, grant licenses, and handle complaints. The individual licenses must be required by states, ultimately, though the license itself could be awarded by a non-public entity. Proposals, undergirded by principles of equitable compensation, should be developed collaboratively by professional groups and should specify how the transition to the new system of licensing individuals will be made.

IV.2. Determine appropriate amounts of ongoing training and education for staff in different roles as well as mixtures of staff that might be appropriate.

Ongoing training and education requirements for other occupations in the United States should be reviewed as a first step in determining the requirements for maintaining individual licenses in early care and education. Once the requirements for ongoing training (both amounts and types) have been determined, advocates should work in each state to revise facility licensing and to shape future individual licensing systems.

IV.3. Develop and pilot approaches for assessing staff competency at each level of licensure.

Identify one or more professional organizations to work in concert with the field and state professional development groups to develop

and pilot model assessments for licensing individuals. It will be important to search the early care and education field and related fields for appropriate assessment models, which could include portfolios, observations, demonstrations, and for some topics, exams.

☀ **IV.4. Link all training and education to academic credit.** All training and education required for individual licensing should be of sufficient quality and rigor to warrant academic credit; this will help staff attain initial and advanced degrees. Specifically, it will be important to work early on in the states to assure that academic credit is granted for the Child Development Associate (CDA) and the revised National Association for Family Child Care (NAFCC) accreditation.

☀ **IV.5. Promote accreditation of two- and four-year college early childhood education and child development programs.** A key part of the infrastructure, supporting systems for licensing individuals, is a mechanism to ensure the quality of certificate programs, associate's degrees, and bachelor's degrees at institutions offering preparation in early childhood education and child development.

☀ **IV.6. Provide supports and incentives for staff to obtain voluntary advanced individual certificates, above and beyond what is required by individual licensing.** Individual licenses represent just the minimum training, education, and competency that staff should be required to have to perform their roles. Voluntary, higher-level certificates, such as those at the masters level offered by the National Board of Professional Teaching Standards (NBPTS), encourage staff to continue to increase knowledge and skills.

☀ **IV.7. Increase financial assistance for education, training, and compensation.** To facilitate the transition to a well-qualified, appropriately paid work force, existing grant, loan, and loan-forgiveness programs need to be

expanded. Appropriate standards for compensation need to be developed, with new financial programs targeted to early care and education students and workers created. It is crucial that the current vitality and diversity of the early childhood work force be maintained as we move toward a quality early care and education system. Financial assistance and appropriate compensation levels are requisite to this end.

RECOMMENDATION V: EXPAND THE CONTENT OF TRAINING AND EDUCATION

By the year 2010, the content of education and training for early care and education staff will be expanded to: (1) address the needs of diverse children and families; and (2) implement effective approaches to instruction, management, and leadership.

The content of education and training for early care and education staff—practitioners, administrators, and leaders—is a foundation of a quality early care and education system. The Child Development Associate (CDA) competencies are well respected by the field as the basic areas in which knowledge and skill are needed to work with young children. All training and education sequences should, at a minimum, address these competency areas: establish and maintain a safe, healthy learning environment; advance physical, intellectual, and creative competence; support social and emotional development and provide positive guidance; establish positive and productive relationships with families; ensure a well-run, purposeful program that is responsive to participant needs; and maintain a commitment to professionalism.⁵⁷

More training—particularly at intermediate and advanced levels—needs to be developed and made available to pre- and in-service practitioners in the following areas:⁵⁸

Engaging and supporting families: Training and education programs need to include content related to parent development and family support, to help staff-family alliances develop and flourish,⁵⁹ and to engage families meaningfully in early care and education programs.

Developing cultural competency: Early care and education staff work with an increasingly culturally diverse pool of young children and families, so training in cultural sensitivity, cultural competence, and culture-linked curriculum is increasingly necessary.

Observing and assessing children: As we move toward a child-based results approach, practitioners will need more training in being keen observers of children's behavior, skills, and interactions. Such training will enhance reflective practice.

Working with mixed-age groups, working with larger groups, and team teaching: Training curricula need to be revised to accommodate more flexible, adaptive teaching strategies, such as mixed-age groups, team teaching, and collaboration with other staff members.

Working with infants and toddlers: There is an immediate need for better training and education for practitioners working with children from birth to age three, as the quality of these programs trails behind the quality of programs for three- and four-year-olds.⁶⁰ Such training should focus on effective practices with infants and effective practices with families.

Working with children with special needs: Since the early 1990s, the Americans with Disabilities Act has accelerated the inclusion of young chil-


dren with disabilities into community early care and education programs. Staff training to implement this approach is necessary.

Promoting ethical behavior: Codes of ethics help to distinguish a profession and also guide practitioners. Because early care and education, like other professions, deals with sensitive issues, staff need training in how to handle matters of confidentiality, rights, and values with children, families, and colleagues.

Working across human service disciplines: As part of interprofessional collaboration and service integration efforts, early care and education staff need to be able to work with staff from a range of human services, including schools, health departments and initiatives, family support programs, job training and placement organizations, child welfare, and economic development agencies.⁶¹

Developing management and leadership: In addition to expanding the types of training available to practitioners, the development of management and leadership capacity is necessary for promoting and maintaining a quality system.

STRATEGIES

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V.1. Revise and develop curricula and sequences for practitioners to address the broad-based knowledge and skills they need to be competent in early care and education programs. Work with state licensing boards for early care and education to require staff to have appropriate ranges of skills to earn and maintain licenses, including appropriate preparatory and ongoing course work. Work with colleges and community organizations to offer such courses. Curriculum should consider transdisciplinary approaches so that early care and education practitioners develop perspectives from allied disciplines as well as in-depth knowledge of early childhood pedagogy.⁶²



V.2. Promote a variety of strategies at the local, state, and national levels to help staff strengthen leadership and management skills. Leadership development should be promoted at the local, state, and national levels by means of professional associations and other organizations.⁶³ There should be a focus on creating and expanding professional associations for program administrators who have strong potential to be leaders. Mentoring programs should be promoted, allowing skilled and experienced staff to work with individuals who are newer to the field, passing on knowledge and successful approaches.⁶⁴ And finally, leadership programs might be created to span the human services at the local, state, or national level. By working and training together, staff from a range of human services can broaden their understanding of the comprehensive needs of children, families, and communities; increase staff knowledge of a range of fields; increase coordination among fields; and build their capacity for collaborative advocacy.

RECOMMENDATION VI: ELIMINATE EXEMPTIONS AND STREAMLINE AND ENFORCE FACILITY LICENSING

By the year 2010, all early care and education programs offering their services to the public will be required to be licensed, and facility licensing will be streamlined and enforced.

When it comes to health and safety, parents should never be forced to take their chances. Consumers should have the right to know that early care and education programs offering their services to the public are regulated—that basic safeguards and quality standards are in place to protect their children from harm

while they are in these programs.⁶⁵ Most parents assume that these safeguards are in place, but facility licensing requirements are far from universal. It has been estimated that nationwide, about 40 percent of all early care and education programs—including family child care homes, church-based programs, part-day programs, and school-based programs—are legally exempt from state regulation.⁶⁶ Legally exempting programs undermines public confidence in early care and education, the quality of the overall system, and the equity of the early care and education market.

While the vast majority of programs for young children should be licensed, there are three categories of care situations that states should **not** have an obligation to license. States should not be obligated to license people caring for only related children (care by “kin”), or people caring for just the child or children of one friend (care by “kith”). Neither kin nor kith caregivers are offering a service to the public at large; these caregivers are caring for children because of the relationship with the family. Nor should states be obligated to license providers caring for the child or children of just one family—in the provider’s home—because the parents are in effect hiring the provider to offer a service to just their family; this situation is not significantly different from parents hiring a nanny or *au pair* to work in the family’s home, and the state is not obligated to license such employer-employee situations. If, however, public funds are received by these individuals, they must assure that their services promote children’s safety, health, and development.

However, all programs that are available to the general public should be required to meet standards that protect children’s well-being and foster equity in the early care and education industry. The standards to which programs are held must be comparable, although they should be adapted to the particular type of facility. To this end, state facility licensing should be streamlined to focus on essential safeguards of safety, health, and

development, and to complement the system of licensure called for in Recommendation IV. Measures that will streamline and coordinate facility licensing include:⁶⁷

- Regulating essential aspects of programs, including setting standards for the physical facility and equipment, health supplies and practices, nutrition, and child immunizations, as well specifying the licenses staff are required to hold and background requirements for any unlicensed staff;
- Eliminating any regulations that are not needed to protect children from harm and that do not promote essential health, safety, and child development. Appeals, waivers, and licensing records can be studied to identify regulations that themselves may cause harm or undermine quality;
- Coordinating the standards and inspections of the range of agencies with regulatory authority for early care and education programs (such as state and local facility licensers, local departments of health, fire departments);
- Using plain language and user-friendly terminology for the regulations that are important for children and families, and placing these points at the beginning of regulatory documents; and
- Eliminating unnecessary procedural red tape, and placing the remaining procedural red tape and rights of licensees at the end of regulatory documents.

While state facility licensing should be streamlined, it should maintain standards for staffing levels. Such standards should allow programs options, however, to group children and organize staff in ways that maximize quality. Programs need alternatives to the single approach of low child-staff ratios, same-age groups, and static group size promoted by facility licensing in many states. Research is needed to examine the interactions among teacher training and education, children's characteristics, group size, and child-adult

ratios to identify the range of combinations of these variables that can lead to quality for children and families.

It is not enough to have standards for facility licensing that promote children's safety, health, and development and that do not exempt programs; *standards must be enforced*. State monitoring and enforcement systems should employ positive, incentive-based strategies to encourage and facilitate all programs to meet licensing standards. For the few programs that are consistently unable to meet licensing standards, licensing staff should use more corrective strategies, including technical assistance; where necessary, programs should be closed.

Finally, although states should retain the main responsibility for the development and promulgation of facility licensing requirements, national regulatory coherence should be promoted by means of a set of national licensing guidelines, developed with broad-based participation.

STRATEGIES

☛ **VI.1. Advocate to change state facility licensing statutes to cover all early care and education programs, except for "kith and kin."** As necessary, develop interim approaches to reducing exemptions, for example, by requiring previously exempted programs to comply with a limited number of health and safety rules. Create campaigns in each state to inform parents, providers, and the public at large of the prevalence of legally unlicensed (i.e., exempt) programs, the possible risks they present to children, and the benefits of licensing.

☛ **VI.2. Work to streamline and coordinate facility licensing.**

- Create coordinated systems from the currently separate, fragmented licensing by health, building safety, fire safety, and other authorities at the state and local levels.

- Exempt family child care homes from local zoning restrictions and conditional use permits, as some states and communities have already chosen to do.
- Explore the roles that community organizations could play in supporting the facility licensing process for both center-based programs and family child care homes.

■ **VI.3. Identify how state and local facility licensing can give programs options in grouping children and organizing staff while maintaining quality. Following are options that states might consider.⁶⁸**

- State facility licensing for centers could allow and encourage mixed-age groups.
- Staff facility licensing could give programs the option of regulating their staffing levels by group size or program size, in order to allow programs more flexibility in staff deployment throughout the day.
- If research demonstrates that well-qualified teachers can work with larger numbers of children and maintain or increase quality, programs could be given the option of having better qualified staff and higher child-staff ratios. **States should not, however, give programs the option of altering child-adult ratios if staff are better qualified until careful research demonstrates whether this approach maintains quality.**


■ **VI.4. Commission a review of state-of-the-art monitoring and enforcement approaches in early care and education, and innovative approaches from other fields.** Consider the following incentive-based monitoring and enforcement approaches.⁶⁹

- Calibrating the number of monitoring visits, the amount of licensing fees, and the cost of insurance with programs' histories of violations (e.g., fewer monitoring visits and lower licensing and insurance fees if few or no violations).
- Developing innovative ways for parents to become involved in the monitoring and enforcement process.
- Using "indicator checklists" to increase the efficiency of program monitoring.
- Developing approaches to peer monitoring in which program staff work with other programs to assess and implement regulations.
- Encouraging staff to report program violations, using existing "whistle-blowing" laws to afford job protections.
- Invoking reasonable sanctions and penalties for programs with serious violations and programs that do not correct identified violations.
- Closing programs that present an immediate threat to children or that do not address serious violations in reasonable periods of time.



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 **VI.5. Develop the capacity of licensing staff and give them the appropriate resources to enforce facility licensing.** Licensing staff need expertise in early childhood education and the capacity to think creatively about enforcement.⁷⁰ Developing a certificate for licensing staff would clarify the skills and knowledge needed by these important players in the early care and education infrastructure; revising Civil Service requirements for licens-

ing staff to require such a certificate would improve the effectiveness of facility licensing.

 **VI.6. Promote the utilization of national guidelines for faculty licensure.** National guidelines developed by The American Public Health Association in conjunction with the American Academy of Pediatrics should be promoted. The federal government should provide incentives to encourage states to implement the guidelines. 

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THE PURSE, THE PUBLIC
AND THE POWER:
RECOMMENDATIONS VII AND VIII

The twins are finally asleep, and Mike and Sandy Taylor sit down at the kitchen table to talk and figure. The roofing business is slow, and the bill from the Elm Street Child Care Center is running about ten thousand dollars a year for the two children. What to do? They might be able to swing the tuition for one, but certainly not for both. They don't know where to turn. The program at the church is less expensive but has a long waiting list, and they earn just over the limit for the subsidized program downtown. Sandy thinks maybe they should keep the twins at Elm Street for the morning and send them to Miss Ryan for the rest of the day, but Mike reminds her that there's no way to get them from one place to the other. They can't leave work and the programs don't provide transportation, much less coordinate services or curricula with each other. Maybe they should split up the children, but that would be more expensive and the kids would be on two different schedules. Mike and Sandy are in a state of shock; they always knew they'd have to struggle to figure out how to pay for the twins to go to college, but they never imagined that their kids would have to drop out of preschool! Who knew child care could be so complicated!

Finance and governance structures might seem to be the province of bureaucrats and policy mavens, far removed from the day-to-day realities of most Americans. But in fact, the Taylors and parents like them across the nation are dramatically affected by the ways in which individual programs, and the early care and education system as a whole, are funded, organized, and governed. Adequate funding and effective gover-

nance are two keys to moving beyond chance and assuring equitable access to good programs. Today, three out of four program dollars come from parents' pockets, with the result that most early care and education programs are severely underfunded. Despite the growing demand for early care and education, federal, state, and local responsibilities are not clearly delineated. Overlaps and gaps abound in eligibility, fees, programming, and other crucial matters, raising practical



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dilemmas for families like the Taylors and policy dilemmas for decision-makers at all levels. Which families and programs should receive government funding for early care and education, and how should such funding be distributed and channeled? How should myriad programs and sponsors be managed and coordinated? *Quality 2000* has examined existing policies and mechanisms, and has concluded that if a quality early care and education system is to be achieved, government and business funding must increase and there must be coordinated, rational governance processes at national, state, and local levels.

RECOMMENDATION VII: RAISE NEW FUNDS AND SET ASIDE TEN PERCENT FOR QUALITY AND INFRASTRUCTURE

By the year 2010, a broad array of groups—including the public at large, business, government, parents, and community organizations—will generate the needed new funds for a quality early care and education system. Additionally, 10 percent of all public early care and education funds will be invested directly in the infrastructure.

Adequate funding is a key to solving the quality problem and assuring equitable access to good programs. Today, underfunding affects virtually every program and every effort to improve quality. Government funding covers only one-quarter of the costs of running the nation's early care and education programs; parents pay the rest. When parent and government outlays for full-time early care and education are combined, the total averages \$3,000 to \$5,000 per child per year—significantly less than the roughly \$5,800 taxpayers lay out to educate each school-aged child.⁷¹ And yet, this lower amount must cover 35 to 50 hours per week for 50 to 52 weeks per year, compared with 30 hours of education a week for about 40 weeks a year for school-age

children.⁷² The absence of adequate resources means that programs cannot provide many of the key elements of early care and education that have been shown to produce good results for children.

If the quality crisis is to be solved, the costs of a quality early care and education system must be shared by the government, business, parents, and community organizations.⁷³ The government must bear considerable additional costs because while parents with young children must pay what they can afford, they cannot bear the full cost of quality programs single-handedly. This recommendation calls for continuation of mixed funding of early care and education and the expansion of government and business investment. In return, it foresees increased results, in the form of higher national productivity and enhanced development and achievement for children.

Specifically, the public must acknowledge its role and pick up more of the tab for early care and education. As with investments in public education, the public—not simply the direct consumers—derive merit benefits.⁷⁴ Consequently, the public—not simply the direct consumers—should be responsible for funding American early care and education. We therefore call for increased public spending. Revenue-generating approaches to early care and education should be progressive, requiring those who earn more to contribute more.

Employers also stand to benefit directly from a quality early care and education system, which would enable employees to devote more attention to work and less to arranging for and worrying about care for young children. All employers should contribute directly to funding the early care and education system by means of some kind of tax (e.g., payroll tax, corporate income tax). Contributions, both cash and in-kind donations, should also continue to be encouraged from community organizations such as houses of worship, United Ways, and volunteer groups. In addition to promoting quality in programs, these contributions facilitate community

linkages and help establish early care and education within the array of essential community services.

As public investments in early care and education increase, a larger percentage of government funding—we estimate at least 10

The full cost of quality programs should include increased salaries for early care and education staff, who must be compensated at levels comparable to personnel with similar education and experience in other fields.

percent—needs to be invested directly into building and maintaining the infrastructure, including support for resource and referral agencies; parent information and engagement; data collection, planning, governance, and evaluation; practitioner professional develop-




ment and licensing; facility licensing, enforcement and improvement; program accreditation; and other quality improvement activities. Part of this 10 percent of funds must support inventive financing approaches for enhancing salaries and benefits, and for improving and expanding the physical facilities (centers and family child care homes) in which children spend their days.



The remaining government funds for early care and education—we estimate about 90 percent—should be used to help parents pay for early care and education programs, to sustain programs directly, and to help working parents afford to take time off from work to care for their own children. Government funding should make up the difference between what parents can afford to pay for programs based on their incomes, and the full cost of quality programs. The full cost of quality programs should include increased salaries for early care and education staff, who must be compensated at levels comparable to personnel with similar education and experience in other fields.

In this vision of increased public funding of early care and education, parents would continue to be able to choose among programs run by a variety of service providers—including non-profits, for-profits, family child care, Head Start, schools, houses of worship, and others. However, some of the public funds for early care and education programs would be used to directly support programs in low-income communities, giving them the means to provide the comprehensive services needed by children and families living in poverty. These funds must be used to expand Head Start (and Head Start-like services) so that it forms the core of services for low-income children. Such direct supports must be preserved so as to maintain durable, secure programs in low-income, migrant, and other targeted communities. While parents should be free to choose care by friends and relatives (kith and kin), if the government helps to pay for this form of care, it also has the responsibility to assure that these services promote safety, health, and development.


While parents need access to quality early care and education, they also need to have the option of caring for their own very young children. Although many parents would like to stay at home and care for their infants, many do not have the financial resources to stop working when their children are very young. Part of public funding for early care and education should go toward helping to provide paid parental leave for the working parents of very young children. Paid parental leave is the major approach to providing care for very young children in most industrialized countries; they recognize that the cost of quality infant programs is extremely high, and that there are great benefits to both infants and parents of parental care during the early months and years. While parents should have the choice of enrolling infants in early care and education programs while they work, working parents should also have the option of taking time off to care for their infants themselves.


STRATEGIES

-  **VII.1. Estimate the actual cost of a comprehensive quality early care and education system.** The field has not yet developed consensus on the early care and education system it wants and how much this system would cost. In making such estimates, early care and education professionals need to work closely with funding and financing experts, using cost calculation approaches that other fields have found useful. Such an analysis should also estimate the revenues that the early care and education system would generate in both the short- and long-term. For example, a well-funded early care and education system could help more parents enter the work force, thereby generating tax revenue on their earnings. Longer-term cost-benefit accounting also needs to be used to determine the extended benefits of a quality early care and education system, including savings in special education, corrections, public assistance, and other social services.
-  **VII.2. Identify and implement strategies for raising the compensation of early care and education staff.** Increasing the compensation of staff is crucial to a quality early care and education system,⁷⁵ but raising wages in a free-market, mixed-sector system is not a simple matter. One approach would be to raise wages by means of the funds parents are given to help pay for programs. Alternate strategies include giving funds directly to programs, earmarking them for wages and instituting a refundable tax credit for early care and education staff.
-  **VII.3. Develop model approaches to funding paid parental leave.** The goal is to keep government, employer, and employee costs under control, while providing levels of assistance to working parents that would enable them to stay home and care for their own infants.

-  **VII.4. Identify several revenue-generation mechanisms to cover the costs of a quality early care and education system.** Because it is unlikely that any single revenue-generation strategy will yield sufficient funding, several options will need to be considered and implemented with the understanding that each mechanism has advantages and disadvantages. Some possible mechanisms include individual and corporate income taxes; federal payroll taxes and trust funds; and new sales or excise taxes. It may be possible to introduce new approaches to savings and loans that would not generate new government revenue for early care and education, but would create mechanisms and incentives for parents and those planning to be parents to save more of their own money to pay for early care and education, and/or to borrow money, which they would repay over a number of years. Other possibilities for generating new funds for early care and education include expanding the populations eligible to receive the school aid formula; cutting other government expenditures to raise some of the needed funds; and raising funds for early care and education as part of a larger revenue-generation package designed to support a range of social services that families need. None of these approaches is easy to sell to the public or policy makers, but each would help improve the amount of funding available to support early care and education.
-  **VII.5. Clarify the funding roles of parents; federal, state, and local governments; employers; and community organizations.** To fill the gaps in funding and eliminate duplication of efforts, the funding roles should be determined and responsibilities divided among various stakeholders. Parents currently provide the bulk of early care and education funding, and should continue to pay what they can, based on family income. Government funding should make up the differ-

ence between what parents can afford to pay and the full cost of quality programs. In regard to the division of funding responsibility among federal, state, and local governments, each level of government might specialize in those activities which it is best equipped to perform.⁷⁶

 **VII.6. Develop model approaches for distributing funds to parents to help them pay for early care and education.** State-level agencies (perhaps the "State Early Care and Education Boards" discussed in the next recommendation) may be best suited to administering funds for this purpose. In helping parents pay for programs, mechanisms should be used that promote parent choice, such as vouchers, direct payments to programs of parents' choice, and/or tax credits. Parents should receive assistance paying for early care and education programs based on a sliding scale linked to parents' income. A key point is that in cases where family income increases over time, public assistance for early care and education decreases proportionately but is not completely cut off.⁷⁷

 **VII.7. Create a targeted, coordinated initiative focused on funding a quality early care and education system.** Generating increased revenues for early care and education is crucial to improving quality and equity. But scholarship and knowledge of how to do this remain embryonic. Therefore, focused research is needed to carry out the analyses mentioned above. Such an effort might be added to the portfolios of existing projects or organizations, or a new project or collaboration may be created.

RECOMMENDATION VIII: CREATE LOCAL AND STATE EARLY CARE AND EDUCATION BOARDS

By the year 2010, every state will have a permanent State Early Care and Education Board and every county or school district will have a permanent Local Early Care and Education Board, responsible for the infrastructure and governance of early care and education programs.

Across our nation today, early care and education is a non-system—an accumulation of insufficient, ineffective, and uncoordinated mechanisms for funding and governance. Programs have proliferated on a govern-as-you-go basis. Federal, state, and local responsibilities are not clearly delineated.⁷⁸ There are countless overlaps and gaps in policy, eligibility, fees, programming, and other crucial matters. This report refutes the common assumption that our mixed delivery system is the way it has to be.

To move toward a coordinated system of early care and education and to create continuity of services for young children and their families, we recommend the creation of governance entities, to be known as State Early Care and Education Boards and Local Early Care and Education Boards, in every state and locality. This recommendation may seem to run against prevailing political currents by calling for the establishment of permanent State and Local Early Care and Education Boards, particularly at a time when the popularity of government and its bureaucracies is at an all-time low. Yet, at the same time, the recommendation acknowledges and follows current political trends by calling for the devolution of authority to state and local levels, providing for the effective utilization of government resources, and requiring clear accountability.

Modeled after successful state coordinating initiatives, State Early Care and Education Boards would be the mechanisms by which states would meet their responsibility to ensure quality and achieve agreed-upon child-based results. In part, the State Boards would:

- Institute an ongoing, consolidated state planning process to improve the quality of early care and education services throughout the state and across the sectors;
- Coordinate, oversee, and administer funds for quality early care and education programs and infrastructure statewide;
- Set eligibility criteria, subsidy levels, and parental leave conditions;
- Determine how to allocate funds to parents for programs and parental leave;
- Establish a process to develop state standards for results for young children in early care and education programs that would align with national goals;
- Gather and analyze data on results, and use these data to improve quality; and
- Facilitate collaboration, service integration, and comprehensive service delivery by fostering linkages with health, mental health, social, and family support services.

State Boards would be composed of appointed or elected board members, including equal numbers of parents/consumers, practitioners, community and state leaders (including representatives of the corporate sector), and government agency staff. State Boards would work closely with state executive agencies, special task forces and commissions, and the Local Early Care and Education Boards. They would have modest staff to help them carry out their functions. Where a state-level governing board or coordinating council already exists, the State Early Care and Education Board could be built from this organization, or created in collaboration with the existing body. It should be noted that the State Early Care and Education Boards would have primary responsibility for the development and oversight of the early care and education

system; such Boards, however, will also coordinate closely with already existing state boards (health, mental health) that serve young children.

At the local level, a handful of governance and planning entities have emerged across the nation, making notable progress in linking early childhood services, streamlining service delivery, and increasing programmatic efficiency. However, these local governance and planning entities are idiosyncratic, politically fragile, and in many cases dependent on short-term philanthropic or corporate support. To legitimize this local governance function and to make it durable within early care and education nationwide, we call for the establishment of permanent Local Early Care and Education Boards that would be geographically aligned with school districts.

Local Boards would collaborate with school boards, but would be distinct entities. If local collaborations or councils exist that are dedicated to early care and education, Local Boards could be built from them, or could be created in collaboration with them. They would be composed of equal numbers of parents/consumers, practitioners (including representatives from the non-profit, for-profit, and public programs), community leaders (including representatives from the corporate sector), and local government agency staff. They would have modest staff to help them carry out their functions.

School boards have responsibility for both the governance and provision of education for children from age five to eighteen. Local Early Care and Education Boards, in contrast, would focus on the governance and coordination of

To move toward a coordinated system of early care and education and to create continuity of services for young children and their families, State and Local Early Care and Education Boards should be created.

early care and education for children from birth to age five—influencing, shaping, and leveraging quality from the mixed-sector free-market delivery system in early care and education. Building on the strong capacity at the local level to understand the unique strengths, needs, and priorities of communities,⁷⁹ Local Boards would:

- Involve consumers and other citizens in a comprehensive needs assessment and planning for early care and education;
- Make decisions on how to use local infrastructure funds that they receive from the State Boards to promote the availability of quality programs;
- Establish performance benchmarks for child results and services that align with state standards for child results and national goals, customizing the standards and goals to local strengths, needs, priorities, and resources;
- Provide a local vehicle for citizens to hold government accountable for meeting the needs of young children; and
- Provide a forum for coordinating services with allied fields (health, mental health, education, social services, and family support) so that all children receive the full spectrum of services needed to foster their healthy development.

Finally, the governance roles reserved for the federal government are responsibilities for which it has a comparative advantage. The federal government should:

- Establish broad goals for child results that can guide states as they develop standards for child results, and can guide communities as they develop benchmarks to meet state standards and national goals;
- Coordinate the collection of uniform data on child results nationwide to provide a national picture of progress useful for policy, planning, and accountability;

- Hold states (and indirectly communities) accountable for moving toward and achieving the goals for child results; and
- Promote innovation, best practices, and learning among states, localities, and programs by funding and evaluating demonstration projects; facilitating state and local networking to exchange information on best practices; and developing resources and providing other technical assistance to states and localities.

STRATEGIES

■ *VIII.1. Provide demonstration funds to states that prepare plans to establish State Early Care and Education Boards that are well conceived and supported by a variety of stakeholders.* Support for establishing State Boards, or augmenting the work of existing State Boards, should be procured and distributed on a demonstration basis to a select group of states. These states should demonstrate how they will: allocate infrastructure funds to state and local levels; administer state infrastructure funds; leverage state funds to promote coordination across sectors and fields; determine state standards for child results; and hold Local Early Care and Education Boards accountable.

■ *VIII.2. Make demonstration funds available to localities that develop plans for establishing Local Early Care and Education Boards that are well conceived and supported by a range of stakeholders.* Support for establishing Local Boards, or augmenting the work of existing Local Boards, should be given to localities that show evidence of building consensus on local benchmarks for child results and services, and effective planning and assessment.

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VIII.3. Use incentives and supports to hold Early Care and Education Boards accountable for achieving the agreed-upon results for young children. High-performing Boards (at the state and local levels)—those making continual improvement in the percentages of children achieving desired results—could be given increased flexibility (e.g., being able to

approve their own funding plans and grant themselves waivers of funding, program, and administrative requirements) and perhaps additional funds to expand services.⁸⁰ Lower-performing Boards would receive technical assistance and targeted funding to improve child results. 

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Part 3

REALIZING
THE VISION

The eight recommendations set forth in this report constitute a vision for a quality early care and education system for America's children and families. Together, these recommendations and the strategies that accompany them posit a new way to think about early care and education, and suggest a wide range of action steps. The intent is to conceive a quality early care and education system with forethought and planning, not by dictum and not by chance. Yet the questions remain: How can paper-and-pencil recommendations be transformed into reality, particularly in the current policy context? To achieve this vision, where do we begin? Which efforts should have high priority? Who should do what?

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REALIZING THE VISION

To address these questions, *Quality 2000* examined a range of existing initiatives or programs in the field that can and must be built upon. Some of these efforts are grounded in strong traditions of the field; others are new and promising endeavors. We then zeroed in on three key strategies: conceptual exploration; comprehensive demonstration; and broad-based mobilization. The report concludes with a call to action, suggesting who should do what to begin to carry out the vision.

EXEMPLARY TRADITIONS AND PROMISING EFFORTS

A key lesson drawn from analysis of successful social reform efforts is that the strengths of a field need to be identified, recognized, and built on—not steamrolled over. Together, exemplary traditions and innovative efforts create the foundation upon which reform must stand.

The American early care and education field is blessed with venerable traditions—a unique set of beliefs that undergird practice in the field and that should be safeguarded as the nation moves toward a new early care and education system. These traditions include:

A durable commitment to parents and to the right of parents to select, run, and create the programs their children attend: Strategies for reform should build on the exemplary tradition of parent choice and engagement.

Responsiveness to the whole child and a determination to extend this commitment to pedagogical practice: High-quality early care and education programs have never simply focused on children's cognitive growth, but have supported children's learning and growth across the various domains of development: social, emotional, linguistic, creative, physical, moral and ethical. Comprehensive, individualized, hands-on learning for children—and for the staff who work with them—must be preserved.

A durable commitment to social justice: The field has long sought to provide growth and learning opportunities for children and the adults who care for them (both parents and practitioners) from all economic and social backgrounds. It has fostered anti-bias efforts, recognizing the importance of the early years in staving off prejudice and intolerance. It has worked to infuse practice with respect for and recognition of various cultures in ways that are being modelled in other fields.

Innovative efforts across the country to improve early care and education have developed impressive precedents and inventive strategies which must also be supported.¹ These newer efforts build on and push the limits of the traditions of the field. *Quality 2000* studied exemplary efforts that address a range of significant challenges, including:

Improving the professional development of early care and education workers: Noteworthy initiatives are creating career development sys-

tems for states; providing technical assistance on career development; developing new practitioner credentials or certificates; experimenting with ways to increase career mobility; and piloting innovative courses and mentor training projects.

Strengthening facility licensing: A number of states are improving or expanding facility licensing; some are experimenting with new approaches to group size, monitoring, and enforcement.

Generating new revenue sources: Many efforts are now underway—at the national, state and local levels—to secure a more adequate resource base for early care and education. A number of states and communities across the nation are experimenting with tax plans that generate revenue for early care and education. Some are using bonds and loan guarantee programs to raise money to build and renovate facilities. Several states are providing, or considering, paid maternity leave using state-wide temporary disability insurance.

Creating governance and accountability mechanisms: A host of innovative governance and accountability efforts have been launched at the national and state levels. Many states are receiving technical assistance to help them develop comprehensive systems of programs and services for young children and their families. A number of initiatives are focusing on cross-sector efforts for children and families. Many states and communities are working toward setting specific standards for measuring progress toward assuring the well-being of children and families.

Parent engagement: A number of initiatives with nationwide reach have made parent and public engagement their focus. At the national level, several projects are working to increase public understanding of the importance of the first three years of life, and to make existing early care and education programs more supportive of families.

At the state and local levels, numerous child care resource and referral agencies are focusing on creative strategies for helping parents become effective consumers of early care and education.

Family support and parent education: Several innovative efforts address early care and education as part of a larger effort to provide more comprehensive family-supportive services for young children and families.

The full *Not By Chance* report offers examples of specific initiatives in each of these areas. Clearly, the early care and education field is rich with traditions and innovative quality-improvement efforts.

REFORM STRATEGIES

For any significant reform to take hold, three challenges must be met: there must be an appropriate knowledge base; an effective, coherent social strategy; and sufficient political will.² Because realization of the vision presented in this report requires nothing less than large-scale reform, we have used these three challenges as a framework for our reform strategy. To ensure an adequate knowledge base, we call for conceptual exploration in areas in which information is lacking. To meet the need for a workable social strategy, we call for comprehensive demonstration of a quality system integrating all of the key components. Finally, to generate public will

Innovative efforts across the country to improve early care and education have developed impressive precedents and inventive strategies which must also be supported.

and commitment, we call for broad-based mobilization with an emphasis on building capacity for parent advocacy, communication, and judicial action.

Conceptual Exploration

The knowledge base concerning young children and early childhood education has been substantially enriched by research and practice in recent decades.³ Indeed, in shaping the eight recommendations contained in this report, we have drawn upon this knowledge—both practical and theoretical. But as we worked toward specifying how to implement those recommendations, we found the knowledge base to be insufficient in several crucial areas, especially Recommendation I (Use a Wide Range of Approaches to Achieve Quality in Programs); Recommendation II (Focus on Goals and Results for Children); and Recommendation VII (Raise New Funds and Set Aside Ten Percent for Quality and Infrastructure).

While much work has been done on program quality, more research is needed to discern the appropriate balance between teacher qualifications, their experiences, student make-

Most reform initiatives have operated independently from one another, and the goals they have achieved, while important, have tended to be short-term or to affect a limited number of children. Most have addressed a single aspect of the quality crisis.

up and child-adult ratios. Work is also needed to advance understanding regarding early care and education as nourishing environments for adults. With regard to goals and results, desired results have not been delineated, and methods for collecting information

that fully respect young children's developmental levels and effective accountability mechanisms and safeguards have not been discerned. Finally, analytic work is also needed regarding funding amounts and funding mechanisms. We need to

better understand the relationship between such mechanisms and delivery systems, and the relationship between funding strategies and funding amounts.

Comprehensive Demonstration

The exemplary efforts reviewed by *Quality 2000*, and many other initiatives now underway, are impressive in their own right. Yet, even taken together they are not sufficient to achieve a comprehensive quality early care and education system throughout the country. Severe resource constraints and constant pressure to meet the rising demand for services have limited the scale of most change efforts in early care and education. Most reform initiatives have operated independently from one another, and the goals they have achieved, while important, have tended to be short-term or to affect a limited number of children. Most have addressed a single aspect of the quality crisis. Hundreds and thousands of miles separate many of the most promising efforts in the field, and the occurrence of multiple reforms in the same community or state is usually serendipitous, with minimal coordination of effort. In no community or state are all the pieces of the early care and education system being reformed simultaneously.

Because a quality early care and education system cannot be achieved piecemeal, our second strategy for reform is to launch a comprehensive demonstration effort in a handful of communities and states. We need to experiment with implementing a quality early care and education system, including quality programs, parent engagement and information, and all the components of the infrastructure—professional development, facility licensing, funding and financing, and governance. The goal is to implement all eight recommendations in a handful of locations, by providing the necessary resources and supports to a small number of promising communities and states. It may be desirable to select demonstration communities and states that already have a high concentration of efforts and show commitment to

reform. Government, corporate, and foundation funds will need to be combined to provide sufficient resources, and funding will need to extend beyond the conventional three- to five-year time frame. Efforts to implement a quality early care and education system will need to be evaluated carefully to distill lessons within and across the projects and to document the results for children, families, communities, and policy. The comparative benefits—including cost efficiencies—will need to be clearly documented.

Broad-based Mobilization

The third challenge of reform is to generate public will—the widespread conviction that reform is both necessary and feasible—across the nation. To accomplish this, we suggest building capacity for:

Parent Advocacy: Parents of young children reside in every state and every congressional district; together, they constitute a powerful political force and an essential lever for change. But at present, there is no organization for parents of young children analogous to those that have been formed by and for parents of children with special needs, nor for that matter, similar to the American Association of Retired People (AARP). Organizing parents for advocacy must begin at the local level so parents can address the immediate and concrete issues that concern them daily.⁴ Early care and education programs, child care resource and referral agencies, family support programs, and Local Early Care and Education Boards can help support local parent mobilization around young children, but ultimately these efforts must be led by parents themselves. These local efforts can link up to create informal state and national advocacy networks, and to influence state funding and policy decisions. Eventually, permanent state and national organizations may be created to represent the interests of parents in sustained ways in state and federal policy debates. Providing advocacy training and support is a key

strategy for sparking parent action. Parent leaders can be trained to be community leaders, with parents at the helm of the training itself. Training needs to “help parents have the voice they don’t think they have . . . and give them the tools to speak for their children.”⁵

Broad-based Constituency: Parents alone are not sufficient to mobilize the kinds of change discussed in this report. They must be joined by a broad-based constituency committed to advancing the well-being of young children and their families. Such a constituency must be composed of power voices, leaders in media, business and industry, members of the clergy, and lay citizens. The development of such a constituency must be strategically planned over time, using the intellectual and fiscal resources of many.

Effective Public Communication: Effective communication to the public is an essential component of generating public will and mobilizing broad-based constituencies. The challenge is to build capacity for ongoing communication. Clearly defining and naming the problem is the first step, as experience in other fields suggests. For example, scientists had been monitoring rising levels of carbon dioxide in the atmosphere since the early 1970s, but not until the name “global warming” was introduced by a NASA meteorologist in testimony before Congress in mid-1988 did the issue become a matter of public debate.⁶ As problems are named, they must be carefully positioned—that is, associated with the right set of issues. Developing a communications strategy includes mobilizing the media, the most potent force in shaping public opinion and attitude. Coverage needs to be far more balanced, conveying the importance of quality and the importance of early care and education. Moreover, the durable capacity for effective communication within early care and education and with those concerned about the needs of young children must be advanced.



Judicial Action: Court action has often been the key to durable systemic reform in the United States. Up to now, early care and education has rarely looked to the judicial arena as a means of advancing its agenda. In part, this may reflect the fact that judicially-propelled change can be slow, often requiring years of litigation, diligent monitoring of court decisions, and numerous follow-up lawsuits. In spite of these challenges, the early care and education field needs to consider creating a capacity for judicial action to augment other reform efforts. Language in legislation that makes early care and education services an entitlement has already proven to be a strong statutory basis for litigation. Discrimination is another possible basis for judicial action in early care and education, aimed at extending programs to more young children.

THE PLAYERS

Together, the eight recommendations presented in this report constitute a vision of early care and education that cannot be realized without sweeping reform. Realizing this vision will require the carefully choreographed efforts of a range of individuals, organizations, and institutions. In early care and education, as in other fields, achieving synergy in the efforts of multiple players, at multiple levels, and in multiple systems, is essential. The key to such synergy is coordination and collaboration. Reformers need to devise specific strategies for change, discerning what is appropriate at each level of government, for each set of players, based on their unique strengths. To that end, we must generate a set of appropriate, non-duplicative, and coordinated actions.

The *Quality 2000* recommendations envision a general division of primary responsibility: the federal government should focus on making programs more affordable to parents; states should focus on assuring the quality of programs; and local governments should focus on assuring availability—assessing local needs, addressing gaps, and

coordinating services.⁷ Naturally, these general (and non-inclusive) roles are not the exclusive purview of each level of government, but provide some idea of how primary responsibility might be differentiated across governmental levels. National organizations might carve out distinct roles for themselves that capitalize on their strengths, fully understanding that coalitions will need to be formed and re-formed, depending on the issues under consideration. All players need to work together, focusing both internally (particularly on building a quality infrastructure), and externally (particularly on coordinating efforts with other fields, such as education, family support, social services, health care, economic development, and housing).

The following pages suggest the parts that a wide range of actors, organizations, and sectors can play in a broad nationwide effort to achieve a quality early care and education system. We have matched each group of actors with specific responsibilities, but we are mindful of the fact that to get the job done, all of these players will often work together, across the boundaries that tend to divide different levels of government and different disciplines.

TO THE PRESIDENT, CONGRESS, AND FEDERAL ADMINISTRATION

- Increase funding substantially for quality early care and education, investing in improved compensation, a quality infrastructure, quality programs, and paid parental leave. Assure that all families who want to enroll their young children in quality early care and education can afford to do so. Assure wages for early care and education staff that are commensurate with their experience, education, and training. Use federal funds, to the greatest extent possible, to leverage additional state and local funds.
- Lead and coordinate the movement to build consensus on child-based results—the knowledge and skills children need to be

ready for, and do well in, the critical early years of school. Establish broad goals for child-based results that can guide states in the development of standards and communities in the development of benchmarks to meet state standards and national goals. These goals should be linked to goals for children in kindergarten through grade three.

- Coordinate the collection of uniform data on child-based results nationwide, providing a national picture of progress that can be used for policy, planning, and accountability.
- Hold states accountable for moving toward and achieving child-based results. In the process, use data to track state and community achievement; publicize the results broadly; and provide rewards to states that show continual improvement and targeted assistance to those that do not.
- Provide incentives for states and localities to establish governance structures for early care and education, such as State Early Care and Education Boards and Local Early Care and Education Boards.
- With broad-based input, develop national guidelines for facility licensing standards, and provide incentives for state consideration and adoption.
- Promote innovation, best practices, and information sharing by funding and evaluating demonstration projects; facilitating state and local networking; developing supportive resources; and providing other technical assistance to states and localities.

*TO THE GOVERNORS,
STATE LEGISLATORS,
STATE ADMINISTRATORS,
AND STATE LEADERS*

- Create a governance structure for early care and education in every state, such as State Early Care and Education Boards, to institute ongoing, consolidated state planning

processes aimed at improving the quality of early care and education services.

- Establish state standards for results for preschool-age children, based on the state's unique needs and priorities, elaborating on federal goals for young children.
- Augment federal funds for early care and education with state funds.
- Devise mechanisms for distributing early care and education funds that allow for building and maintaining the infrastructure. Help parents pay for programs and provide paid parental leave.
- Hold localities accountable for moving toward and achieving agreed-upon local benchmarks for young children.
- Pilot and evaluate facility licensing systems that eliminate exemptions of programs from licensing; support enforcement; streamline standards; give programs a range of options for organizing children and staff; and combine incentive-based and more corrective strategies for effective enforcement.
- Pilot and evaluate a system to license all practitioners who have responsibility for groups of young children, in part by passing individual licensing laws and establishing state licensing boards designed to assure that staff are prepared for their roles and pursue lifelong learning. Link all required training to academic credit. Make sure that training and education are affordable both for staff currently in the field and for those who wish to prepare for careers in early care and education.
- Create incentives for programs to become accredited.

*TO LOCAL ELECTED OFFICIALS,
LOCAL ADMINISTRATORS, AND
COMMUNITY LEADERS*

- Create a local governance structure for early care and education in every school district or county, such as Local Early Care and Edu-

cation Boards, responsible for the availability and coordination of the care and education of children from birth to age five.

- Set in motion an ongoing planning process, involving consumers and other community members, to assess community needs, coordinate efforts, and address remaining gaps in programs and the infrastructure.
- Establish performance benchmarks for services and results for young children, based on broad consensus among consumers and other community members. These benchmarks should adapt state standards and national goals for child-based results to local strengths, needs, priorities, and resources.
- Augment federal and state funds for early care and education with local funds.
- Allocate local infrastructure funds in ways that improve program availability, including coordinating existing programs, providing incentives for the development of new services to address unmet needs, and funding demonstration projects.
- Ensure that every community has the capacity to help parents be effective consumers of early care and education programs and to support family child care providers. Create incentives for all early care and education programs to become accredited.
- Engage early care and education workers, and all those concerned about young children, in community-wide improvement efforts.

TO PARENTS

- Secure the knowledge and take the time to find quality programs for young children.
- Contribute toward the cost of children's early care and education programs, based on family income.
- Be partners in children's programs, participating on a regular basis in ways that meet the needs of the children and the programs.

- Lend voice to discussions of how to define quality, establishing goals, results, as well as standards for facility licensing, accreditation, and teacher education curricula.
- Work together with other parents, and with early care and education professionals, to advocate for a quality early care and education system.

TO THE BUSINESS COMMUNITY

- Contribute funds directly to a quality early care and education system by means of a payroll tax or corporate income tax.
- Provide family-friendly workplaces for employees, encouraging supervisors to respond with understanding to the concerns of working parents; allowing flexibility in scheduling the work day; and giving employees time to participate in children's programs and family events.
- Enable parents to take time off from work to care for their infants; protect employees' jobs while they are home; and contribute to the funding of paid parental leave.

TO EARLY CARE AND EDUCATION ADVOCATES AT THE NATIONAL, STATE, AND LOCAL LEVELS

- Work collaboratively and simultaneously toward a shared vision of a quality early care and education system, with an emphasis on adequate funding and direct investment in a quality infrastructure. Each organization needs to fulfill its unique mission, while working collaboratively toward coordinated reform. Durable systemic reform will require the cooperative support of all of the organizations in the field.
- Work with allied fields and organizations to promote understanding of, and support for, early care and education.

- Work with the media to create a sustained capacity for communication, keeping selected messages about early care and education in the public consciousness and on policy makers' agendas.
- Use the court system to advance systemic reform in early care and education.

TO PRACTITIONERS AND ADMINISTRATORS OF EARLY CARE AND EDUCATION PROGRAMS

- Help to identify goals and results, and then work toward using these results day-to-day with children. Use information about child-based results to improve pedagogy and instruction. Share information with parents.
- Help develop positive organizational climates in all early care and education programs—climates that nurture children, staff, parents, and families.
- Support the implementation of flexible, creative staffing patterns.
- Work to create partnerships with parents in programs in ways that meet the needs of parents, children, and programs.
- Help to promote a strong pluralistic society by nurturing the cultural, ethnic, and linguistic diversity of children and families. Learn about differences from the children, families, and staff in programs and in the neighborhood. Hire staff who represent the children and communities served by the program.
- Help promote a quality infrastructure. Early care and education practitioners and administrators can themselves be effective advocates for quality, and can also help to inform and mobilize parents.
- Help integrate services for children and families in communities.

TO EARLY CARE AND EDUCATION PROFESSIONAL ORGANIZATIONS

- Create model standards for individual licenses.
- Expand the capacity to accredit all two- and four-year college early childhood education and child development programs.
- Develop leadership and management training programs, including mentorship programs and leadership training for early childhood educators and others across human services at the local, state, and national levels.
- Work to integrate parents' perspectives into prevailing definitions of quality, based on parents' needs and their desires for their children.

TO TRAINERS OF EARLY CARE AND EDUCATION PRACTITIONERS

- Work to establish more training and education opportunities, particularly at the intermediate and advanced levels, that cover: working with parents and families; working with mixed-age groups and more flexible grouping of children; multiculturalism; observing and assessing children; working with infants and toddlers; and working with children with special needs.
- Work to increase the credit-bearing training available to practitioners and administrators throughout communities, as well as to making articulation agreements among two- and four-year colleges the norm.
- Create mechanisms to grant credit for demonstrated knowledge and skills gained from direct experience with children and previous non-credit training.
- Work with management training programs to customize programs, tracks, and courses appropriate for early care and education.

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TO RESEARCHERS

- Support efforts to specify goals and results. Provide knowledge of human development and assessment that can guide national, state, and local efforts. Link assessments of program quality to the achievement of national child results, state standards, and local benchmarks for child results.
- Conduct controlled experiments and evaluations of different approaches to achieving quality programs, in particular having better qualified staff work with more children, organizing children in mixed-age groups, and allowing child-staff ratios to vary based on the activity. Demonstrate which practices support quality.
- Expand research on the quality of individual classrooms and family child care homes to consider the quality of organizational climates. What characteristics of quality programs—not just individual classrooms—lead to specific, child-based results?
- Tie all research efforts on quality programs and young children to the quality of the infrastructure.
- Consider quality from the perspective of children over the course of the day and from year to year. Design research that not only examines the quality of individual programs, but tracks children across programs during a given year and examines the continuity of children's lives.
- Broaden the range of researchers and coordinate research that examines young children and early care and education, specifically including researchers from economics, political science, public health, law, and medicine.

TO THE PRIVATE AND PHILANTHROPIC SECTORS

- Support the development of comprehensive, model early care and education systems, with all components working synergistically to

achieve quality for children and families. Support the creation of quality community and statewide early care and education systems that can provide models for states and communities across the country.

- Support the conceptual exploration discussed earlier in this chapter, including investigating goals and results; a range of approaches to achieving quality programs; and promising approaches to raising new funds for early care and education.

Today, an unprecedented number of innovative efforts in early care and education constitute a nascent reform movement. The rough planks for a change agenda are already in place—isolated and incomplete, to be sure, but promising nevertheless. Five or ten years ago, there was little talk of an early care and education system; few dared to look beyond individual programs to discern or address the field's common infrastructure needs. Now, in contrast, communities and states across the nation are beginning to address such issues as program quality, parent engagement, professional development, licensing and accreditation, governance, and financing. These disparate efforts must be heralded, supported, and linked to create a coherent movement for change in the early care and education field.

The question is no longer whether a reform movement in early care and education is going to take place. The question is: will reform remain haphazard and loosely organized, or will it harness the crucial supports needed to surge forward with a coherent vision and strategy? The quality of daily life for millions of American children and families hinges on how the United States solves—or fails to solve—the quality crisis in early care and education. We must not wager our children's futures. What is at stake is nothing less than the nation's vitality and well-being as we move into a new millennium. ☀



APPENDICES,
NOTES, AND
REFERENCES

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APPENDICES, NOTES, AND REFERENCES

APPENDIX A: CONSULTANT-PARTNERS

Reconsidering Program Quality

Deborah Phillips, National Research Council

Defining the Essential Functions of the Infrastructure and Change Strategies

Nancy Kolben, National Association of Child Care Resource and Referral Agencies

Patty Siegel, National Association of Child Care Resource and Referral Agencies

Discerning Governance and Business Roles

William Gormley, Georgetown Graduate Public Policy Program

Training and Credentialing

Anne Mitchell, Early Childhood Policy Research

Facility Licensing

Carol Stevenson, The David & Lucile Packard Foundation

Funding and Financing

Martin Gerry, Center for the Study of Family, Neighborhood, and Community Policy, University of Kansas

Cheryl Hayes, The Finance Project

Results and Accountability

Sharon Rosenkoetter, Associated Colleges of Central Kansas

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APPENDIX B: TASK FORCE PARTICIPANTS¹

ESSENTIAL FUNCTIONS AND CHANGE STRATEGIES TASK FORCE

Meetings:

March 1993, May 1993, August 1993, and June 1994

Task Force Co-Chairs:

Nancy Kolben and Patty Siegel, National Association
of Child Care Resource and Referral Agencies

Task Force Members:

Dwayne Crompton, KCMC Child Development
Corporation
Karen Hendricks, American Academy of Pediatrics
Karen Hill-Scott, Crystal Stairs
Anne Mitchell, Early Childhood Policy Research
Gwen Morgan, Wheelock College
Delia Pompa, Education Consultant
Tom Schultz, National Association of State Boards of
Education
Jule Sugarman, Center for Effective Services for
Children
Helen Taylor, Administration for Children, Youth, and
Families

Meeting Consultants:

Helen Blank, Children's Defense Fund
Ellen Galinsky, Families and Work Institute
Barbara Reisman, Child Care Action Campaign

GOVERNMENT AND BUSINESS ROLES TASK FORCE

Meetings:

August 1993, December 1993, April 1994, and
November 1994

Task Force Members:

Rex Adams, Mobil Corporation
Gordon Ambach, Council of Chief State School
Officers
Michael Bailin, Public/Private Ventures
Gordon Berlin, Manpower Demonstration Research
Corporation
Barbara Bowman, Erikson Institute
Norton Grubb, School of Education, University of
California at Berkeley
William Gormley, Graduate School of Public Policy,
Georgetown University
Sheila Kamerman, School of Social Work, Columbia
University
Susan Rose-Ackerman, Yale Law School
Lester Salamon, Institute for Policy Studies, Johns
Hopkins University

TRAINING AND CREDENTIALING TASK FORCE

Meetings:

March 1994, July 1994, October 1994, and June 1995

Task Force Chair:

Anne Mitchell, Early Childhood Policy Research

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1. Affiliations indicated as of Task Force meeting dates.

Task Force Members:

Sue Bredekamp, National Association for the
Education of Young Children

Richard Clifford, Frank Porter Graham Child
Development Center, University of North
Carolina

Diane Trister Dodge, Teaching Strategies
Yolanda Garcia, Santa Clara County Office of
Education

Stacie Goffin, Ewing Marion Kauffman Foundation

Betty Hutchinson, National-Louis University

Joan Lombardi, Administration for Children, Youth,
and Families

Kathy Modigliani, Wheelock College

Evelyn K. Moore, National Black Child Development
Institute

Gwen Morgan, Wheelock College

Carol Phillips, Council for Early Childhood
Professional Recognition

Arthur Wise, National Council for Accreditation of
Teacher Education

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NOT BY CHANCE

66

APPENDIX C: PARTICIPANTS IN RELATED MEETINGS¹

FACILITY LICENSING

Washington, D.C. Meeting:
March 1993

Meeting Participants:

Helen Blank, Children's Defense Fund
Harriet Fields, National Citizen's Coalition for Nursing Home Reform
William Gormley, Graduate School of Public Policy, Georgetown University
Paulene Koch, Delaware Department of Services for Children, Youth, and Families
Gwen Morgan, Wheelock College
Deborah Phillips, National Research Council, Board on Children and Families
Ruth Ruttenberg, Ruth Ruttenberg and Associates, Inc.

San Francisco Meeting:
April, 1993

Meeting Participants:

Eugene Bardach, University of California at Berkeley
David Dodds, Community Care Licensing Division, California Department of Social Services
Erica Grubb, Attorney
Nettie Hoge, Consumers Union
Pat McGinnis, California Advocates for Nursing Home Reform
David Roe, Environmental Defense Fund
Carol Stevenson, Child Care Law Center

FOR-PROFIT PERSPECTIVES

Meeting:
April 1995

Meeting Participants:

Carol Hammer, La Petite Academy
Tom McClellan, KinderCare Learning Centers
Bill VanHuys, Childtime Childcare

Beverly Clark, Massachusetts Independent Child Care Association

Nancy Granese, Hogan and Hartson
Missy Webb, Virginia Child Care Association
Roger Neugebauer, Child Care Information Exchange
Lynn White, National Child Care Association

FUNDING AND FINANCING

Roundtable on Financing for Early Care and Education:²
June 1994

Meeting Participants:

Glenda Bean, Arkansas Department of Education
Helen Blank, Children's Defense Fund
Barbara Blum, Foundation for Child Development
Cynthia Brown, Council of Chief State School Officers
Charles Bruner, Child and Family Policy Center
Barbara Curry, Lexington-Fayette Urban County Government
Ira Cutler, The Annie E. Casey Foundation
Ellen Dean, Pew Charitable Trusts
Margaret Dunkle, Institute for Educational Leadership
Barbara Dyer, National Academy of Public Administration
Frank Farrow, Center for the Study of Social Policy
Mark Friedman, Center for the Study of Social Policy
Robert E. Fulton, National Center for Children in Poverty, Columbia University
Ellen Galinsky, Families and Work Institute
Sid Gardner, Center for Collaboration for Children, California State University
Peter Gerber, The MacArthur Foundation

1. Affiliations indicated as of Task Force meeting dates.

2. This meeting was held in conjunction with The Finance Project: Toward Improved Ways and Means of Financing Education and Other Children's Services.

Martin Gerry, The Austin Project, University of Texas
 Stacie Goffin, Ewing Marion Kauffman Foundation
 Steven Gold, Center for the Study of the States, State
 University of New York
 Cheri Hayes, The Finance Project
 Sonia Hernandez, Office of the Governor of Texas
 Judith E. Jones, National Center for Children in
 Poverty, Columbia University
 Kate Kelleher, The Finance Project
 Robert H. Koff, The Danforth Foundation
 Linda Kohl, Office of the Governor of Minnesota
 Anne C. Kubisch, Roundtable on Comprehensive
 Community Initiatives for Children and Families,
 The Aspen Institute
 Michael Levine, The Carnegie Corporation of New York
 Janet Levy, The Danforth Foundation
 Elise Lipoff, The Finance Project
 Trinita Logue, Illinois Facilities Fund
 Joan Lombardi, U.S. Department of Health and
 Human Services
 Kathy Martin, Missouri Department of Social Services
 Linda McCart, National Governors' Association
 Astrid E. Merget, U.S. Department of Health and
 Human Services
 Shelby Miller, Consultant
 William A. Morrill, National Center for Service
 Integration, MathTech, Inc.
 Nina Sazer O'Donnell, NSO Associates
 Barbara Reisman, Child Care Action Campaign
 Donna Rhodes, C.S. Mott Foundation
 John Riggan, The Conservation Company
 Douglas B. Roberts, Treasurer, State of Michigan
 Lisbeth B. Schorr, Harvard University Project on
 Effective Services
 Tom Schultz, National Association of State Boards of
 Education
 Robert G. Schwartz, Juvenile Law Center
 Ann Segal, U.S. Department of Health and Human
 Services
 Susan Hirsch Simmons, Miriam and Peter Haas Fund
 Ralph Smith, Philadelphia Children's Network
 Thomas J. Smith, Public/Private Ventures
 Louis Stoney, Stoney Associates
 Jule M. Sugarman, Center for Effective Services for
 Children
 Alexandra Tan, The Finance Project
 Barbara Willer, National Association for the Education
 of Young Children
 Judy Wurtzel, U.S. Department of Education

*Funding and Financing a Quality Early Care
 and Education System:*³

October 1994

Meeting Participants:

Steve Barnett, Rutgers Graduate School of Education
 Helen Blank, Children's Defense Fund
 Mark Friedman, Center for the Study of Social Policy
 Martin Gerry, Center for the Study of Family,
 Neighborhood, and Community Policy, University
 of Kansas
 William Gormley, Georgetown Graduate Public Policy
 Program
 Deanna Gombly, The David and Lucile Packard
 Foundation
 Karen Hill-Scott, Crystal Stairs
 Marsha Regenstein, The Economic and Social
 Research Institute
 Jule Sugarman, Center for Effective Services for
 Children

ACCOUNTABILITY⁴

*Issues Forum on Child-Based Outcomes,
 Meeting 1:*

June 1995

Meeting Participants:

Larry Aber, National Center for Children in Poverty,
 Columbia University
 Barbara Blum, Foundation for Child Development
 Sue Bredekamp, National Association for the
 Education of Young Children
 Cynthia Brown, Council of Chief State School Officers
 Charles Bruner, Child and Family Policy Center
 Bettye Caldwell, Arkansas Children's Hospital
 Ellen Galinsky, Families and Work Institute
 Stacie Goffin, Ewing Marion Kauffman Foundation
 Sarah Greene, National Head Start Association
 Kenji Hakuta, School of Education, Stanford University
 Mary Kimmins, Maryland State Department of
 Education
 Luis Laosa, Educational Testing Service
 Mary Lerner, The David and Lucile Packard Foundation
 Michael Levine, The Carnegie Corporation of New York
 Joan Lombardi, U.S. Department of Health and
 Human Services

3. This meeting was co-sponsored by *Quality 2000* and The David and Lucile Packard Foundation.

4. These meetings were co-sponsored by the W. K. Kellogg Foundation, the Carnegie Corporation of New York, and *Quality 2000*.

John Love, Mathematica Policy Research, Inc.
 Samuel J. Meisels, University of Michigan
 Janice Molnar, Ford Foundation
 Kristin Moore, Child Trends
 Frederic Mosher, The Carnegie Corporation of New York

Deborah Phillips, National Research Council
 Craig Ramey, Civitan International Research Center,
 University of Alabama at Birmingham
 Sharon Rosenkoetter, Bush Center in Child
 Development and Social Policy, Yale University
 Lisbeth Schorr, Harvard University Working Group on
 Early Life
 Diana Slaughter-Defoe, School of Education and
 Social Policy, Northwestern University
 Robert Slavin, Johns Hopkins University
 Valora Washington, The W.K. Kellogg Foundation
 David Weikart, High/Scope Educational Research
 Foundation
 Charles E. Wheeler, Walter R. McDonald & Associates
 Sheldon White, Department of Psychology and Social
 Relations, Harvard University
 Emily Wurtz, Education Aide to Senator Jeff Bingaman
 Nicholas Zill, Westat, Inc.

*Issues Forum on Child-Based
 Outcomes, Meeting 2:*
 January, 1996

Meeting Participants:

Barbara Blum, Foundation for Child Development
 Barbara Bowman, Erikson Institute
 Sue Bredekamp, National Association for the
 Education of Young Children
 Cynthia Brown, Council of Chief State School Officers
 Nancy Cohen, Yale University, Bush Center in Child
 Development and Social Policy
 Ellen Galinsky, Families and Work Institute
 Eugene Garcia, Graduate School of Education,
 University of California Berkeley
 Sharon L. Kagan, Yale University, Bush Center in
 Child Development and Social Policy
 Luis Laosa, Educational Testing Service
 Michael Levine, Carnegie Corporation of New York
 John Love, Mathematica Policy Research, Inc.
 Kristin Moore, Child Trends
 Michelle Neuman, Yale University, Bush Center in
 Child Development and Social Policy
 Gregg Powell, National Head Start Association
 Sharon Rosenkoetter, Associated Colleges of Central
 Kansas
 Jack Shonkoff, Heller Graduate School, Brandeis
 University

Gary J. Stangler, Missouri Department of Social
 Services
 James Ysseldyke, National Center on Educational
 Outcomes, University of Minnesota

“LESSONS FROM THE PAST”

Meeting:
 May 1993

Meeting Participants:

Barbara Bowman, Erikson Institute
 Urie Bronfenbrenner, College of Human Ecology,
 Cornell University
 Elinor Guggenheimer, New York Women's Agenda
 Sheila Kamerman, School of Social Work, Columbia
 University
 Julius Richmond, Department of Social Medicine,
 Harvard Medical School
 June Sale, University of California at Los Angeles
 Child Care Services
 Sheldon White, Department of Psychology and Social
 Relations, Harvard University
 Docia Zavitovsky, Child Development Specialist
 Edward Zigler, Bush Center in Child Development
 and Social Policy, Yale University

PARENT PERSPECTIVES

Meeting:
 December 1992

Meeting Participants:

Duane Dennis, Baltimore City Child Care Resource
 and Referral Center
 Elaine Fersh, Parents United for Child Care
 Shelly Hettleman, Parent Action
 Sandra Hofferth, The Urban Institute
 Betty Holcomb, Working Mother Magazine
 Katy Hopke, Mothers Clubs
 Nancy Kolben, National Association of Child Care
 Resource and Referral Agencies
 Mary Ann Patterson, Children's Services of Fairfax
 County
 Toni Porter, Center for Family Support, Bank Street
 College of Education
 Barbara Reisman, Child Care Action Campaign
 Rosalie Streett, Parent Action
 Yasmina Vinci, National Association for Child Care
 Resource and Referral Agencies
 Caroline Zinsser, The Rockefeller Brothers Fund

CONFERENCE SESSIONS FOR FEEDBACK FROM THE FIELD

Families and Work Institute's Community
Development Forum: February 1993, August 1994
National Association of Child Care Resource and
Referral Agencies Conference
(NACCRRA): February 1994, February 1995, February
1996
National Association for the Education of Young
Children Conference (NAEYC): November 1994,
November 1995, November 1996
NAEYC Professional Development Conference: June 1995

FEEDBACK ON DRAFT VISION OF A QUALITY EARLY CARE AND EDUCATION SYSTEM⁵

Lawrence Aber
Martha Anderson
Gordon Berlin
Lynson Moore Bobo
Barbara Bowman
Helen Blank
Sue Bredekamp
Cynthia Brown
Mary Beth Bruder
J. Patrick Byrne
Hedy Chang
Richard Clifford
Joan Costley
Diane Dodge
Deborah Eaton
Emily Fenichel
Elaine Fersh
Richard Fiene
Ellen Galinsky
Andrea Genser
Martin Gerry
Stacie Goffin
Yolanda Garcia
William Gormley
Sarah Greene
Kenji Hakuta
Cheri Hayes
Karen Hendricks
Bruce Hershfield
Pauline Koch

5. We are grateful for the feedback—both formal and informal—of colleagues on drafts of the vision for a quality early care and education system that underlie this report, and on drafts of the report itself. We apologize if we have inadvertently omitted anyone from these lists of people who provided comments on drafts.

Nancy Kolben
Karen Kroh
Betty Hutchinson
Sheila Kamerman
Patricia Kreher
Mary Larner
Michael Levine
Mary Kay Leonard
Joan Lombardi
Shelby Miller
Anne Mitchell
Kathy Modigliani
Gwen Morgan
Evelyn Moore
Elizabeth Mostophapor
Carol Phillips
Deborah Phillips
Delia Pompa
Toni Porter
Darlene Ragozzine
Marsha Regenstein
Barbara Reisman
Gail Richardson
Sharon Rosenkoetter
Nicholas Scalera
Thomas Schultz
Lawrence Schweinhart
Michelle Seligson
Patty Siegel
Jule Sugarman
Candice Sullivan
Helen Taylor
Theresa Vast
Yasmina Vinci
Claudia Wayne
Bernice Weissbourd
Barbara Willer
Caroline Zinsser

FEEDBACK ON DRAFT FINAL REPORT⁶

Hedy Chang
Deborah Eaton
Emily Fenichel
Ellen Galinsky
William Gormley
Pauline Koch
Michael Levine
Anne Mitchell
Kathy Modigliani
Gwen Morgan
Elizabeth Mostophapor
Lawrence Schweinhart
Theresa Vast
Barbara Willer

APPENDIX D: COMMISSIONED WORKING PAPERS

RECONSIDERING PROGRAM QUALITY

Expanding the Lens on Child Care: International Approaches to Defining Quality Jennifer Bush, Graduate Public Policy Program, Georgetown University; and Deborah Phillips, Ph.D., National Research Council, Institute of Medicine

Parents' Perspectives on Quality in Early Care and Education Mary Larner, Ph.D., National Center for Children in Poverty, Columbia University

Multicultural Perspectives on Quality in Early Care and Education: Culturally-Specific Practices and Universal Outcomes Nancy E. Cohen, Bush Center in Child Development and Social Policy, Yale University; and Delia Pompa, Education Consultant

Approaches for Improving the Quality of Family Child Care: Lessons Learned from a Decade of Demonstrations and Systemic Changes Shelby H. Miller, Early Childhood Program and Policy Consultant

Reconsidering Quality in Early Care and Education Deborah Phillips, Ph.D., National Research Council, Institute of Medicine

DEFINING THE ESSENTIAL FUNCTIONS AND CHANGE STRATEGIES

A Vision for an Early Care and Education System Quality 2000 Essential Functions and Change Strategies Task Force

The Essential Functions of the Early Care and Education System: Rationale and Definition Quality 2000 Essential Functions and Change Strategies Task Force. Sharon L. Kagan, Ed.D., Editor

Communications Strategy for Policy Agenda Setting Kathy Bonk, Communications Consortium; and Meredith Wiley, J.D., M.P.A., Columbia Graduate School of Journalism

The IAF and Education Reform: Organizing Constituents for Change Ernesto Cortés, Jr., Industrial Areas Foundation

The Individuals with Disabilities Education Act: The Synchrony of Stakeholders in the Law Reform Process H. Rutherford Turnbull, LL.B., LL.M., and Ann P. Turnbull, Ed.D., Beach Center on Families and Disability, University of Kansas

Toward Democratic Practice in Schools: Key Understandings About Educational Change Ann Lieberman, Ed.D., Diane Wood, and Beverly Falk, Ed.D., Teachers College, Columbia University

Transforming Access Into Influence: The Alchemy of Citizen Participation in U.S. Politics Christopher Howard, Ph.D., Department of Government, College of William and Mary

Approaches to Social Change: Lessons for Early Care and Education Eliza Pritchard, Sharon L. Kagan, Ed.D., and Nancy E. Cohen, Bush Center in Child Development and Social Policy, Yale University

DISCERNING GOVERNANCE AND BUSINESS ROLES

Promoting High-Quality Family Child Care Kathy Modigliani, Ed.D., Wheelock College

Alternative Approaches to Regulation of Child Care: Lessons From Other Fields Katherine L. Scurria, J.D.

Finding Common Ground in the Early Childhood Field: An Examination of the For-Profit Sector's Views of Government Roles in Early Care and Education Katherine L. Scurria, J.D. and Sharon L. Kagan, Ed.D., Bush Center in Child Development and Social Policy, Yale University

Options for Government and Business Roles in Early Care and Education: Targeted Entitlements and Universal Supports William Gormley, Ph.D., Graduate School

of Public Policy, Georgetown University; and Sharon L. Kagan, Ed.D. and Nancy E. Cohen, Bush Center in Child Development and Social Policy, Yale University

TRAINING AND CREDENTIALING

International Approaches to Training and Credentialing in Early Care and Education Eliza Pritchard, Bush Center in Child Development and Social Policy, Yale University

Preparation and Credentialing: Lessons From Other Occupations for the Early Care and Education Field Anne Mitchell, Early Childhood Policy Research

A Proposal for Licensing Individuals who Practice Early Care and Education Anne Mitchell, Early Childhood Policy Research

FUNDING AND FINANCING

*Financing Children's Services: Exploring the Options*⁶ Martin H. Gerry, J.D., The Austin Project, The University of Texas at Austin

RESULTS AND ACCOUNTABILITY

*Toward Systemic Reform: Service Integration for Children and Families*⁷ Sharon L. Kagan, Ed.D., Bush Center in Child Development and Social Policy, Yale University; Stacie Goffin, Ed.D., Ewing Marion Kauffman Foundation; Eliza Pritchard and Sarit Golub, Bush Center in Child Development and Social Policy, Yale University

*Considering Child-based Outcomes for Young Children: Definitions, Desirability, Feasibility, and Next Steps*⁸ Sharon L. Kagan, Ed.D., Sharon Rosenkoetter, Ed.D., and Nancy Cohen, Bush Center in Child Development and Social Policy, Yale University

6. This Working Paper was a joint product of *Quality 2000* and The Finance Project: Toward Improved Ways and Means of Financing Education and Other Children's Services.

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- a. *Quality 2000* includes and considers all children from birth to age eight as potential beneficiaries of early care and education: children with and without special needs; children who are mono-, bi-, and multilingual; children from families that are economically advantaged, middle-income, working poor, dependent on public assistance; and children from single-parent, two-parent, traditional, and non-traditional families. Within the birth to age eight range, this report focuses primarily on birth to age five. We use the term "infants and toddlers" to refer to children from birth to age three; "preschoolers" to refer to children who are ages three to five; "young children" includes youngsters from birth to age eight.
- b. Throughout this report, we use the term "parents" to include those with primary caretaking responsibility for children, regardless of biological relationship. "Families" are broadly construed to include those individuals whom parents and children define as being part of their families, often those who have ongoing contact and responsibility for the well-being of children.
- c. Throughout this document, the term "early care and education programs" is used to refer to both center-based and home-based services that provide non-parental care and education for young children. Center-based programs include non-profit and for-profit child care, Head Start and other comprehensive development programs, school-based prekindergarten programs, and part-day nursery schools; home-based programs include family child care. The term "early care and education" was chosen to unite child care and early childhood education services and to emphasize that all programs with responsibility for young children necessarily provide both care and education; the question is just how well they do it.

The *Quality 2000* initiative focused on early care and education programs for children from birth to the age of school entry, usually at five. *Quality 2000* did not address directly before-school, after-school, and school-vacation programs for children age five

- to 13. Discussions with representatives from the school-age child care community illustrated that school-age programs span several fields, including early care and education, youth development, and crime prevention. As a result, *Quality 2000* does not make specific recommendations regarding school-age child care, although parts of the vision could be expanded to embrace such programs.
- d. Throughout this document, the term "kin" refers to individuals who are caring for related children only. The term "kith" refers to individuals who are caring for the child or children of one unrelated family. Care by kith and kin is not regarded as a public service.
- e. We use the terms "workers," "staff," and the "work force" generically, referring to those who work in the early care and education field, including those who work in center-based programs, family child care homes, resource and referral agencies, training institutions, public and private agencies, and research organizations. More narrowly, we use the term "administrator" for those who administer or direct programs, services, or systems. Individuals who work directly with children, irrespective of setting, are called "practitioners." "Teachers," "assistant teachers," and "aides" work with children in center-based programs while "providers" work with children in, and usually run, family child care homes.
- f. The term "professional development" refers to all the ways in which early care and education workers increase their skills and knowledge to provide quality programs for children and parents. Professional development encompasses "general education" and "early childhood-related training and education." "General education" is any coursework not related to young children or their families that is offered by formal, academic institutions, such as high schools, vocational schools, colleges, and graduate programs. "Early childhood-related training and education" is any coursework related to young children or their families that is offered by formal, academic institutions, such as high schools, vocational schools, colleges, and graduate programs.

ing and education" is any instruction directly related to young children and their families, in areas including child, human, and family development, early childhood education, child psychology, and early childhood administration. It encompasses training offered at conferences, by community organizations, and by mentors, as well as more formal academic courses offered by high schools, vocational schools, colleges, and graduate programs. General education and early childhood-related training and education can be pursued in preparation for working in a particular position with young children ("preservice" professional development), or to improve one's skills while employed in early care and education settings

- ("inservice" or "ongoing" professional development).
- g. It is important to emphasize that licensing individuals cannot replace facility licensing; licensing both individuals and facilities works to protect children from harm and ensure basic health, safety and development. Licenses for individuals would specify the required preparatory and ongoing training and education and level of competency that staff must have; facility licenses, meanwhile, would specify basic standards to ensure that facilities promote the health, safety, and development of children, including which licenses individuals must hold to be hired for a particular role.

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NOT BY CHANCE

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Part One

THE QUALITY CRISES: REALITIES, ROOTS, SIGNIFICANCE, TIMING

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