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ABSTRACT

Throughout the past decade, questions of how young children should be prepared for school and how schools should best serve them have been an important part of the national agenda. This change brief defines the problem of children's school readiness and discusses what can be done to give young children better early care and education. The brief maintains that in the past, investing in young children was not a national cause, because parents were at home, early years were not thought to be significant, and early care services were costly. Currently, the majority of mothers with children younger than 3 years are employed, numerous studies highlight the importance of early experience for later development, and early care and education offers an excellent return on the investment. Promising efforts to serve young children are then described, including programs serving particular subgroups, subsidies to providers, facilities investments, enhancement of the quality of the workforce, the move toward universal preschool, and expanded state spending. The brief then highlights elements of an agenda for a comprehensive system of early care and education: (1) a vision of childhood; (2) high-quality, easily accessible programs; (3) a quality infrastructure; (4) a financing plan; and (5) a social strategy to achieve these aims. The brief concludes by asserting that achieving this agenda will require the commitment of many members of society; specific suggestions for policy consideration are delineated. (Contains 30 references.) (KB)

Giving America's Young Children A Better Start: A Change Brief

By Sharon Lynn Kagan

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Throughout the past decade, questions of how young children should be prepared for school and how schools should serve them best have soared to the top of the national agenda. Amidst hundreds of conferences and reports and scores of noteworthy initiatives, considerable advances have been made. Yet, a decade later, the issue of how best to promote children's school readiness remains unsolved. The purpose of this *Change Brief* is to define this problem and to discuss what can be done to give young children better early care and education.

Defining the Problem

In a world where young children are routinely (and sometimes majestically) served, it seems odd that America, a nation so concerned about human rights and social equity, would not have had young children higher on its social agenda long before now. Armed, however, with a history that promotes the privacy and the primacy of the family, this nation has been reluctant to intervene in family affairs (Cahan, 1989; Steiner, 1981). Unlike universal public education, services for children younger than age 5, were summarily discounted as a parental – not a societal – right and responsibility. Only in rare exceptions – when parents could not care for their children or in times of great national crises (such as the Great Depression and World War II) – did government see fit to pierce this private sanctum. And pierce it, it did, launching robust commitments to young children and their families. At the end of the crises, more often than not, the efforts were terminated summarily, leaving America's young children with a set of inconsistent and episodic policy starts and stops.

The legacies of America's rather "helter-skelter, respond-to-the-crisis-of-the-moment" approach to public policy for young children are legion. First, services are not readily and equitably available to all. Indeed, often it is the children who are known empirically to benefit most from early care and education services who have least access to them (Schulman, 2000; U.S. General Accounting Office, 1995). Even when services are available, parents are the prime payers, often expending more of their income for child care and early education than they do for college ... at precisely the time in life when they are beginning their careers and can least afford such burdensome expenditures. Payment for early care and education can amount to 7% of annual income, often soaring higher for low- and moderate-income families (Schulman, 2000). And, even if parents can find care and afford such services, often they are of such poor quality as to compromise children's development (Blank, Schulman and Ewen, 1999; Campbell and Ramey, 1994; Cost, Quality and Outcomes Team, 1995; Vandell and Wolfe, 2000).

Such situations are even more problematic, given the ages (birth to age 5) of the children involved and given what we now know about their development. Study after study unequivocally documents that the early years are critical to a child's long-term development (Barnett, 1993; Barnett, Young and Schweinhart, 1998; Howes, Phillips and Whitebook, 1992; National Research Council, 2000; Weikart and Schweinhart, 1997). Current "brain research" clearly attests to the need to provide nurturing, educationally stimulating experiences in the early years (National Research Council/Institute of Medicine, 2000; Peterson, 1994; Shore, 1997). Even the harshest critics of this research, who express concern about its over-application, contend that the early years are critical to a child's development (Bruer, 1999). Beyond debate, America knows how to establish early care and education programs of quality (Goffin, 1994; Kagan and Cohen, 1997; Kontos and Fiene, 1991). Moreover, we know that such quality programs yield short- and long-term benefits for child development. Society also benefits by saving significant dollars because fewer children are: (1) retained in grade; (2) referred for special services; (3) dependent on welfare and (4) incarcerated as adults. (Blank et al., 1999; Schweinhart, Barnes and Weikart, 1993).

In decades past, the prevailing ethos of modest public investment in young children was hardly a national cause celebre. Parents were home, the early years were not thought to be all that significant and early care services were costly. Today, armed with solid research, we know none of these facts are true. First, parents, even those with young infants, are in the workforce. In fact, 55% of mothers with a child younger than age 3 are currently employed (1997 National Survey of America's Families). Second, new insights into brain development and numerous long-term studies have proven that the early years matter, and matter significantly (Shore, 1997). Third, early care and education offer a return on investment that is perhaps unparalleled in any sphere of education, with estimates that a dollar invested in young children saves at least $7 in expenditures (Schweinhart et al., 1993).

Given these contemporary realities, doing nothing more for young children than we have done in the past means ignoring the use of science and research, the mark of an unthinking society. It means discounting our fiscal responsibility to do what we know pays off, the mark of a fiscally imprudent society. And it means acknowledging that the rhetoric about young children far outpaces our social commitment to them, the mark of an uncaring society. In truth, America is none of these. America cares about its children, but it may be perplexed about how to proceed to serve them in a manner consistent with its ideals and realities.

What Can America Do To Improve Its Services to Young Children?

Discern Where We Are . . .

The past decade has been filled with hundreds of inventive, promising efforts. What are they and what can we learn from them? Essentially, the efforts may be classified into six major groups, each briefly discussed below. The first group provides direct programs that serve particular subgroups of young children. Among many examples, Wisconsin has funded $15 million dollars to establish state of the art early learning centers for low-income children. New Jersey has allocated $354,000 for programs to improve the quality of care in approved home-provider facilities, with an emphasis on serving Latino families (Blank and Poersch, 2000). Many states (Connecticut, Kansas, Minnesota, New Hampshire, New Jersey, New Mexico, Ohio, Oklahoma, Oregon, Rhode Island and Wisconsin) have made considerable investments in Head Start programs for low-income children (Mitchell, Stoney and Dichter, 2001). Other efforts have been directed at newborns, with Maine extending its support via the Healthy Families Initiative. Minnesota supports an At-Home Infant Care Program that allows parents who are eligible for child care assistance to stay home with their infants during the first year of life (Blank and Poersch, 2000). However worthwhile, these efforts serve limited population segments.

A second form of investment relates to subsidies. Increases in subsidy rates have taken two primary forms: first, some states have increased their subsidy payments to providers to equal 75% of what providers in the private market earn. States that have done this include: Arizona, Delaware, Maryland, Montana, Nebraska, North Dakota, Pennsylvania, Tennessee, Washington, West Virginia, Wisconsin and Wyoming (Blank and Poersch, 2000). A second form of increased subsidy occurs when states provide higher reimbursements to programs that meet specific characteristics (e.g., provide higher quality services, provide off-hour services). Often called "differential reimbursement," this strategy acts as an effective incentive and is operative in many states, though all do it somewhat differently. For example, Arizona offers a 10% rate differential for nationally accredited programs; California raised rates for odd-hour care and children with disabilities; and Oregon offers higher rates to providers who meet specified training requirements. Some states also have revised their subsidy structures to improve access to child care assistance. For example, in 1999, 17 states raised income eligibility guidelines (Delaware, Florida, Georgia, Illinois, Kentucky, Maryland, Mississippi, New Hampshire, North Carolina, Oklahoma, Pennsylvania, Rhode Island, South Dakota, Texas, Washington, West Virginia and Wisconsin) (Blank and Poersch, 2000). The use of these subsidy alternatives has been a potent policy force.

A third type of investment is related to facilities and includes direct investment or encouraging investment. In Ohio, the legislature set aside $3 million in 1995 that has increased to $17.3 million to support a linked deposit system that helps lower the cost of loans made to child care facilities to support capital improvements. In Massachusetts, the Child Care Capital Investment Fund pools grants and loans from public and private sources, with the funds being used by child care providers to fund any capital project that expands or improves physical space or equipment (Mitchell et al., 2001).

A fourth type of investment seeks to enhance the quality and sustainability of the early care and education workforce. Most of these efforts provide supports and incentives for individuals, though some provide incentives for programs that are credentialed (accredited). Basically, these efforts fall into several subcategories, including teacher training, supports for credentialing and accreditation and supports for compensation and retention. Many states provide supports and incentives to make training for those who work with young children more affordable and accessible. The strategies vary considerably, with most providing funds to support a statewide training entity that, in turn, provides the training and assures that individuals will receive credit for it. Connecticut's Charts-a-Course program is among the most comprehensive and well-coordinated of this kind of effort. The TEACH program, begun in North Carolina, is being adopted in many states (Schulman, Blank and Ewen, 1999). Montana awards grants to four-year higher education institutions to build their early childhood programs (Blank and Poersch, 2000). With regard to credentialing and accreditation, some states provide direct incentives for those who achieve such credentials (Michigan). New Hampshire has enacted legislation to create a professional credentialing program for child care workers. Florida has passed a Gold Seal program that provides incentives for programs reaching accreditation (Blank and Poersch, 2000). Other states making considerable investments in professional development include: Georgia, Maryland, Michigan, Missouri, New Jersey, New York and Oklahoma (Schulman et al., 1999). Finally, a growing number of efforts in this category enhance compensation and retention of the workforce. California established the California Early Childhood Mentor Teacher Program wherein experienced teachers serve as models and receive a stipend for their work (Dombro, O'Donnell, Galinsky, Melcher and Farber, 1996). The North Carolina Child Care Wage$ Project provides salary supplements as a teacher's level of training increases (Mitchell et al., 2001).

A fifth type of investment that is gaining momentum is the move toward "universal" prekindergarten. Prompted by the evidence that all students benefit from early childhood education, states are making a policy shift away from targeted programs. For example, Georgia began a pilot program in 1992 to serve 750 "at-risk" 4-year-olds that has now grown into a full-day prekindergarten program for all 4-year-olds, regardless of family income. New York also has expanded prekindergarten services considerably with its Universal PreK (UPK) program. Initially implemented in 68 low-income districts across the state but available to all four-year-old children within those districts, the program is now serving 99 districts, and almost 35,000 children (13% of 4-year-olds in the state). The goal is to implement prekindergarten programs in every district by the school year 2002-03 (Gallagher, Clayton and Heinemeier, 2001). Although called "universal" because they are designed to be available to children from a geographic area, the programs are not actually universal because they do not serve all children of all preschool ages.

A sixth set of efforts combines several approaches. For example, Washington has expanded funding for an array of quality initiatives including the expansion of its resource and referral efforts, the development of a career and wage ladder, and direct supports to Healthy Child Care Washington to support health and child care liaisons. Kansas increased quality spending to 11% of its child care funds. These dollars provide grants to local resource and referral agencies, funds for increased provider training, grants to improve the quality of licensed family/child care, dollars to fund a public awareness campaign and funds to support the early care education professional development institute (Blank and Poersch, 2000).

What have we learned from all these efforts? First, states understand that investing in child care ***is*** investing in the education and readiness of young children. They do not limit investments to only the education or the child care sphere (Knitzer and Page, 1998). Second, multiple strategies are being used to provide more direct services and more indirect supports. Third, states are being quite inventive in what they are supporting, with some focusing on enhanced subsidization schemes, others focusing on facilities, others on training and still others on compensation. Fourth, while some states are combining strategies, no single state is providing comprehensive services along with the necessary infrastructural supports to achieve quality. Fifth, while "universal" services are being talked about, no state is providing universal services to all preschool-aged children. Sixth, states and localities are using a variety of different approaches to fund these efforts, ranging from sales and excise taxes (California and Aspen); lotteries and gaming (Georgia); and local property taxes (Palm Beach and Hillsborough Counties in Florida, Seattle, and San Francisco) (Gomby, Krantzler, Larner, Stevenson, Terman and Behrman, 1996; Mitchell et al., 2001).

Indeed, it has been a remarkable decade. But if all this is so, why is it that the quality of programs is still so poor? Why is it that teachers are leaving the field in droves? Why is it that parents complain they can't find quality care and services for their children? Why is it that the nation is still so concerned about its children's readiness for school? Why is it that programs are disproportionately available to the poor? It now appears that investing in one age range (e.g., infants, toddlers or preschoolers), one domain (e.g., facilities, subsidies, training or direct services) or even one sector (e.g., private, nonprofit or public), while helpful, will not adequately address all of the issues, and may even exacerbate some of them.

How can this be so? We are beginning to understand that while we have launched many efforts, we have not nourished the infrastructure sufficiently (Gallagher and Clifford, 2001; Kagan and Cohen, 1997). The consequence is that while program *quantity* is increasing, program *quality* is decreasing. More so than ever before, those who support expansion in child care and early education recognize that new services, emerging somewhat helter-skelter, need to be more systematically linked. Policymakers are beginning to understand that these new services – though they may bear different titles and emerge from different funding streams –inextricably are related. What happens when, for example, Program X expands or tilts its direction ever so slightly? It impacts the entire field, not simply that one program. It may magnetize staff away and cause intolerable discontinuity for children. It may consume space previously earmarked for another program. It may overlap with or be redundant to other programs in the same geographic area. It has become clear that while early care and education programs are ***not*** funded or planned as a system, in fact they function as a loosely configured system laced together by common goals (to serve young children) and common constraints (resources, staff). Sadly, this unplanned expansion has added to the chaos and subtracted from efficiency.

The truly innovative efforts have realized that to deliver services that optimally promote children's early learning and development, a more unified, systemic approach to service delivery must prevail. Comprehensive planning and supports for the infrastructure must be present if the individual efforts are to survive. The community, including the faith and business community, must be involved. States including North Carolina, Florida, Delaware and California fully recognize these needs and are actively planning a *comprehensive system of early care and education* that will replace the earlier-dominant approach of planning for *individual programs and services that has characterized the last decade*. These states are, to quote Arthur Levine, "radically redesigning … a system for a dramatically different world." Creating a system, not simply sprinkling more unconnected programs on the landscape is what is needed.

Discern Where We Want To Go . . .

What might such a system that supports a long-range, innovative approach to early care and education look like? And, on what should it focus? Five elements are needed: (1) a vision of childhood; (2) high-quality, easily accessible programs; (3) a quality infrastructure; (4) a financing plan and (5) a social strategy to achieve items 1-4.

- ***A vision of childhood:*** No nation that has a system of services for young children does so without a sense of the mission, purpose and vision of childhood and of what young children need to know and be able to do (Organisation for Economic Cooperation and Development, in press). Once defined, national success is predicated on the match between the nation's social construction of childhood, and the services offered. Such a vision is not a national curriculum; it is not a set of national standards. It is a set of beliefs and principles about children that actually frame our policy stances. For example, our vision of childhood was predicated on the belief that parents were responsible for providing care for children, with government intervening only when families failed. This led to a noninterventionist policy stance for young children. Alternatively, a new vision of childhood might suggest that children are active learners, able to thrive in a variety of out-of-home settings. Such a stance might open the doors to greater acknowledgment of the importance of early care and education services. No matter what the policy domain, acknowledging beliefs and principles is and must be the foundation for social policy.
- ***High-quality, easily accessible programs:*** It is no longer tolerable to fund services for young children that are available inequitably, that further segregate children by income and that give the façade of quality without its possibility. These conditions do not characterize any public service in this nation, and they should not characterize those services for our youngest and most vulnerable citizens.
- ***A quality infrastructure:*** High-quality, easily accessible programs cannot exist without a quality infrastructure. Such an infrastructure begins with the key ingredient of quality in any institution, namely, the quality of its staff. Attending to the needs of the underpaid, undercredentialed workforce is a first step. This means that no program can be funded without according compensation and benefits commensurate with training and competence. It means that professional development opportunities must be available and accessible. Such an infrastructure also must support appropriate regulation, accountability, parental and family engagement, planning and governance. The infrastructure must be understood as being indispensable to early child care and education.

- ***A financing plan:*** To achieve the above conditions, financing plans are necessary at the state and federal levels. Such plans should delineate various funding strategies and various services to be funded. Such plans also should be modifiable and should take into consideration revenue streams that might emerge as a result of having a high-quality system, including recovered tax revenue from individuals who might join the workforce once early care and education is made available. The plans also should account for cost savings realized from reduced social expenditures, including reductions in grade retention, referrals to special education, welfare dependence and incarceration. Some states recognize the importance of developing such plans and are moving in this direction (e.g., Ohio, Rhode Island and Maine) (Mitchell et al., 2001).
- ***A social strategy:*** The above agenda is ambitious and requires formidable change. To achieve any such alteration of convention, a clearly delineated change plan is needed. Such a plan should build on what is known about social change, should have a realistic implementation timeline, and should provide for the development of public and political will. Social change is not impossible in this nation. Revolutions have occurred in national attitudes toward civil rights, women's rights, the rights of the disabled, smoking and the environment. Given the research, the current cultural climate and the need for every child to be a contributing member of this society, the time for a children's movement, replete with such a social strategy, is upon Americans.

Discern How We Get There . . .

Such an agenda will take the commitment of many members of society, including the business, political, philanthropic and faith communities. Specifically, to achieve the above five elements (coordinated vision; high-quality, easily accessible programs; high-quality infrastructure; funding; and social strategy), we need a loosely configured consensus on their intentions and direction. Business can and has supported early care and education through individual workforce policies and through efforts of national organizations, including the Business Roundtable and the Committee for Economic Development. These organizations should be mobilized, with a goal of forging a national agenda, one that includes workplace and public policy. The faith communities, already home to much early care and education, provide an outstanding locus for community-based and conceptual strategizing. The philanthropic community must continue its exemplary work to support innovation and a systems approach to planning for the future of America's young children.

When all is said and done, however, the bluntest policy tools of this society are our legal and legislative systems. Little about early care and education has come before the courts; and it might be time to consider such strategies. Much, however, has and should continue to come before national and state policymakers. Specific items for policy consideration include:

- Establishment and funding of long-range, inclusive planning efforts that will yield inventive state plans for early care and education
- Provision of incentives for communities and counties, including schools, to develop collaborative planning, information and funding systems
- Provision of incentives for early care and education programs to achieve high levels of quality via accreditation, professional development and compensation schemes
- Provision of support for the infrastructure by setting aside 10% of all new early learning program dollars for investment in the infrastructure
- Provision of additional dollars to increase the supply of care and early education, either through funding services (early learning programs in centers, schools or family child care homes) or through the provision of certificates to families
- Examination of state regulations to see that they are of sufficient quality to yield environments that optimize early development and learning
- Establishment of learning standards for all early care and education programs
- Provision of support to develop and implement appropriate systems of accountability
- Provision of a fully functional resource and referral system

- Development of an adequate database so that information about service provision, subsidy use, workforce capacity and compensation are available
- Development of a child-impact statement to accompany every piece of human services (education, welfare, health, social services, mental health), transportation, community development, housing and energy legislation. Such a statement would indicate the short- and long-term impact of the legislation on young children
- Support of a research agenda that includes empirical research, policy research and practice-driven research.

In short, to get this job done, state policymakers need to produce and act on a vision of what is wanted for children and childhood that includes detailed long-range operational and fiscal plans for how to get there, and the support of multiple constituencies. It is likely that what will develop will be, like this nation itself, a composite...a composite of strategies, initiatives and plans that will vary from state to state according to the history and political will of each. What should not be a composite, however, is what we want and hope for young children. In the best of American traditions, there must be a commitment to young children – one that has been, up to now, too long in the making and too short-range in the thinking.

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