

Leveling the Playing Field: Supporting Immigrant Children from Birth to Eight

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SUMMARY

Many young children in immigrant families do not have good access to health and education services. To the extent that their life prospects are compromised as a result, these children—and the entire society—suffer. This article discusses the needs of children from birth to age eight, with a particular focus on the education needs of young children in immigrant families. Key observations include the following:

- ▶ Children’s skills in kindergarten and their achievement at the end of third grade are important predictors of their future life prospects.
- ▶ Although well-designed early education and after school programs hold promise to reduce ethnic group-related inequalities in children’s cognitive skills and social competence, children in immigrant families are less likely to participate in these programs than are children in native-born families.

- ▶ Availability and access are important factors: When pre-kindergarten programs are offered in public schools, Hispanic and Asian American children are more likely to participate.
- ▶ Family literacy programs are a promising strategy for improving the language skills of children in immigrant families, as well as their parents.

The author concludes that policies that support the health and early education of all young children should be a national priority, and that universal programs open to all children with a minimum of barriers are most likely to be successful in facilitating the participation of young children of immigrant families.

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Current policies and programs for American children from birth to eight have not kept pace with changing demographic diversity. Too many children—many of whom live in low-income, minority families—do not have good access to health and education services. They are disproportionately from American Indian, Alaskan and Native Hawaiian, and black population groups, and from certain Latino and Asian groups. Moreover, one in five children under age 18 in the United States today is the child of an immigrant, and immigrant children are the fastest growing segment of the nation's population of children. (See the article by Hernandez in this journal issue.) Children of immigrants also are disproportionately represented among the poor, and their poverty rates have increased dramatically over the past quarter century. In 1970, the poverty rate for children of immigrants was about 12%, but by 2002, the rate had nearly doubled to 23%.¹ Today, one in four low-income children is the child of an immigrant.

Newcomer children and families, particularly those whose first language is not English, face considerable barriers to accessing programs and services. This lack of access violates the American value of equality of opportunity. Research provides clear direction for policies and programs that can be helpful in meeting the challenge of providing health and educational services for all children. Yet failure to address preventable problems such as poor health and disparities in early literacy is compromising the life prospects of significant numbers of America's children from an early age. Children are not the only ones who lose. The entire society suffers from the loss of their human capital, creativity, and productivity as family members, workers, and community members.

In addition to requiring new ways to ensure effective delivery of services, the increasing diversity of American children raises yet another challenge: the creation and sustaining of a cohesive, socially integrated society that seeks the common good. The United States is not alone in facing this challenge. Policymakers and advocates can learn from the experiences of other nations as they seek to integrate newcomer children and their families into their societies.² What is unique about the United States in comparison to its peer nations, however, is the absence of a national family and child policy, and

the absence of such a policy makes the task of building social cohesion much more difficult.

In the United States, child and family policies are highly dependent on state legislatures and state implementation of federally-funded programs such as Medicaid.³ The result is that children's access to resources essential to their development and well-being differs across the fifty states. Such disparities make it more difficult for some immigrant children to obtain needed services,⁴ and compromise the nation's sense of social cohesion on children's policy. Such disparities also are inconsistent with the fundamental American value of equal opportunity for all.

This article discusses the needs of children from birth to age eight with a focus on immigrant children. First, the article provides a brief description of the importance of this age span for the life prospects of children. Second, to the extent available, data on the participation of immigrant children in health and education programs are summarized, along with research findings regarding the impact of these programs on child well-being. The article concludes by identifying key recommendations regarding policy development, program practice, and future research needs to help make equal access a reality for children in immigrant families. The overarching goal of American public policy aimed at children and families should be to level the playing field for all children, including the increasing numbers of children in families who are newcomers to the United States. All children deserve equal access to needed services to promote their healthy development.

Birth to Eight as the Foundation for Child Well-Being

Children are born into varying socio-cultural and economic circumstances that affect their opportunities in life, with important consequences for their well-being both as children and as adults. The family's economic resources constitute a basic platform for a child's development, however, other factors such as neighborhood and community resources, parental education and cultural values—and even luck—can also play important roles in determining whether children become productive members of their communities.

The three-legged stool of child well-being by age eight is thus: family economic security, access to health care, and access to sound early education. Unfortunately, immigrant children tend to be disadvantaged in all three of these areas.

Two facts are central to a discussion of healthy child development from birth to eight: (1) skills at entry to kindergarten predict a child's educational achievement in third grade; and (2) achievement at the end of third grade predicts a child's future.

As children enter kindergarten, three individual variables—good health, cognitive and literacy skills, and motivation to learn and engage in classrooms—predict their educational achievement in the third grade.⁵ What children experience in their families, communities, and pre-kindergarten programs during the first five years of life matters.

At the end of third grade, at about age eight, children's educational achievement is an important predictor of their future educational success, and thus their ability to access postsecondary education, a decent paying job, and a good life. Children who do not acquire basic reading and mathematical skills by the third grade are at a serious disadvantage when they enter the last years of elementary school, and will have to struggle to complete middle and high school. Although these disadvantages are not necessarily lasting, efforts to correct them during the middle childhood and adolescent years can be costly and may not be as effective as early childhood interventions.⁶

With these facts in mind, ensuring children's access to health services and to early education programs at a young age is critical to efforts to promote their emergence as productive adults in a global economy. The support of their families—in terms of their economic resources, the neighborhoods in which they live, and their values and encouragement of learning and achievement—are also important. The three-legged stool of child well-being by age eight is thus: family economic security, access to health care, and access to sound early education. Unfortunately, immigrant children tend to be disadvantaged in all three of these areas.

Recent issues of *The Future of Children* describe the difficulties of immigrant families in gaining access to the first two legs of child well-being: economic security and health care. As discussed in the article by Greenberg and colleagues in the issue on children and welfare reform, the receipt of economic supports by children in immigrant families was low even before the 1996 welfare reform legislation, and has fallen even lower since then, even though most of the children themselves are U.S. citizens.⁷ For example, participation in the Food Stamp program by citizen children in families headed by a non-citizen dropped by 75% between 1994 and 1998.⁸

With regard to access to health care, as discussed in the article by Lessard and Ku in the issue on health insurance for children, studies show that immigrant children are less likely to be insured by either public or private employer-based sources.⁹ In 2002, 22% of children in mixed-status families (that is, families with at least one citizen and one non-citizen member) lacked health insurance compared with 12% of children with parents who were both citizens. Between 1999 and 2002, coverage under Medicaid and the State Child Health Insurance Program (SCHIP, aimed at “working poor” families not eligible for Medicaid) increased 12% for children in mixed-status families,¹⁰ but these gains may not be sustained in a time of constrained state budgets, when states are tightening eligibility requirements for child health insurance programs. Several states, including those with large numbers of low-income immigrant children like California, are cutting back dramatically on their child health programs.¹¹

This article focuses on the third leg of child well-being: access to sound early education and care programs and children's educational experiences up to the third grade. It should be noted, however, that basic information about the development of young children in immigrant families and those from ethnic groups in various early education and care programs is limited in several ways.

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First, sample descriptions in research reports are often incomplete in terms of the child's generational status and country of origin. Second, the fact that the data on race and ethnicity is self-reported further confounds the limited data that exist. Third, no systematic data collection across the various early education programs is in place at the national or state levels, and the lack of a standard terminology for these programs is serious. And fourth, the research on parent and child socialization and development of immigrant children from birth to eight is sparse compared to the availability of research on older children in immigrant families. (For a more detailed discussion of data limitations, see the appendix at the end of this article.)

These data limitations shape the following presentation of what can be gleaned from the research about the early education experiences of immigrant children. Much of the focus is on Latino children, reflecting the available literature. Less is currently available on Asian American children and those whose parents are recent immigrants from African or Caribbean countries. But even across diverse groups of Latino children, much more research is required to understand their development, and how public policies and programs can better support their development and education for the future.¹²

Early Education and Care of Immigrant Children

The capacity of all children to do well in school is related to several factors, including their health status, experiences in their families and communities prior to and after school entry, early learning experiences in pre-kindergarten programs, kindergarten itself, and the early elementary school years. For disadvantaged children, early learning experiences can be especially important. Evaluations of early education programs for children prior to kindergarten entry indicate that quality programs can have beneficial outcomes for low-income children who are at risk for school failure.¹³ When such programs are extended beyond pre-kindergarten into

kindergarten and the early elementary grades,¹⁴ positive outcomes are further enhanced both during childhood and into young adulthood.

Characteristics of High Quality Programs

Careful research syntheses of the relatively small number of well-designed studies of early education programs indicate that high quality, effective programs are characterized by the following common elements:¹⁵

- ▶ Extended exposure.
- ▶ Alignment of educational services with the developmental characteristics of children.
- ▶ Teachers who are baccalaureate educated and relatively well-compensated.
- ▶ Smaller class sizes.
- ▶ Parental involvement a priority.

For most children in the United States, compulsory education begins in the first grade with variations based on state educational policies and differences in implementation at the school district level. Increasingly, however, private and public pre-kindergarten programs are replacing kindergarten as children's first experience with an educational system. Although a positive step, one year of pre-kindergarten is not sufficient for sustained achievement and positive social outcomes. Programs appear to be most effective when they start sometime during the first five years of life, and provide continuing and well-aligned services into the second or third grade.¹⁶

The Importance of Early Education for Immigrants

Immigrant families have notable strengths in comparison to native families.¹⁷ Estimates from the Urban Institute's 1999 National Survey of America's Families (NSAF) indicate that children of immigrants are significantly more likely to have two parents in the home versus children of natives (80% versus 70%). (For more on this topic, see the article by Hernandez in this journal issue.) Children of immigrants fare as well or better than children of natives on measures of school engagement, including doing homework, caring about school, and

frequency of suspension or expulsion from school. Immigrant parents are no more likely to report being in poor mental health than are native parents.

However, the NSAF also reports that, compared with children in native-born families, children in immigrant families are generally poorer, in worse health, and more likely to experience food insecurity and crowded housing conditions.¹⁸ Younger immigrant children are both more likely to be experiencing these circumstances, and to be negatively affected as a result. Younger children, rather than older children, are most likely to live in families that entered the United States after 1996, when welfare legislation was enacted that barred immigrants from receiving many public benefits. As a result, younger immigrant children are most likely to be living under conditions of extreme hardship despite high rates of work by their parents.

Moreover, research indicates that such conditions can place young children, in particular, at risk, as living with hardship is linked to more illness and lowered cognitive development among young children.¹⁹ For example, findings from the Early Childhood Longitudinal Study of Children (ECLS-K) indicate that Latino children, both immigrant and native-born, enter kindergarten with lower skills than other groups, and that the inequalities in their cognitive ability at this young age can be significant.²⁰ Researchers estimate about half of the achievement gap for Latino children is attributable to socioeconomic differences among families.²¹

Immigrants' Use of Early Education Programs

Use of early education programs can help bridge the achievement gap for immigrant children. For those age five and under, preschool programs can help prepare children for entry into school. For those between the ages of five and eight, after-school programs can support children's learning in culturally supportive ways. Many federal and state programs provide opportunities to serve immigrant children with early education experiences from birth to age eight. (See Table 1.) Although some of these programs are intended primarily as work supports for families, they are viewed here from the perspective of their potential to provide educational and developmental experiences aimed at enhancing learning among young children.²²

Studies show, however, that use of early education and

after-school programs varies by immigrant group and by generational status, as well as by the national origins and poverty status of families.²³ According to an analysis of national data from the Survey of Income and Program Participation (SIPP) from 1989 to 1998, overall, children in immigrant families were less likely to use center-based care than those in native-born families.²⁴ Moreover, among native-born families, Mexican American children are far less likely to use center-based care compared with Asian American, white, and black children. This is consistent with other research that indicates that children from Latino families do not participate in preschool programs in proportion to their representation in the child population.²⁵ For example, according to another recent study, only 20% of Latino children younger than five years old are enrolled in early education programs, compared with 44% of blacks and 42% of whites. Also, it is generally agreed that the participation of immigrant children in the Head Start program is lower than their percentage in the eligible population. Although 36% of Latino children live in official poverty, only 26% attend Head Start programs.²⁶

The reasons for differences in participation by racial/ethnic and immigrant status in center-based child care programs are not well understood.²⁷ Whether the differences reflect parental and cultural values or preferences or, alternatively, the lack of affordable and

Table 1

Federal Programs Offering Early Education Experiences

Program Title	Program Description
Title 1	<p>A federal program under the Department of Education that provides financial assistance to public schools with high numbers or percentages of poor children to help ensure that all children meet challenging state academic content and student academic achievement standards. Title 1 funds may be used for children from preschool age to high school.^a About 12% of the students served are in preschool and kindergarten programs.</p> <p><i>(For more information, see http://www.ed.gov/programs/titleparta/index.html.)</i></p>
Head Start and Early Head Start	<p>Comprehensive child development programs under the Department of Health and Human Services that serve children from birth to age 5, pregnant women, and their families. They are child-focused programs that must adhere to program performance standards with the overall goal of increasing the school readiness of young children in low-income families. The Head Start program has enrolled over 21 million children since it began in 1965.</p> <p><i>(For more information, see http://www2.acf.dhhs.gov/programs/hsb/about/index.htm.)</i></p>
Child Care and Development Block Grant (CCDBG)	<p>Funds from CCDBG, together with child care subsidy funding under the Social Security Act, make up the primary federal program specifically devoted to child care services and quality. The program is administered by the Department of Health and Human Services under the name, Child Care and Development Fund (CCDF). It enables low-income parents and parents receiving Temporary Assistance for Needy Families to work or to participate in the training programs they need in order to work. Funds may also be used to serve children in protective services. In addition, a portion of CCDF funds must be used to enhance child care quality and availability.</p> <p><i>(For more information, see http://www.acf.hhs.gov/programs/ccb/geninfo/ccdf02_03desc.htm.)</i></p>
Early Education Special Education	<p>Under the Individuals with Disabilities Education Act, the Department of Education administers two state grant programs: (1) a program for infants and toddlers with disabilities (Part C) that helps states develop and provide comprehensive early intervention services for children, birth through age two, with disabilities; and (2) a preschool grants program (Part B, Section 619) that helps states provide free appropriate public education for children, ages three through five, with disabilities. Funding is also available for selected projects and institutes (Part D) to further assist in developing and implementing more and better services for young children with disabilities and their families.</p> <p><i>(For more information, see http://www.nectac.org/ecprojects/ecproj.asp.)</i></p>
Even Start	<p>A federal program under the Department of Education designed to improve the academic achievement of young, low-income children and their parents, especially in the area of reading. Even Start supports family literacy services for parents with low literacy skills or who have limited English proficiency, and for their children, primarily from birth through age seven. The program has three related goals: (1) help parents improve their literacy or basic educational skills; (2) help parents become full partners in educating their children; and (3) assist children in reaching their full potential as learners.</p> <p><i>(For more information, see http://www.ed.gov/programs/evenstartformula/index.html.)</i></p>

^a Pre-kindergarten programs in public school

accessible programs, or both, remain to be addressed. Understanding low participation rates is crucial, however, because of evidence that their participation in a sound pre-kindergarten program can be highly ben-

eficial to their cognitive and language development, especially for Latino children.²⁸ Disparities in skills that are present as children enter kindergarten, when compounded by attendance at low-resource schools,

can contribute to underachievement in elementary school and beyond.²⁹

Child Care Preferences

The body of descriptive data point to variations in child care usage patterns, needs, and preferences, but there is limited evidence to clarify the relative contributions of culture, income, family structure, and generational status, as well as public policies that increase affordability, accessibility, and attractiveness of options in these reported differences. Researchers advise us to be cautious in attributing existing usage patterns to ethnic group “preferences.”³⁰ In recent years, the expanded availability of center-based programs due to public policies and eligibility requirements has increased the use of centers among African American and Latina women.

Researchers involved in the National Institute of Child Health and Human Development (NICHD) Early Child Care Research Network published a critique of existing research and proposed an alternative conceptual framework for understanding child care arrangements among families of color in the United States.³¹ Their focus was on the ecological and cultural contexts that influence early child care use among families of color, specifically African American and Latino families. The authors argued that historical and contextual factors, as well as family socialization patterns, have influenced the use of extended family and friendship networks for child care as opposed to formal child care centers.

Given the promise of well-designed pre-kindergarten programs to reduce ethnic group-related inequalities in children’s cognitive skills and social competence as they begin kindergarten, a key issue is how early education programs fit with parental beliefs and values regarding early socialization,³² and how early childhood programs and parental values can be mutually adapted to support the development of young children. Research has shown that parental expectations for young children’s development vary across cultural and economic groups. How these values play out as they interface with early education programs is—and should be—the subject of further inquiry, with a focus on gaining a better understanding of how immigrant parents from different national and ethnic origins view early care and education programs, and their beliefs and values regarding the benefits of such programs for their children’s learning and development.

Income and Affordability

In general, children from near-poor and working-poor families are the least likely to attend preschool programs.³³ This fact results from income requirements for participation in public programs for young children, which are targeted to serving only the very poor. Federal programs such as Head Start and state pre-kindergarten programs have income eligibility requirements that restrict participation to those with very low incomes (at or below the federal poverty line). In most cases, only a proportion of even the very poor eligible children are served because of inadequate funding. For example, at the beginning of 2004, approximately 50% of Head Start-eligible children participated in the programs, which were initiated in the summer of 1965. Families with slightly higher incomes—the near-poor and working-poor—are generally excluded.

This is also true for subsidized child care programs. More affluent parents pay for preschool services. Near-poor and working-poor families are not eligible for public subsidies and are not able to spend the necessarily large proportions of their family incomes for the programs, which is estimated to be about one-fifth of the budgets of families who work but are in poverty.³⁴ Moreover, according to the U.S. Department of Health and Human Services, only about 15% of those eligible for child care subsidies under the Child Care and Development Block Grant (CCDBG) receive these subsidies to assist in the care of their children while mothers are working in the paid labor force.³⁵

Neighborhood Access

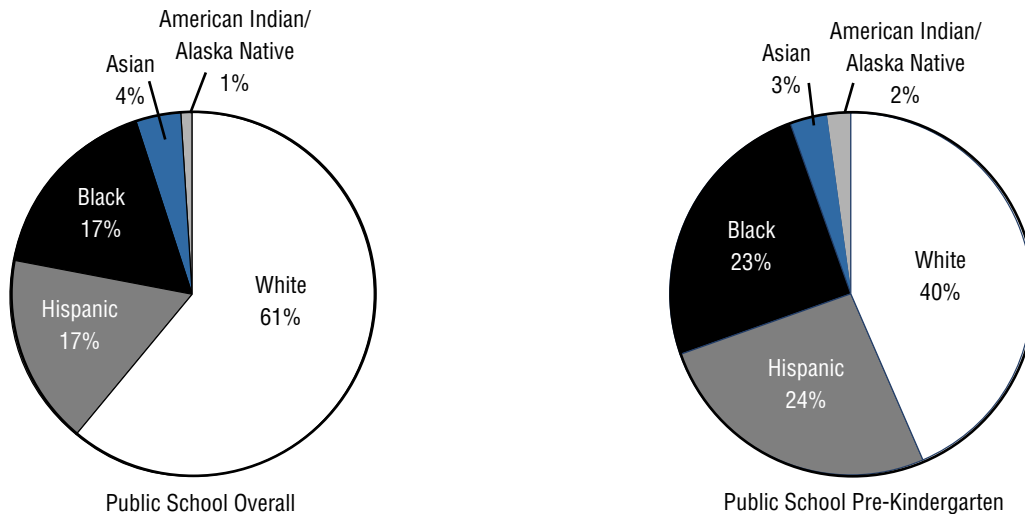
The most accessible early education and after school programs are those located in the neighborhood public elementary school and surrounding community. The growing number of pre-kindergarten programs in public schools, as well as kindergarten itself, offer opportunities for children of immigrants to improve their cognitive and literacy skills before starting school, and community after-school programs offer opportunities for children of immigrants to have their experiences in school augmented and reinforced in culturally friendly ways.

Pre-Kindergarten Programs in Public Schools

Until recently, there was little information on pre-kindergarten programs in public elementary schools, but as their numbers have increased in over 40 states, the

Figure 1

Participation in Pre-Kindergarten in Public Schools



Source: Smith, T., Kleiner, A., Parsad, B., and Farris, E. *Prekindergarten in U.S. public schools: 2000-2001*. Washington, DC: National Center for Education Statistics, March 2003.

National Center for Education Statistics conducted a survey of pre-kindergarten programs during the school year 2000-2001.³⁶ According to this survey, the participation of Hispanic and Asian American children was at least in proportion to their representation in the school-age child population. (See Figure 1.)

Differences were found related to the urban versus rural location of the schools,³⁷ and in different regions of the country,³⁸ but in all cases, Hispanics were slightly overrepresented. Both Hispanics and blacks were overrepresented in schools with the highest levels of poverty.³⁹ Moreover, across all races/ethnicities, children with limited English proficiency (LEP) were overrepresented: 15% of the pre-kindergarten children were receiving LEP services compared with 9% of all public school students.

Although no information on the immigrant or generational status of the children was provided, given rough estimates of the percentage of Hispanic children who are immigrants, it is likely that Hispanic children from immigrant families are attending pre-kindergarten pro-

grams, at least in public schools, in increasing numbers. These survey data challenge existing studies and surveys that indicate that Latino children, in particular, do not participate in early childhood programs of all kinds in relation to their representation in the child population. Instead, the high levels of participation found in this study suggest that, with the possible exception of special education pre-kindergarten programs (see Box 1), heretofore reported differentials for Latinos in pre-kindergarten and child care programs may be due to large differences in participation in private programs and/or to the availability of these private programs in neighborhoods in which Latino children reside.

What is not clear from this first national survey of pre-kindergarten programs in public schools are the factors that contribute to Hispanic children's attendance in pre-kindergarten classes. This may be partially explained by a greater number of pre-kindergarten-aged Hispanic children than in the K-12 school-age population. Another factor may be that public school pre-kindergarten programs target low-income children at risk for educational failure, and as they do not have

immigrant status as an eligibility factor, in contrast to public health insurance programs, they tend to enroll children who generally mirror the population served by the school.

Kindergarten in Public Schools

Many assume that universal public education begins with kindergarten (the K-12 educational system). How-

ever, only 15 states require kindergarten attendance.⁴⁰ Furthermore, only about 55% of American children attend full-day kindergarten, despite research evidence to its value—particularly for improving the educational performance of low-income children.⁴¹ Thus, there are initiatives in selected states (such as Arizona, Indiana, Maryland, and New Mexico) and localities (such as the Los Angeles Unified School District) to institute full-day kindergarten as part of a package of education reforms. Many of these areas have large numbers of immigrant children, which is one of the factors cited in these initiatives.

Neighborhood After-School Programs

Overall, the data suggest that compared with children in native-born families, children in immigrant families are less likely to participate in after-school activities, and their parents are less likely to volunteer in the community.⁴² However, these participation rates are likely to vary in different communities, and are influenced by the availability and accessibility of such programs in communities in which immigrant children reside, the work hours of parents, the need for older children to assume sibling care and work responsibilities, and other family and community factors.

Where community programs are available, research indicates that they can be critical contexts for providing out-of-school educational opportunities for culturally diverse children. For example, a study of children and adolescents in three immigrant communities in Los Angeles (Chinatown, Koreatown, and Pico-Union) found that the availability and accessibility of community-based programs, including after-school tutoring and other educationally-focused programs provided by public and by private organizations, can contribute to differences in educational performance of children in different community niches within the same urban area. These contexts can reinforce parental values for education and counter influences inimical to educational achievement among young children in immigrant families, including poor educational services in the schools.⁴³

Family Literacy Programs: A Promising Approach

The federal No Child Left Behind (NCLB) education reform legislation requires states to report test outcomes by the LEP status of the students. The implementation

Box 1

Underrepresentation of Minority Preschoolers in Special Education

Of children enrolled in pre-kindergarten programs in public schools, approximately half of them are either in:

- ▶ special early education classes, or
- ▶ comprehensive special early education classes that serve both children eligible for special early education services under the Individuals with Disabilities Education Act (IDEA) and children without disabilities who reside in the neighborhood served by the school.^a

It should be noted, however, that Asian/Pacific Islander and, especially, Hispanic children are underrepresented among the preschoolers served under IDEA,^b and that the majority of children in both these groups are children who are themselves first-generation immigrants or children of immigrant parents.

Both research and policy action regarding the special early education needs of immigrant children require attention with sensitivity to culturally appropriate assessment and to language differences in the immigrant child population. At the same time, this situation merits further inquiry, given the connection of childhood disabilities with poor health care and with poverty and the legislated provisions mandating the rights of young children with disabilities to an appropriate education.

^a Smith, T., Kleiner, A., Parsad, B., and Farris, E. *Prekindergarten in U.S. public schools: 2000–2001*. Washington, DC: National Center for Education Statistics, March 2003.

^b In 1999–2000, Hispanic children made up a smaller percentage of children receiving special education services than they did of the general population. The racial/ethnic distribution of children served from birth to age two has not changed significantly since data was first collected in 1998. See the 23rd Annual Report to Congress on the Implementation of the IDEA, available online at <http://www.ed.gov/about/reports/annual/osep/2001/index.html>.

Box 2

The AVANCE Program

Based in Texas, the AVANCE program is devoted to building stronger families and communities by improving the self-esteem, confidence, and competence of parents and their children. The nine-month program is primarily an intervention model for low-income Mexican American or Latino families, though offered to persons from all cultures. Parents are provided information about child development by learning effective and nurturing parenting skills, and by creating handmade age-appropriate educational toys. They also gain knowledge about many social services available to them and their family so they can play a strong, positive role in their children's long-term development. Simultaneously, their children participate in a stimulating bilingual early childhood development program designed to prepare and transition the children into school, with a focus on enhanced English literacy skills.

(For more information, see <http://www.avance.org/main.html>.)

of this provision is just beginning, and will likely gain more attention in the future as more states and localities attempt to meet the requirements of the NCLB law.

Most LEP students in the nation's elementary schools are second-generation children of immigrant parents whose families are linguistically isolated.⁴⁴ Thus, assisting immigrant parents to learn English as part of an early education/family literacy program is an important way to improve the language skills of such children. Two programs that have taken the approach of working with both parents and children are Even Start (see Table 1), and a Texas-based program, AVANCE (See Box 2.) The two-generational strategy is well-aligned with the strong family values of immigrant groups, and also engages parents who are highly motivated to learn English. Not only does this strategy help children to learn English, it helps parents gain the language skills important for their economic mobility and for better communication with schools and other agencies that they are in contact with regarding the well-being of their children.⁴⁵ Adult immigrants report that learning English is their highest priority in adapting to their new country and in improving their job prospects.⁴⁶

To date, the evaluations of these two-generational family literacy programs for immigrant, English language learner parents and children have found mixed results, but these differences may be linked to variations in the fidelity of implementation of the program in different sites. As pressure mounts under NCLB to improve students' language skills, family literacy programs remain a promising approach worth exploring.

Key Policy Recommendations

Policies, informed by research, that support the health and early education of all young children should be a national priority. Because young children's prospects are affected by the economic resources of their families,⁴⁷ recommendations for work supports and income supplements are an essential adult-focused complement to these child investments.⁴⁸ A cross-cutting theme for several of the recommendations described below is the pursuit of a universal approach across a broad range of programs and services. The recommendations also include increasing support for a limited number of programs targeted to improving services for immigrant children and their families, and addressing key research needs. (See the appendix for further discussion of serious data limitations in the study of young immigrant children and how these limitations can be addressed.)

Pursue a Universal Approach

Those who favor a targeted approach to addressing the needs of immigrant children and their families, based on family income or means-testing, argue that limited public resources should be focused on those most in need and unable to pay for services. However, the struggles over the expansion of Head Start and child care subsidies suggest that there are limits to providing these programs and services even to all who are eligible. It is unlikely that these programs will be expanded in the near future—to the contrary, current federal budget proposals call for their containment.

In contrast, a universal approach is more likely to result in broad political and social acceptance for public support of children's services, and more likely to contribute to social and economic integration rather than fostering existing ethnic and linguistic isolation in education and related programs. As the nation celebrates the fiftieth anniversary of *Brown v. Board of Education*, it should

Programs that serve all children help to ensure equal opportunity and access across different racial/ethnic and socioeconomic groups.

be remembered that the U.S. Supreme Court ruled in 1954 that separate is not equal. (See the article by Edelman and Jones in this journal issue.) Programs that serve all children help to ensure equal opportunity and access across different racial/ethnic and socioeconomic groups.

Universally available programs may have an additional set of benefits for young children of immigrants. Researchers have noted that among children age five and younger living in immigrant families, a large share are born in the United States, and therefore, are citizens living in mixed-status families.⁴⁹ These children are entitled to the same public benefits and services as are children of native-born parents. However, barriers such as language access and fear of public authorities may prevent families from seeking such benefits, especially for programs that have income eligibility requirements and require extensive documentation. Programs that allow all children to participate with a minimum of such barriers may facilitate the inclusion of young children of immigrants into essential health and early education programs, and thus contribute to their school readiness and educational achievement. A broad range of universal policies could help address children's needs at different ages, as discussed below.

► **Institute paid family leave.** Starting with the nation's youngest children, instituting universal paid family leave, especially during the first year of life, is long overdue. The high costs and relative lack of available sound infant care in the United States, combined with approximately 65% of mothers with infants in the workforce, require policies to adapt to changed social conditions. The United States is one of a very few countries in the world with unpaid family leave policies. As immigrant and lower-income families are less likely than upper-income families to have employers who provide sick, vacation, and family leaves,⁵⁰ they are more likely to have limited time to spend with their young children, especially when working long hours. Recent legislation in California, which

is based on employee contributions, is a promising approach for other states to consider in addressing this problem.

- **Provide early education for all children.** All young children from ages three to four should have access to sound voluntary pre-kindergarten programs taught by well-qualified, certified teachers. States may consider beginning such programs by age two for children at-risk for educational underachievement, and as a means of integrating immigrant families and their children into their new country.⁵¹ Evaluations of well-designed and well-implemented programs for this age group, especially programs that continue into kindergarten and the early elementary school grades, provide support for wider implementation.⁵²
- **Require full-day kindergarten.** At age five, all children should be required to attend full school-day kindergarten. Only 15 states now require such attendance. Current state policies should be changed to reflect substantial knowledge of the capacities of young children to learn, the changed demands of early elementary education and high stakes testing, and research that provides evidence that full-day kindergarten programs are more beneficial to children's learning than half-day programs. Children at-risk for educational underachievement should begin kindergarten in the summer before the school year to better prepare them for kindergarten, and should participate in a booster summer program following kindergarten to better prepare them for first grade.⁵³
- **Offer dual-language programs for all children.** The competitive demands of a global economy place bi- and multi-lingual individuals at a competitive advantage in "the race" for economic security. Although English is increasingly the language of international commerce, American children whose first language is English can benefit from dual-language programs. Such programs can foster bilingualism among more children, attract and retain middle- and upper-income

...the most serious current challenge is the preparation of teachers...to educate newcomer children more effectively.

families to public schools, and contribute to better social integration in communities, while at the same time enhancing the language skills of immigrant children.⁵⁴

▮ **Strengthen neighborhood support for out-of-school time.** What children learn in schools is important, but must be augmented by the resources of neighborhood and community organizations that provide educational opportunities when children are out of school, and when parents are not available because of their job responsibilities. Public and privately funded programs which provide a wide range of out-of-school activities can extend the offerings or compensate for deficiencies in what schools are able to offer in academic and enrichment activities. When available, private resources clearly can be used to add to the out-of-school resources for children in the community. But it is not only about strengthening neighborhood resources, it is about equalizing access. Programs should be alert to inequalities among ethnic groups and ensure that they serve a cross-section of the immigrant children and youth in their communities.

▮ **Provide universal access to health care services.** All children need access to prenatal and preventive health care, including dental care, from birth. Such access should not be based on the immigrant status of their parents. Universal health insurance, starting first with children and adolescents, should be a priority at the national and state levels. Even if there were no supportive research, access to health care should be a basic human right. However, children's health status has been found to be related to educational achievement in the early elementary school years. Thus, the fact that immigrant children do not have regular access to health services can adversely affect their educational performance.

Support Key Programs for Immigrant Families

With a universal package of programs in place, immigrant families require additional support because of their

recent arrival to the United States. Unlike nations such as Canada, France, Israel, Sweden, and Denmark, the United States does not yet have social integration policies for immigrants. Although it welcomes immigrants, the United States does not have programs in place that can, as a matter of public policy, provide a helping hand to newcomers.

A number of important policies and programs, in addition to the families themselves, contribute to shape the well-being and prospects of children. Looking to one magic solution is foolhardy. Rather, trying to increase the number and level of positive influences known to affect children's learning and development is likely to have at least a modest influence in addressing the troubling achievement gap between children from immigrant, racial/ethnic, and low-income backgrounds, and children who are native-born, white, and more financially secure. Recommendations regarding key programs likely to support immigrant families and their young children are discussed below.

▮ **Establish two-generational early education and family literacy programs.** For children whose first language is not English, pre-kindergarten programs that prepare children for English language instruction in the elementary school grades are essential to promote school readiness and to prepare them for high levels of proficiency in reading and mathematics. Two-generational family literacy programs should be designed to engage parents by offering English language instruction and workforce skills for adults, as well as a quality pre-kindergarten program for their children. After the pre-kindergarten years, schools must make a commitment to align their kindergarten and elementary grade programs to provide intensive, high quality instruction to support students in mastering the skills to be fully fluent in speaking, reading, and writing English.⁵⁵

▮ **Improve teacher preparation to work with diverse newcomer children.** Research and evaluation related to the educational achievement of young immigrant

children is currently limited. However, based on what existing research has found regarding factors to reduce the achievement gap between students, several school-based variables should be addressed: a strong curriculum informed by research; incentives for well-qualified and experienced teachers (versus those who are just entering teaching) to teach culturally diverse students; smaller class sizes; and school safety. Of these, the most serious current challenge is the preparation of teachers—from those teaching early education through high school—to educate newcomer children more effectively. Surveys of teachers at the pre-kindergarten and K–12 education levels indicate that teachers do not feel that they are adequately trained to work with children and families from diverse cultural and linguistic backgrounds.⁵⁶

- ▶ **Encourage parental engagement in schools.** It is beyond the scope of this article to address the cultural resources that immigrant families in their diversity provide, but there is a rich literature for educators on responding to the cultural beliefs, practices, and linguistic differences in serving immigrant children.⁵⁷ As discussed further in the articles by García Coll and Szalacha and by Fuligni and Hardway in this journal issue, efforts to engage parents in supporting the education of their children are critical, but face many barriers. For example, school cultures can work against broad scale parent engagement. Also, teacher education programs typically do not prepare teachers to reach out to and engage parents as partners in the education of their children. The long and nontraditional work schedules of many immigrant parents, and language barriers between parents and educators, can add to the difficulties. Teacher preparation programs and school leadership programs that provide skills to engage parents in the education of their children from an early age must be higher priorities than they have been heretofore. Community-based efforts that involve parents in their children's schools and education can help.⁵⁸
- ▶ **Improve outreach and services to preschoolers with disabilities in immigrant families.** Currently, little is known about services to immigrant children at all levels of education, but the underrepresentation of minority children—especially Hispanics—in special education pre-kindergarten programs in public

schools is troubling. (See Box 1.) This imbalance suggests that outreach efforts to immigrant and racial/ethnic minority families may be warranted, and that greater awareness of these programs is likely to result in increased services to immigrant and minority children who have the right to services under the Individual with Disabilities Education Act.

Address Key Research Needs

The well-being of immigrant children through the age of eight is an understudied area in the developmental sciences. Data sources related to young immigrant children and children from diverse racial/ethnic backgrounds must be improved so that there is a better understanding of their experiences and well-being than exists now. Researchers at the Urban Institute are creating a national demographic profile of young newcomer children from birth through age five based on Census 2000, several years of the Current Population Survey, and the 1999 and the 2002 NSAF surveys.⁵⁹ They also have developed a valuable guidebook for local communities that seek information on immigrants. The guidebook includes a useful discussion on addressing policy questions with existing national data sources.⁶⁰

In addition, with the increased participation in universal pre-kindergarten programs in states with large numbers of immigrants (such as Georgia, New Jersey, and Oklahoma), studies on the effectiveness of these programs offer the potential to learn more about their impact on immigrant children. For example, a recent evaluation of the universal preschool program in Tulsa, Oklahoma, found strong, positive benefits in language and cognitive development for Hispanic children,⁶¹ children who are primarily second-generation, low-income Mexican immigrants from Chiapas.⁶² Research and evaluation of preschool programs in other states with sizeable numbers of newcomer children, such as North Carolina, are likely to further increase existing knowledge about the value of these programs for young immigrant children.

These are encouraging first steps, but more must be done to ensure that research on the development of young children, especially those from birth to age eight, catches up with rapid changes in the demography of the child population and includes the growing number of children in immigrant families. In California, for

example, one out of every two children below the age of five lives in a family with at least one immigrant parent.⁶³ Three areas of research requiring improvement are highlighted below.

▶ **Develop more relevant conceptual frameworks.**

As mentioned previously, conceptual frameworks for research on children of color, including immigrant children, have not sufficiently taken into account the historical and social context of children's development. Relevant variables include economic and political conditions leading to parental migration, the purposes of migration, experiences of discrimination in the country of origin and in the United States, as well as social position variables (such as ethnicity, social class, and gender), and their meanings before and after immigration. In terms of the policy implications of this research, much more attention must be paid to the policies, and changes in policies, that are part of the historical and social context of children's development.

▶ **Improve sample descriptions.** Basic descriptions of sample characteristics, particularly in what are presented as nationally representative samples, must be improved, along with a commitment to greater transparency about the limitations of a sample. Especially for children in immigrant families, systematic collection of generational status must occur going forward. Without this information, it will be difficult to determine what importance such status has on the development of children. It will also be important for researchers to better describe immigrant children in their samples, including countries of origin, rural or urban origins, educational levels of parents and of children in the country of origin, and the receiving communities in which families settle.⁶⁴

▶ **Address concerns regarding assessments.** Another area of importance is the assessment of young children, especially if they do not speak English. For example, in the ECLS-K study, not all Spanish-speaking children in the sample were tested. Children from other language backgrounds were unevenly tested. The language of assessment is not the only issue; the cultural familiarity and appropriateness of the content of the assessment are also critical. For example, children may not be familiar with experiences such

as snow, or with objects such as basic household items commonly used in the United States that are used as part of testing content. These are not new issues, but with the increases in the sheer numbers of linguistic and culturally diverse young children, they are becoming increasingly difficult to avoid. Assessment of children who are English-language learners must be improved, consistent with high professional test standards.

Conclusion: Seeking Common Ground

In less than three decades—by about 2030—the United States will be a nation with a large, mainly white elderly population, supported by a smaller, more ethnically diverse workforce, about half of which will be comprised of Asians, blacks, and Latinos. Observers since the 1980s have expressed justifiable concern about the social cohesion of a society with such an age and ethnic structure,⁶⁵ and the implications it poses for a social insurance system that was largely constructed during the 1930s.⁶⁶

Immigrant families now comprise one-third to one-half of low-income families who do not earn adequate incomes that enable them to raise their children well. The major restructuring of welfare in the United States that occurred in 1996 specifically excluded immigrants from social insurance programs that can assist them to achieve a decent standard of living for their children. In the future, fundamental—as well as incremental—changes in social insurance systems must take into account the large numbers of both legal and undocumented immigrants who pay taxes for social insurance programs (such as Social Security) and provide basic services to our communities, yet often are barred from receiving benefits themselves.

In the interest of justice, as well as for social and economic reasons, public investments in all children—including immigrant children—make a great deal of sense. The entire society gains when all children enter kindergarten ready to learn, and all children acquire basic reading and math skills by the end of third grade. Taking a universal approach, aimed at the equitable distribution of public benefits across the family income spectrum, is a good place to start. Additional investments in children from lower-income and linguistically-isolated families

may also be needed to help level the playing field.

Whether the leadership and the political dynamics of the United States can effect these necessary investments in children remains to be seen. It is irrefutable that without such investments, the viability of the United States as a strong, socially integrated nation is at stake.⁶⁷ Nations throughout the world should strive for level playing fields for all their families and children. The United States, as the economic and democratic leader in the

world, has special responsibilities in this regard. Without that goal at the center of our public policies, the United States, as well as countries throughout the world, risk intensified social conflict, if not tragic consequences.

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ENDNOTES

1. Fix, M., and Passel, J. *U.S. immigration, trends and implications for schools*. Washington, DC: Urban Institute, 2003. (For further discussion of this topic, see the article by Nightingale and Fix in this journal issue.)
2. Neuman, M.J., and Peer, S. *Equal from the start: Promoting educational opportunity for all preschool children—Learning from the French experience*. New York, NY: French-American Foundation, 2002.
3. Meyers, M.K., Gornick, J.C., and Peck, L.R. *Federalist anti-poverty policy: Family support packages across the U.S.* New York, NY: Columbia University, 2000.
4. The National Survey of America's Families has documented important variations by states in the hardships experienced by immigrant children. See Capps, R. *Hardship among children of immigrants: Findings from the 1999 National Survey of America's Families*. Assessing the new federalism policy brief B-29. Washington, DC: Urban Institute, 2001.
5. West, J., Denton, K., and Germino-Hausken, E. *America's kindergarteners*. NCES 2000-070. Washington, DC: US Department of Education, National Center for Education Statistics, 2002.
6. Heckman, J. Policies to foster human capital. *Research in Economics* (2000) 54:3–56.
7. Greenberg, M., Levin-Epstein, J., Huston, R., et al. The 1996 welfare law: Key elements and reauthorization issues affecting children. *The Future of Children: Children and Welfare Reform* (Winter/Spring 2002) 12(1): 48–50.
8. Fix, M., and Passel, J. *Trends in non-citizens' and citizens' use of public benefits following welfare reform: 1994–1997*. Washington, DC: Urban Institute, March 1999.
9. Lessard, G., and Ku, L. Gaps in coverage for children in immigrant families. *The Future of Children: Health Insurance for Children* (Spring 2003) 13(1):101–116.
10. Capps, R., Kenney, G., and Fix, M. Health insurance coverage of children in mixed-status immigrant families. *Snapshots of America's children, No. 12*. Washington, DC: Urban Institute, 2003.
11. See Smith, V., Ramesh, R., Gifford, K., et al. *States respond to fiscal pressure: A 50-state update of state Medicaid spending growth and cost containment actions*. Washington, DC: Kaiser Commission on

- Medicaid and the Uninsured, January 2004. (For more on this topic, see the article by Nightingale and Fix in this journal issue.)
12. Zambrana, R.E., and Capello, D. Promoting Latino child and family welfare: Strategies for strengthening the child welfare system. *Children and Youth Services Review* (2003) 10:755–780. Beginning in the summer of 2004, the National Task Force on the Early Childhood Education of Hispanics, headed by Eugene García, dean of the School of Education at Arizona State University, will be conducting primary and secondary research as well as research syntheses to inform early education programs aimed at Hispanic/Latino children in the United States.
 13. Bowman, B., Donovan, M.S., and Burns, M.S., eds. *Eager to learn: Educating our preschoolers*. Washington, DC: National Academy Press, 2000.
 14. Reynolds, A.J. The added value of continuing early intervention into the primary grades. In *Early childhood programs for a new century*. A.J. Reynolds, M.C. Wang, and H.J. Walberg, eds. Washington, DC: CWLA Press, 2003, pp. 163–196.
 15. McCall, R.B., Larsen, L., and Ingram, A. The science and policies of early childhood education and family services. In *Early childhood programs for a new century*. A.J. Reynolds, M.C. Wang, and H.J. Walberg, eds. Washington, DC: CWLA Press, 2003, pp. 255–298; and Whitebook, M. *Bachelor's degrees are best: Higher qualifications for pre-kindergarten teachers lead to better learning environments for children*. Washington, DC: Trust for Early Education, 2003.
 16. See note 14, Reynolds. As Reynolds argues, such continuation programs support not only the child's transition from preschool to kindergarten and elementary education, but can prevent the “fade-out” effects of preschool programs on later academic achievement. Reynolds reviews four of the key extended intervention programs, including Head Start/Follow Through, Chicago Child-Parent Center and Expansion Program, North Carolina Abecedarian Project, and the Head Start/Public School Transition Demonstration Project. Results from studies of these programs indicate that they can promote children's school achievement beyond levels achieved by pre-kindergarten intervention itself.
 17. Reardon-Anderson, J., Capps, R., and Fix, M. *The health and well-being of children in immigrant families*. Washington, DC: Urban Institute, 2002.
 18. Although the hardship rates are higher for immigrant children than for native-born children on the national level, there is considerable variation across the states linked to state policies, particularly access to health insurance. See note 10, Capps, et al.
 19. Evans, G.W. The environment of childhood poverty. *American Psychologist* (2004) 59(2):77–92.
 20. Lee, V., and Burkham, D. The Early Childhood Longitudinal Study (ECLS-K), which began in the fall of 1998, and has followed a nationally representative sample of about 22,000 children since that time, will continue to be an important resource on the characteristics and skills of children as they enter kindergarten, and the factors that contribute to the educational performance during the kindergarten year and beyond. Unfortunately, ECLS-K does not provide useful information on the immigrant status of the four groups of children on which findings are reported: white, black, Latino, and Asian. All of these groups include immigrants—for example, Russians in the white group, and Africans in the black group.
 21. Results must be interpreted with caution, however, because not all Latino children in the sample participated in the full battery of tests and were screened based on their tested English language proficiency.
 22. Also, it should be noted that some programs intended primarily as educational experiences for young children fall short of providing adequate work supports—for example, whereas half-day pre-kindergarten or full-day kindergarten programs provide partial support for working parents, wrap-around child care remains a necessity for working families.
 23. Studies on the participation of immigrant children in early education programs suffer in two aspects, however. First, they lack information on children's immigrant status; and second, they lack a consistent terminology for what constitutes an early childhood education program. Thus, reports of preschool participation tend to combine child care, Head Start, and pre-kindergarten programs. (See the appendix on limitations of existing data sources at the end of this article.)
 24. Brandon, P. The child care arrangements of preschool-age children in immigrant families in the United States. *International Migration Review* (2004) 42(1):65–87.
 25. Zambrana, R. Promoting Latino child and family welfare: Strategies for strengthening the child welfare system. *Children and Youth Services Review* (2003) 25(10):755–780.
 26. Zambrana, R.E., and Zoppi, I.M. Latino students: Translating cultural wealth into social capital to improve academic success. *Journal of Ethnic and Cultural Diversity in Social Work* (2002) 11:33–53. See also Flores, G., Fuentes-Afflick, E., Barbot, O., et al. The health of Latino children. Urgent priorities, unanswered questions, and a research agenda. *Journal of the American Medical Association* (2002) 288(1): 82–89.
 27. Huston, A.C., Chang, Y.E., and Gennetian, L. Family and individual predictors of child care use by low-income families with young children. *Early Childhood Research Quarterly* (2002) 17:441–469.
 28. Gormley, W.T., and Phillips, D. *The effects of universal pre-K in Oklahoma: Research highlights and policy implications*. CROCUS working paper no. 2. Washington, DC: Georgetown Public Policy Institute, October 2003.
 29. Lee, V.L., and Burkam, D.T. *Inequality at the starting gate. Social background differences in achievement as children begin school*. Washington, DC: Economic Policy Institute, 2002.
 30. See note 27, Huston, et al.
 31. Johnson, D.J., Jaeger, E., Randolph, S.J., Cauce, A.M., Ward, J., and The NICHD Early Child Care Research Network. Studying the effects of early child care experiences on the development of children of color in the U.S.: Towards a more inclusive research agenda. *Child Development* (2003) 74 (5):1227–1244.
 32. Okagaki, L., and Diamond, K.E. Responding to cultural and linguistic differences in the beliefs and practices of families with young children. In *A world of difference. Readings on teaching young children in a diverse society*. C. Copple, ed. Washington, DC: National Association for the Education of Young Children, 2003, pp. 9–15.
 33. Foundation for Child Development. *Our basic dream. Keeping faith with America's working families and their children*. New York, NY: FCD, 2000, p. 47.
 34. Bernstein, J., Brocht, C., and Space-Aguilar, M. *How much is enough? Basic family budgets for working families*. Washington, DC: Economic Policy Institute, 2000.
 35. Schumacher, R., Irish, K., and Lombardi, J. *Meeting great expectations: Integrating early education program standards in child care*. Foundation for Child Development working paper series. Washington, DC: Center for Law and Social Policy, 2003.

36. Smith, T., Kleiner, A., Parsad, B., et al. *Prekindergarten in U.S. public schools: 2000–2001*. Washington, DC: National Center for Education Statistics, March 2003.
37. In urban schools, 35% of the pre-kindergarten children were Hispanic. In rural/small town schools, 10% were Hispanic.
38. For example, 47% of public school pre-kindergarten children were Hispanic in schools in the West, compared with 9% at schools in the Southeast; whereas among all public school students, 33% in the West are Hispanic, compared with 7% of the students in the Southeast.
39. In the highest poverty schools, 39% of the pre-kindergarten children were Hispanic, and 36% were black.
40. The Education Commission of the States (ECS) is completing a national study of access to and financing of full-school-day kindergarten. ECS is also conducting case studies of seven states in various stages of implementing full-school-day kindergarten.
41. See note 5, West, et al.
42. See note 17, Reardon-Anderson, et al.
43. Zhou, M. Urban education: Challenges in educating culturally diverse children. *Teachers College Record* (2003) 105:208–255.
44. The Urban Institute is beginning a study of the impact of the federal No Child Left Behind law on immigrant and English language learners from kindergarten to grade 12, and Michael Fix and his colleagues at the Urban Institute are completing a national demographic study of immigrant children under the age of six. Capps, R., Fix, M., Passel, J.S., et al. The health and well-being of young children of immigrants. Unpublished report prepared for the Foundation for Child Development. Washington, DC: Urban Institute, April 5, 2004.
45. In addition, enhancing the English language competency of immigrant parents enables them to be better informed and skilled at dealing with health and educational systems, contributing to lessening reliance on their young children for such institutional negotiations. Although there may be benefits to young children serving as translators for their parents, such arrangements also tend to disrupt normal parent and child relationships and authority, and may be burdensome to the young child.
46. Farkas, S., Duffett, A., and Johnson, J. *Now that I'm here: What America's immigrants have to say about life in the U.S. today*. New York, NY: Public Agenda, 2003. Available online at <http://www.publicagenda.org>.
47. Duncan, G.J., and Brooks-Gunn, J., and Klebanov, P. Economic deprivation and early childhood development. *Child Development* (1994) 65:296–318.
48. See the article by Nightingale and Fix in this journal issue.
49. See note 44, Fix, et al.
50. For a synthesis of the research related to work and family policies, see: Smolensky, E. and Gootman, J.A., eds. *Working families and growing kids. Caring for children and adolescents*. Washington, DC: National Academy Press, 2003.
51. France is a prime example of serving immigrant children starting at age two on the principle of “giving more to those who have less,” and following this year with a universal pre-kindergarten system serving all children from three to five years of age. See note 2, Neuman and Peer.
52. See note 14, Reynolds.
53. Although there is no strong evidence to support summer programs before or after the kindergarten year, what is referred to as the “summer loss” phenomenon for low-income children should be attended to in future research and program design, especially during the early elementary school years.
54. Valdes, G. Dual-language immersion programs: A cautionary note concerning the education of language-minority students. *Harvard Educational Review* (1997) 67(3):391–431. Valdes expresses concern about the benefits of dual language programs for English-language learners. The specific social context of the United States will mediate the process and effects of dual language programs, but it is important to note that in countries where national policies support bi- or multi-lingualism, individuals with such language skills develop into workers with whom American monolingual children must compete in the global workplace.
55. American Educational Research Association. English language-learners: Boosting academic achievement. *Research Points* (2004) 2(1):1–4.
56. Bowman, B., Donovan, M.S., and Burns, M.S. *Eager to learn: Educating our preschoolers*. Washington, DC: National Academy Press, 2001. Also, relevant work currently is being conducted by Walter Gilliam at Yale (who is doing a national survey of pre-kindergarten teachers) and by Sharon Ryan at Rutgers.
57. See Copple, C., ed. *A world of difference. Readings on teaching young children in a diverse society*. Washington, DC: National Association for the Education of Young Children, 2003.
58. For further discussion of this topic, see the article by García Coll and Szalacha in this journal issue.
59. See note 44, Capps, et al.
60. Capps, R., Passel, J., Perez-Lopez, D., et al. *The new neighbors: A users' guide to data on immigrants in U.S. communities*. Washington, DC: Urban Institute, 2003.
61. See note 28, Gormley and Phillips. Similar positive benefits were found for low-income black children, but not of the same magnitude as for the Hispanic children.
62. Personal communication (through e-mail) with W. Gormley, author of the study cited in note 28.
63. Reed, D., and Bailey, A. *California's young children: Demographic, social and economic conditions*. San Francisco, CA: Public Policy Institute of California, November 2002.
64. With respect to communities of settlement, Fix and his colleagues at the Urban Institute have pointed to the important shifts from traditional gateway states and cities like New York to new destination cities and states that do not have the experience of infrastructure (bilingual education, language services) to serve immigrant families, and that may shape their children's experiences with health and early education programs. See Fix, M., and Passel, J.S. U. S. immigration: Trends and implications for schools. Presentation to the National Association for Bilingual Education, NCLB Implementation Institute. New Orleans, LA. January 28, 2003. (For more on this topic, see the article by Hernandez in this journal issue.)
65. Hayes-Bautista, D.E., Schink, W., and Chapa, J. *The burden of support: The young Latino population in an aging American society*. Stanford, CA: Stanford University Press, 1988.
66. Buto, K., Patterson, M.P., Spriggs, W.E., et al. eds. *Strengthening community: Social insurance in a diverse America*. Washington, DC: National Academy of Social Insurance, 2003.
67. See, for example, the provocative arguments made in Chua, A. *World on fire: How exporting free market democracy breeds ethnic hatred and global instability*. New York, NY: Anchor Books, 2004.

APPENDIX

Limitations of Existing Data Sources

Basic data about young children in immigrant families and in families of various racial/ethnic groups are currently limited in several important ways. As discussed further below, the lack of information about the developmental contexts of these young children, and about their program participation, limits the ability of policymakers to design effective programs to meet their needs.

(1) Lack of information on generational status and country of origin.

In research reports, sample descriptions are often incomplete in terms of the child's generational status and countries of origin. For example, samples described as "Hispanic" may not include information on whether the child is a first- or second-generation immigrant. National statistical data are typically reported for whites (which may include immigrants from the former Soviet Union and Yugoslavian republics), blacks (which may include immigrants from countries in Africa and the Caribbean and West Indies), Hispanics/Latinos (which include immigrants from over 30 countries of origin), Asians (without any specification of country of origin), and sometimes for American Indians, Alaskan Natives, and Native Hawaiians.

The rationale for these standard racial/ethnic categories is that sample size will be compromised if specific groups within the commonly used categories are further identified, and that the costs of increasing statistical reliability associated with small sample size may be prohibitive. However, though immigrant families do face common barriers, they are not homogeneous within the convenient categories used in national statistics, and the variability among groups may be important for understanding research findings and developing effective policies and programs.

Needed measures of immigrant and of generational status are not yet standard practice in many recent national surveys of children. It is now difficult to determine whether children are immigrants themselves (foreign-born), second-generation children of immigrant parents, or from Asian and Latino families who have resided in the United States for several generations. About 75% of children in immigrant families are born in the United States and are American citizens.^a Moreover, little data currently exist on whether immigrant children in surveys and research studies are undocumented, and what influences that status may have on their development. Of children born outside the United States, 40% are undocumented and hence not an insignificant group. Census 2000 has made some inroads, however. At least with respect to documented children, data from Census 2000 will augment

understanding of immigrant and generational status of children. (See the article by Hernandez in this journal issue.)

- (2) **Insufficient attention paid to the concept of ethnicity.** As currently used in surveys and research, ethnicity refers to a group of people either along racial lines, as in the case of whites and blacks—or based on geographical origins, as in the case of Asians and Latinos. Researchers have paid insufficient attention to the concept of ethnicity, how it is defined, by whom, how it changes over time and in different social and political contexts, and how it may interact with economic status, language, religion, and other cultural characteristics.^b

It is not known whether a child's ethnicity, as reported by the child's parent, contributes to measured outcomes in young immigrant children. Opportunities provided for self-identification regarding ethnicity in Census 2000 point to the potential importance of how individuals categorize themselves and their children. About 48% of Hispanics report themselves as white. Seven million individuals assigned themselves to the "other" racial/ethnic category in the 2000 Census, partially reflecting their bi- or multi-ethnic heritage. Ethnic identity may be an important factor during adolescence and adulthood, but it is curiously understudied during the first decade of life. Subjective perceptions, both in terms of the person viewed and the viewer, are likely to be important. To the extent that adult perceptions and interactions are shaped by children's physical appearances (skin color, attribution of race/ethnicity), such influences may affect children's educational achievement and other outcomes for better or for worse.

These variations may or may not prove to be important, but researchers should be mindful of their potential influences on their findings. The existence of inconsistent results based on labeled racial/ethnic groups suggests that these variations may be factors in understanding differences and similarities among groups labeled as Asian or Latino. (For further discussion of this topic, see the article by García Coll and Szalacha in this journal issue.)

- (3) **Lack of centralized data on program participation among young children.** Data on program participation from birth to eight are scattered, reflecting the fragmented structure of the programs. The only universal institutional experience for young children is their elementary school years. What happens prior to entry into compulsory education, and what happens before and after school

during the elementary school years, is the responsibility of programs under varying auspices, both public and private, and there is no centralized data collection system for these programs.

Among the several larger federal public programs (such as Head Start, Title I, and the Child Care and Development Block Grant)—which co-exist with many smaller federal and state programs—none share a common data collection system. Moreover, there is a related lack of common terminology regarding these programs. For example, the National Center on Education Statistics reports on rates of preschool participation of American children based on participation in child care, preschool, Head Start, nursery school, and early learning, as well as pre-kindergarten programs. Although quality standards vary widely across this broad array, due to the absence of uniform data and indiscriminate use of terms, it is difficult to determine

how the actual experiences of children in these programs might differ, and which programs might be best and why.

- (4) Limited research on the ecology of development for young children.** Basic research on growing up in immigrant families during the first decade of life, particularly for Latinos and Asians who constitute the largest proportion of newcomer families, is sparse compared with that of older children of immigrants. Also, as noted earlier, it is not merely more research that is needed, but research that is connected to the social and policy contexts in which immigrant children are growing up.^c For example, the integrative model for the study of developmental competencies in children of color, developed by García Coll and her colleagues, is a valuable heuristic guide for future research.^d This model should be augmented by attention to relevant public policies.

^a See the article by Hernandez in this journal issue.

^b A brief, but provocative discussion of ethnicity can be found in Chau, A. *World on fire: How exporting free market democracy breeds ethnic hatred and global instability*. New York, NY: Anchor Books, 2004, pp. 14–15. (The work of Mary Waters is a notable exception to what is described.)

^c Huston, A.C., Chang, Y.E., and Gennetian, L. Family and individual predictors of child care use by low-income families in different policy contexts. *Early Childhood Research Quarterly* (2002) 17:441–469; and Johnson, D.F., Jarerger, E., Randolph, S.J., Cauce, A.M., Ward, J. and the NICHD Early Child Care Research Network. Studying the effects of early child care experiences on the development of children of color in the U.S.: Towards a more inclusive research agenda. *Child Development* (2003) 74(5):1227–1244.

^d García Coll, C., Crnic, K., Lamberty, G., et al. An integrative model for study of developmental competencies in minority children. *Child Development* (1996) 67:1891–1914.