What do babies and toddlers need to thrive and take advantage of what preschool offers?

What programs can states fund for babies and toddlers?

How can states structure funding for programs for babies and toddlers?

Each year, more and more states recognize the importance of providing early childhood development programs for our nation’s young children. In 1980, 10 states offered limited state-funded preschool services to children. Two and a half decades later, 40 states provide state-funded preschool, reaching nearly one million four-year-olds annually. In 2006, state legislators directed over $600 million in new funding for state preschool programs, the greatest single-year increase in funding for such programs in five years. The push to make state-funded preschool available to all four-year-olds, and in some cases, three-year-olds, is gaining momentum nationwide. But children are not born at age four, or even at age three, ready to take advantage of all that preschool has to offer. Children’s success in preschool and throughout life is built on the foundation—relationships, experiences, and skills—they develop in the first three years of life.

Recent evaluation data on the federal Early Head Start program for low-income pregnant women and children under three demonstrates that children who receive high-quality services for five years beginning at birth fare better than those who spend only the two years before kindergarten in a high-quality preschool program. These children enter preschool ready to continue learning, and become students and citizens who are more likely to succeed.

While additional investment in high-quality preschool needs to be a priority, state leaders must recognize that children begin learning in their earliest days, weeks, and months. As access to preschool is expanded, the needs of babies and toddlers must also be a top priority in states across the country. By investing in at-risk children when they begin learning— at birth, states have the opportunity to change the lives of individual children today, maximize their preschool and K-12 investments, and strengthen their state for years to come.

About Ounce of Prevention Fund
Founded in 1982 as a public-private partnership, the Ounce of Prevention Fund invests in the healthy development of at-risk infants, toddlers, preschoolers and their families. We use an innovative cycle of family-focused programs, research, training, policy analysis and advocacy to help young children succeed in school and throughout life.
Our expanded knowledge of human growth and development in the earliest years has taught us that children are born learners. Approaches to life and learning developed during children’s first months and years are the approaches children will bring to learning in preschool. It is possible to tell from the way a nine-month-old baby plays with blocks whether that child is eager to explore and learn new tasks, or whether repeated failures have already made her cautious, uninterested, or expectant of failure in other new endeavors. With exposure to the right stimulation and guidance, infants and toddlers grow into preschoolers with solid social-emotional and language and literacy skills that provide the foundation for later academic success in kindergarten and beyond.

Increasingly, children are pressured to know and do more at an earlier age. Today, many young children are expected to enter kindergarten with a set of mastered skills. To be successful in school, children must master a variety of behavioral and relational skills as well. These are difficult, inter-related skills that must be nurtured through responsive relationships with parents and caregivers in the first months and years of life. The average child from a professional family hears 11 million words per year; a child from a working class family hears 6 million words per year; and a child from a family receiving welfare benefits hears 3 million words per year. Children who hear fewer words are engaged in less conversation before age three, and have dramatically smaller vocabularies than children who have richer early language experiences. This gap widens over time, making it less likely for these children to ever “catch up” to their more advantaged peers.

Children who are ready to take advantage of preschool and continue learning have gained a solid social-emotional foundation very early in life that they bring to all new learning situations. In fact, the interactions children have with parents and other caregivers in the first months and years of life have a powerful life-long influence on their social-emotional development. If children do not receive responsive care and encouragement early in life, they will not develop self-confidence in themselves as learners or an enjoyment of learning. Eventually preschool and kindergarten teachers will have difficulty engaging them in challenging learning activities. Thus, their limited self-confidence can become a self-fulfilling prophecy that hinders their ability to succeed.

Basic language and communication skills are also an important part of the foundation of preschool readiness that is formed during the first three years after birth. Research has shown that vocabulary development depends in large part on language experiences during infancy and toddlerhood. The average child from a professional family hears 11 million words per year; a child from a working class family hears 6 million words per year; and a child from a family receiving welfare benefits hears 3 million words per year. Children who hear fewer words are engaged in less conversation before age three, and have dramatically smaller vocabularies than children who have richer early language experiences. This gap widens over time, making it less likely for these children to ever “catch up” to their more advantaged peers.

Research now shows this interplay between relationships and learning and language development. In particular, there is a strong correlation between caregiver responsiveness and vocabulary growth rates over children’s first and second years. Joint attention refers to the shared focus that conversational partners—an infant and her caregiver—have on an object and topic. Infants and young children whose parents engage in more joint attention have larger vocabularies than children whose parents engage in less joint attention. And what parents and caregivers talk about is at least as important if not more important than how much they talk. When adults expand and repeat children’s words, language development improves. Infants and young children can only use the language they hear if they can connect it to particular objects. The more an adult can respond to an infant’s gaze with language instead of directing the child’s attention elsewhere, the more easily the infant can make connections between objects and words. High-quality child care environments, where caregivers practice joint attention and are responsive to the cues of infants and toddlers, have been shown to be tied to higher rates of language acquisition.

Relationships form the basis of communication and conversation.

It’s not just the quantity of words young children are exposed to but also the quality of the interactions they have with adults that fosters language acquisition.

Why the Birth-to-Three Years Matter
So how do we build early social-emotional and language foundations of learning strong enough to support children through elementary school and beyond? For some children, two and a half hours of preschool a few days a week might be enough. However, for young children struggling with economic, social and psychological stressors, more may be needed to avoid early school difficulties.

Research suggests that exposure to multiple poverty-related risks increases the odds that children will demonstrate more behavioral problems and less social-emotional readiness. Imagine how much harder it becomes for a preschool teacher to teach and a child to learn. To wait until children are three or four years of age ignores the potential of linking younger children to essential services, providing parent education and family support at one of the most critical periods of parenthood, and enriching the lives of children at a time when the greatest and most long-lasting benefits can be gained.

As a country, we must recognize that growing preschool and birth-to-three programs concurrently, especially for children at risk, is smart public policy.

Unfortunately, in many communities across the country, parents are still unable to access or afford high-quality programs for infants and toddlers. Federal programs for low-income families with children under three such as Early Head Start, serve only three percent of eligible families. Middle income families have a difficult time accessing high-quality services because they do not qualify for government programs but cannot afford private quality child care. What’s more, working parents of all incomes must confront significant challenges to transport their children between various part-day or part-year early childhood development options.

Most alarming, research shows that a large percentage of child care settings do not provide quality child development services and, in fact, might actually pose harm to child development. Simply, today’s parents do not have access to the quality of care needed to have a lasting and positive impact on their child’s future success in school or beyond.

In response, a growing number of leaders in the business, health, law enforcement, and education sectors are urging states to invest in the future by funding high-quality programs for our youngest learners today. The Committee for Economic Development, a national group representing corporate leaders, has declared that “it is time for the United States to acknowledge society’s stake in and responsibility for early education, as it long has for older children.” More and more, the case for state-funded early education is made by people who not only think it is right to invest in a child’s most critical years, but who also recognize the connection between providing quality birth-to-three and preschool programs and payoffs for the child and the country in years to come.

What does it take to support families in their job of raising children who will enter preschool curious, enthusiastic, and able to listen, share, and wait their turn? Numerous research-based programs for families with children under three have been implemented over the past two and a half decades. Some are national initiatives and others are state or local initiatives.

“...The encouraging message that comes from extensive scientific research is that we can do better. To this end, there are science-based solutions that policymakers at all levels of government can rely on to help build stronger communities that will produce healthier and more capable citizens.”

Jack Shonkoff, M.D., Center on the Developing Child, Harvard University

From Research to Policy: What Babies and Toddlers Need
All reflect four key principles from cumulative scientific findings highlighted in *From Neurons to Neighborhoods: The Science of Early Childhood Development*:

1. Early environments matter and nurturing relationships are essential. What happens during the first months and years of life is critical because it sets either a sturdy or fragile stage for what follows.

2. Emotional development and academic learning are far more closely intertwined in the very early years than has been previously understood.

3. Elements of early childhood programs that enhance social and emotional development are just as important as the components that enhance linguistic and cognitive competence.

4. Parents and other regular caregivers are “active ingredients” during the early childhood period, helping young children to develop across all domains.

To ensure all children under three—regardless of family income—develop in healthy and appropriate ways, certain basic conditions must be met. Children need a strong nurturing family and their families need access to high-quality early childhood development programs, family support, and health and mental health support. Delivering and funding high-quality early childhood development programs for children birth to three can be challenging, but several successful models exist that states can implement.
“We can shift the odds for at-risk children by assuring good health, strong families, and nurturing relationships that promote curiosity and a love of learning from birth and throughout the early years.”

Joan Lombardi, Ph.D., The Children’s Project

What Programs Can States Fund for Babies and Toddlers?

The best programs for infants and toddlers recognize the importance of relational learning—supporting parents and caregivers and the relationships they form with young children. It is through these relationships that young children acquire language and social-emotional development. Programs that reach families early and offer flexible service options have the largest impact on infants, toddlers, and their parents.

Since its creation, the federal Early Head Start program has been recognized as an important federal funding stream for infants and toddlers. But it is also known for the comprehensive vision and the high-quality standards it provides. Born as an expansion of Head Start in 1994, Early Head Start provides continuous and intensive child care. Born as an expansion of Head Start in 1994, Early Head Start provides. Since its creation, the federal Early Head Start program has been recognized as an important federal funding stream for infants and toddlers.

Early Head Start was designed to respond to and support the way in which babies and toddlers develop—where social, emotional, cognitive, and physical domains of development are intertwined—and to support the important role of parents and caregivers in early learning. Early Head Start enables communities to design flexible programs through a variety of service delivery options, but requires at a minimum, that programs adhere to a set of principles that are intentionally designed and research-based to best support children and families. Research on Early Head Start validates the effectiveness of this comprehensive model and of beginning long before preschool to support the most at-risk infants and toddlers.

Other effective birth-to-three services share similar fundamental principles, regardless of their program model. Across the country, states are taking varied approaches to implementing program models that best meet the needs of infants, toddlers, and communities, and adhere to standards of quality. Many states are following Early Head Start’s lead and adopting hallmarks of high quality for the specific programs being funded in their state, regardless of program model (see “Common Best Practices of High-Quality Birth-to-Three Programs”).

Some states have responded by developing and funding birth-to-three programs that follow these common best practices and offer families a variety of options, including:

1. **Home-based family support**, 2. **High-quality infant toddler child care**, and 3. **Comprehensive services** like Early Head Start, that include access to health and mental health supports.

No single state has all of the answers. But three examples—Parents As Teachers, First Steps: Ohio’s Infant and Toddler Initiative, and Kansas Early Head Start—illustrate the type of program models that can be implemented statewide to ensure young children and families get quality care and support during the birth-to-three years and to build the foundation for preschool.

### Common Best Practices of High Quality Birth-to-Three Programs

The Illinois Early Learning Council looked comprehensively across all prevention programs for at-risk expecting families and families with infants and toddlers in the state and agreed that despite the great diversity among birth-to-three programs, there are nine best practices that apply to all of the high-quality programs and service systems:

1. **Relationship-based approach**
   - The curriculum or approach reflects the centrality of adult/child interactions in the development of infants and toddlers and the holistic nature of child development by addressing all domains of infant and toddler development—physical, social, emotional, and cognitive. The approach supports and respects families’ unique abilities as well as their ethnic, cultural, and linguistic diversity.

2. **Screening and assessments**
   - Because infancy and early childhood are times of such rapid growth and development, assessments (or screenings) are completed at regular intervals to ensure that children and families receive appropriate services.

3. **Inclusion of parents/other family members**
   - Because infants and toddlers are profoundly influenced by their parents and other family members, services are not provided to the children in isolation from their families.

4. **Staff/family ratios**
   - Staff have reasonable caseloads or class sizes to devote adequate time to plan and build strong relationships with children and families.

5. **Staff knowledgeable about very young children**
   - Staff who are knowledgeable about infant and toddler development and who are experienced in working with children this age and their families provide the services.

6. **Staff supervision and training**
   - Staff who work with very young children and their families receive adequate supervision and ongoing training opportunities.

7. **Multidisciplinary coordination**
   - For families involved with more than one service provider, services (and assessments) are provided in a coordinated fashion.

8. **Intensity of services**
   - Services are offered on an intensive basis to meet the needs of at-risk families and with increasing or decreasing frequency as appropriate to meet the changing needs of families.

9. **Transition planning**
   - Transitions from hospital to home, from a prevention program designed for three-to-five year olds into a program designed for three-to-five year olds are carefully planned to ensure continuity of services for the child and family.
### Programs for Babies and Toddlers

#### Home-Based Family Support: Parents As Teachers

**What is it?**

Parents As Teachers (PAT) is an international early childhood parent education, family support, and school readiness program designed to enhance child development and school achievement by providing parents with the information, support, and encouragement they need to help their children develop optimally during the first five years of early childhood. The PAT model includes four components: personal/home visits, parent group meetings, developmental and health screening, and linkages to community resources.

**Who is served?**

Participation in PAT is voluntary and access is universal. Families from all socio-economic levels and communities (rural, urban, and suburban) are eligible to participate. Parent educators focus on families with children from before birth to kindergarten entry. In most areas, services are free of charge.

**How does it work?**

Certified parent educators, trained in the PAT Born To Learn model and its research-based curriculum, make home visits to families on a regular basis. Educators give parents information on child development and parenting and engage families in parent-child learning activities. The curriculum is individualized to match each child’s interests and developmental needs. The number and frequency of home visits is adjusted to meet the needs of the families served, but visits must occur at least monthly. In addition, the program holds parent group meetings so parents can share their parenting experiences, successes, and concerns. All children receive developmental, hearing, vision, dental, and health screenings at least once each program year to detect problems early and prevent later difficulties. Finally, programs link parents to a resource network of other services in the community.

**How is it implemented?**

PAT is an international program model that was first piloted in Missouri in 1981. Since that time, it has grown into a statewide program in Missouri and has been implemented in different ways in all 50 states in the U.S and eight other countries. The program design allows communities to tailor and apply the model to meet the needs of local families and take advantage of local resources. PAT is supported on a state level through a state leader responsible for providing leadership, and a system of support for PAT programs in the state. The state leader—often a state department of education, health or human services, or a nonprofit organization—works closely with the Parents As Teachers National Center to provide training and technical assistance to sites and ensure program quality. Currently, 31 states have a PAT state office.

**How is it funded?**

PAT programs are supported by state general revenue funds from state departments of education, health and human services; federal funds including Early Head Start, Head Start, Even Start, Title I, Temporary Assistance for Needy Families (TANF); and local and private funds.

**What types of agencies are funded?**

Within a state, PAT services are provided by a variety of organizations such as regional offices of education, health departments, Even Start programs, school districts, Early Head Start programs, Healthy Families America programs, colleges, and other nonprofits.

#### Infant-Toddler Child Care: First Steps: Ohio’s Infant Toddler Initiative

**What is it?**

Ohio is one of an increasing number of states using Infant Toddler Specialists to improve the quality of infant toddler child care by strengthening the knowledge and practices of caregivers. First Steps, Ohio’s Infant Toddler Initiative makes specialists in birth to three available throughout the state to provide coaching, mentoring and training to caregivers. These specialists assist birth-to-three care givers in understanding the specific growth and development of infants and toddlers and connecting them to family support, health and mental health, and other services.

**Who is served?**

Infant Toddler Specialists work with child care centers and regulated family child care homes in Ohio that serve infants and toddlers.

**How does it work?**

First Steps is an intensive statewide professional development program for infant toddler child care providers. Specialists provide a series of three, six-hour trainings throughout the state on the state’s Infant and Toddler Guidelines. In addition, they conduct at least six technical assistance visits and two Infant Toddler Environmental Rating Scale assessments for each site with which they work. All specialists are trained and certified in WestEd’s Program for Infant Toddler Caregivers.

**How is it implemented?**

The Ohio Department of Job and Family Services, Bureau of Child Care and Development, partners with the Ohio Child Care Resource and Referral Association to make available and manage Infant Toddler Specialists through Ohio’s 12 regional child care resource and referral agencies.

**How is it funded?**

Ohio uses funding from the infant-toddler set-aside of the federal Child Care and Development Block Grant for First Steps.

**What types of agencies are funded?**

Funds are provided to the regional child care resource and referral agencies throughout the state.
Comprehensive Services: Kansas Early Head Start

What is it? Kansas Early Head Start (KEHS) is a state-administered program modeled after the federal Early Head Start program that enhances children's physical, social, emotional, and cognitive development and helps parents better care for and teach their children and realize their own goals.

Who is served? Early Head Start is a federal child development program primarily for families with incomes at or below the federal poverty line. Ten percent of eligible slots are available for families with children who have special needs, regardless of income eligibility. KEHS serves pregnant women and/or children from birth to age four. Parents must be employed, attending school, or in a job training program to qualify.

How does it work? The KEHS model works with families in three ways: center-based services with enhanced home visits monthly; weekly home-based services with at least two group socialization events per month; and a combination option, which offers both center- and home-based services. KEHS services are full-day and full-year and sites must follow federal Early Head Start Performance Standards, which outline a range of required services for children and families, including health, nutrition, mental health, and social services; parental involvement; early childhood education; and child care. In addition, KEHS sites are required to partner with local community-based child care centers and family child care homes to deliver services. These community child care partners each have a Memorandum of Agreement with their local Head Start/Early Head Start agency that defines the requirements of the child care partnership in relationship to the federal performance standards and quality. Thirteen Head Start/Early Head Start grantees in the state currently collaborate with child care centers and family child care homes.

How is it implemented? KEHS is administered through the Kansas Department of Social and Rehabilitative Services. For existing federally-funded Head Start and Early Head Start programs, KEHS provides grants that are state-administered to expand the number of slots the program has to serve pregnant women and children birth to age four.

How is it funded? Kansas uses Child Care and Development Funds for KEHS. In fiscal year 2007, state general revenue funds are supporting additional slots for the first time since the program started in 1998. To provide professional development opportunities, each Head Start/Early Head Start grantee receives federal training and technical assistance funds from the U.S. Department of Health and Human Services, Administration for Children and Families, Region VII.

What types of agencies are funded? KEHS grantees consist of school districts, Community Action Agencies, and nonprofit agencies.
“Investing in disadvantaged young children is a rare public policy initiative that promotes fairness and social justice and at the same time promotes productivity in the economy and in society at large. . . At current levels of resources, society . . . underinvests in the early years.”

James J. Heckman, Ph.D., 2000 Noble Laureate in Economic Sciences

How Can States Structure Funding for Programs for Babies and Toddlers?

As policy attention has focused more and more on the importance of early childhood development beginning at birth for future school readiness and success, states have increased their public investments in early childhood development programs. Some states are more centralized, with policy and funding decisions being made at the state level, while other states have a strong county-based or local governance system that makes such decisions. There are a variety of ways to structure funding at the state level for high-quality early childhood development programs for babies and toddlers that can be adapted to either governance model.

Successful approaches focus on the full five years before kindergarten, funding both preschool and birth-to-three programs; provide dedicated funding for infants and toddlers; and join public and private funds. To ensure that birth-to-three programs are part of broader early childhood and education funding initiatives, states are using three main models to structure funding for such programs.

1. Birth-to-Three Funding Set-Aside Linked to Preschool Funding

The federal government and the state of Illinois have each used the infant toddler set-aside model to provide designated funding for birth-to-three programs within larger funding streams for early childhood. At the federal level, the Illinois Infant Toddler Set-Aside has ensured that funds are available to specifically improve the quality of infant-toddler child care. Early Head Start directs 10 percent of Head Start funding to extend comprehensive services to children under age three and their families. The Illinois Infant Toddler Set-Aside is a useful example for states thinking about how to translate the federal approach into state policy, in particular states that are in the midst of expanding their preschool funding.

Illinois Infant Toddler Set-Aside

The Illinois State Board of Education’s (ISBE) early childhood education funding stream, the Early Childhood Block Grant, funds both preschool and research-based birth-to-three programs. In FY07, the Block Grant totals $318 million and funds nearly 1,000 programs for children birth to five throughout the state. Funds that flow through the Block Grant are entirely state general revenue funds.

The Early Childhood Block Grant was enacted in 1997 to include both the pre-existing state prekindergarten program for at-risk three- and four-year-olds and state-funded programs serving infants, toddlers, and their parents. Following the federal Early Head Start model, the legislation created a mandatory funding set-aside for birth-to-three programs within the Block Grant. Today, at least 11 percent of the funding must be spent on children under three and their families. School districts and other community-based entities such as Head Start programs, child care providers, and parenting programs can apply to the Illinois State Board of Education for funds to provide one of several research-based models for infants and toddlers or preschool services.

In 2006, following a three-year, $90 million increase in the Early Childhood Block Grant, Illinois Governor Rod Blagojevich and the state legislature created Preschool for All, making Illinois the first state in the nation to offer high-quality preschool to all three- and four-year-olds whose families choose to participate while expanding child development and family support for at-risk infants and toddlers. Preschool for All, a plan to reach 190,000 young children over five years beginning with children most at-risk of later school failure, is funded through the Early Childhood Block Grant. Each year, an additional $45 million will be allocated to the Block Grant to support this new commitment and to grow funds for infants and toddlers and preschoolers at the same time.

2. Birth-to-Five Funding Stream

There is also a growing effort among states to create a funding stream for the full birth-to-five age range that is administered by a state-level commission or partnership and local county-based entities. Proposition 10 in California is one such example that provides significant public funding for children birth to five throughout California.

California’s Proposition 10

In 1998, California voters passed The California Children and Families Act or Proposition 10, which created a state-level California Children and Families Commission and 58 county-based Children and Families Commissions. These commissions, now generally known as First 5 Commissions, aim to support children from the prenatal period to age five by creating a comprehensive and integrated system of services to promote early childhood development. The Act stresses the importance of young children receiving nurturing interaction with their parents and other caregivers, good health care and nutrition, and stimulating learning opportunities to be ready for school.

Through Proposition 10, approximately $700 million in public funds is collected each year from the state tobacco tax. Twenty percent of the funds are used by First 5 California (the State Commission) for statewide education and research, and 80 percent of the funds go directly to the 58 county commissions to fund local programs for children birth to five.

All California children from birth to age five and their families are eligible for services, regardless of residency status or income level. There is currently no stipulation as to how much of the funding must be spent on children ages birth to three. However, many of the county commissions are investing specifically in infants, toddlers and their families through programs in three core areas: early childhood health and nutrition, early childhood development and learning, and parent and community education. For example, First 5 LA, the commission for Los Angeles County where roughly 30 percent of children birth to age five in the state reside, has recently made a $125 million investment in prenatal-to-three initiatives.

3. Public-Private Partnership

Roughly a dozen states have or are developing public-private partnerships that pool funding to support programs for young children. Partnerships in North Carolina and Washington focus on children birth to five years of age. Efforts in Oklahoma and Nebraska focus on combining public and private funding for services for babies and toddlers.

North Carolina Smart Start

In 1993, the North Carolina General Assembly supported Governor Jim Hunt’s vision by appropriating $20 million to create Smart Start—a system to better coordinate services for North Carolina children from birth to age five. Annual state funding for Smart Start has reached over $200 million. The Partnership is mandated by the North Carolina General Assembly to raise $1 in private funds for every $10 it receives in state funding. Since it was created, Smart Start has raised more than $250 million in private donations.

Smart Start’s goal is to ensure all North Carolina children enter kindergarten healthy and prepared to succeed. A statewide nonprofit organization called the North Carolina Partnership for Children was created to provide oversight of this initiative. Smart Start currently provides early education funding to every county in the state. Funds are administered at the local level through nonprofit organizations called local partnerships. Local services range to meet community needs, but the state-level partnership provides technical assistance and oversight to all local partnerships. Funds are used to improve the quality of child care, make child care more affordable and accessible, provide access to health services, and offer family support. Smart Start partnerships must spend 70 percent of their funding on improving child care quality, 30 percent of which is allocated to making child care more affordable to working families. Up to 30 percent of local partnership spending is for health, family support, and service coordination. North Carolina Smart Start has not established specific requirements regarding the percent of total funding that must be dedicated to programs for infants and toddlers.
“Early childhood is both the most critical and the most vulnerable time in any child’s development...in the first few years, the ingredients for intellectual, emotional, and moral growth are laid down. We cannot fail children in these early years.”

T. Berry Brazelton, M.D., Harvard Medical School & Stanley Greenspan, M.D., George Washington University Medical Center

The Risk of Doing Too Little, Too Late

Governing is about making difficult choices. When resources are scarce, there is only one policy question—where to allocate resources. The science is clearer every day—the very early years matter if we are to improve education and our citizenry. Any allocation of resources should reflect the current research about what works to improve the life trajectories of our youngest children.

The policy implications of the research are also clear: If society is committed to having all children enter school ready to learn, providing one year of preschool to four-year-olds is too little, too late for many children. So, we must invest public funding to address the learning and nurturing needs of children younger than age three.

States have the power to teach at-risk young children with programs and policies that begin early and can have a lasting impact. Expansion of state-funded preschool must be part of broader initiatives to build birth-to-five early childhood development systems. Growing services for children under three as preschool grows will help states effectively meet the existing and future demands families face and better prepare children for success.

Young children need and want to succeed in school. But children develop foundations of learning—strong or weak enough to determine their future—in their earliest days, months, and years. We know that the quality of love and support we give to babies today will shape who they become and how they will respond in the future. Reaching children during this critical time is a mandate our society cannot afford to ignore.

Notes


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Resources

Parents as Teachers www.parentsasteachers.org

First Steps: Ohio’s Infant Toddler Child Care Initiative www.occra.org

Kansas Early Head Start www.stemzaa.org/EDP/WEB/hearthead.htm

Illinois Infant Toddler Set-Aside www.ihbe.state.il.us

California First 5 Commissions www.fcc.org

North Carolina Smart Start www.ncsmartstart.org


