



FROM NEURONS TO KING COUNTY NEIGHBORHOODS

THE SCIENCE AND POLICIES OF
EARLY CHILDHOOD DEVELOPMENT



A NOTE ON NATURE, NURTURE, AND CULTURE

Nurture consists of the multiple nested environments in which children are reared—their homes, extended families, child care settings, communities and society, each of which is embedded in the values, beliefs, and practices of a given culture. The influence of nature is deeply affected by these environments and, in turn, shapes how children respond to their experiences. Giving young children a good early start increases but does not guarantee later success, and children who begin life at a disadvantage are not doomed to enduring difficulty.

Culture influences every aspect of human development. Culture prescribes how and when babies are fed, as well as where and with whom they sleep. It affects the customary response to an infant's crying and a toddler's temper tantrums. It sets the rules for discipline and expectations for developmental attainments. It affects what parents worry about and when they begin to become concerned. It influences how illness is treated and disability is perceived. It approves certain arrangements for child care and disapproves others.

The literature on typical development is based overwhelmingly on studies of middle-class children of European-American ancestry. In contrast, much of the research on children of color has focused on the impacts of poverty, drawing its samples from homogeneous communities in high-risk urban environments. Moreover, relatively little is known about the effects of racism, and other forms of systematic discrimination on early childhood development. This weakness in the knowledge base should be kept in mind as people read the summary of *What We Know* inside this leaflet.

NURTURING RELATIONSHIPS

WHAT WE KNOW

- Children require certain things from early close relationships:
 - a. reliable support that establishes confidence and trust in the adult
 - b. responsiveness that strengthens a child's sense of agency and self-efficacy
 - c. protection from harm and unforeseen threats
 - d. affection by which a child develops self-esteem
 - e. opportunities to experience and resolve human conflict cooperatively
 - f. support for growth of new skills and capabilities that are within a child's reach
 - g. reciprocal interaction: a child learns mutual give and take
 - h. experience of being respected by others and respecting them
- In these ways, nurturing relationships shape the development of self awareness, social competence, conscience, emotional growth, and other accomplishments.
- Attachments buffer against behavior problems by strengthening human connections and providing a structure for monitoring a child's behavior.
- Stability and consistency in a relationship are important.
- The longer a child remains in care that is threatening or fails to meet basic needs, the greater the challenge in getting the child on a healthy trajectory.
- The quality of caregiving has diverse roots in family ecology, marital relationships, and adults' pasts. Improving the quality of care requires carefully designed interventions that take these social and cultural features of families into consideration.
- It is important to reduce the stresses that impinge on parents such as work-related pressures and community violence.

WHAT WE PROPOSE

- ★ Promote strategies to help parents and caregivers establish and maintain nurturing relationships with children:
 - Offer education for first-time parents through programs that emphasize the emotional exchanges between parents and children and that focus on normal behavioral and emotional development. Examples include Parents as Teachers, Birth to Three, The Preventive Ounce, The Temperament Program, Touchpoints.
 - Provide incentives for parents to attend quality parent education during pregnancy or through the early years of child rearing.
- Ensure a comprehensive system of identifying and treating emotional, behavioral, and substance abuse problems in children and their parents and caregivers:
- Mental health services for parents and other caregivers
 - Information and training for parents and other caregivers to recognize signs of emotional, regulatory and health problems in young children
 - Links for families between child care and therapeutic services to meet those needs noted by early identification
 - Education of primary health care providers (pediatricians, family doctors, nurses) to improve linkages between primary health care providers and therapeutic services
 - Education of mental health professionals to intervene with young children
 - Mental health system changes to meet criteria for services and service delivery.

★ All fourteen policies were considered important and those indicated with a star were chosen for local action over the coming year.

NURTURING RELATIONSHIPS

OUR GOAL

Every parent/caregiver has the mental health and knowledge to build and sustain nurturing relationships with the children in his/her care.

FAMILY RESOURCES

WHAT WE KNOW

- Over the last quarter century, more young children are growing up in single parent homes, more mothers of young children hold full-time jobs, and more children are growing up poor.
- Poverty during the early years is especially harmful. But welfare reform experiments suggest that the success of tax and transfer policies affecting family income may hinge on simultaneously linking families and children to early interventions and mental health services.
- It is more accurate to say that poverty reduces children's chances of success, rather than that poverty leads inevitably to diminished attainment.
- The kinds of jobs parents have affect child development. It is the income earned, the proportion of the day that an infant is getting secure care and the related effects on family functioning that lie at the heart of how maternal employment affects young children. Non-standard working hours (a large share of jobs for poor working women) pose risks for children. Mothers who work for long hours during their children's first year put them at risk.
- Children in single-parent families are at greater risk for poor developmental outcomes, but there is limited understanding of why this is so; it may be related to the fact that single parent households are more likely to be poor than two-parent households.
- Parents' mental health is important. Punitive parenting, reduced monitoring, parental psychological distress, and substance abuse as well as less parental support for children's early learning, are all more prevalent in low-income families.

WHAT WE PROPOSE

- ★ Move people out of poverty:
 - Provide income assistance by enrolling all eligible families in Earned Income Tax Credit/TANF/Social Security benefits
 - Provide poor families with in-kind support: nutrition, housing, health care
 - Ensure adequate family earning capacity through flexible, client-centered job training, career progression, ESL, GED, ABE, and Conversational English programs
 - Assist in building financial assets through Individual Development Accounts, home ownership, micro-enterprise, etc.

Ensure family-friendly work environments that offer

- Paid parental leave during child's first year
- Flexible work schedules for parents
- Health insurance for family members
- Sick leave policies

FAMILY RESOURCES

OUR GOAL

Every parent/caregiver has the time and financial resources to provide safe, nurturing and stimulating environments for her/his children.



CHILD CARE: EARLY CARE & EDUCATION

WHAT WE KNOW

- The basic elements of high-quality care closely resemble the qualities of good parenting. Consistent, sensitive, and stimulating care involves the same caregiver behavior whether in the home or in child care. When the home environment fails to offer this care, child care environments that do provide it can protect and promote early development. Poor quality child care can compound the consequences of problematic parenting.
- Quality of child care is consistently associated with childrens' developmental outcomes. These associations are seldom large, but consistent and statistically significant.
- When child care is very high quality, positive effects endure into early adult years, particularly for children from the poorest home environments.
- Even small improvements in caregiver-child ratios and caregiver training, and relatively modest increases in provider wages and benefits, can produce tangible improvements in the quality of care.



WHAT WE PROPOSE

- ★ Increase provider knowledge about early childhood development and reduce provider turnover through:
 - Increased salaries and benefits
 - Career path incentives and opportunities (TEACH, Career and Wage Support Study)
- ★ Improve licensing standards, modeled after nationally-recognized, research-based standards:
 - Strengthen:
 - Ratio of provider/child
 - Staff education
 - Group size
 - Assessment of provider-child interaction
 - Parent involvement
 - Health and nutrition
 - Control of pesticide and toxic substance use
 - Increase child care program accountability through ensuring adequate number of licensors and health surveyors.
 - Provide supports and incentives for program quality (through mini grants, increased DSHS reimbursement, on-site training and technical support).
- ★ Expand access to quality early care and education through financial aid:
 - Increase rates of reimbursement to providers

Provide more flexibility and wider eligibility for higher income families:

- Enrichment for children not in child care or in care by family, friends and neighbors (FFN)
- Increased supports and incentives for offering pre-school more universally (not within K-12 system)

CHILD CARE: EARLY CARE & EDUCATION

OUR GOAL

Every child has quality care.

NEIGHBORHOOD/COMMUNITY

WHAT WE KNOW

- Perhaps neighborhoods matter most when other risk factors are present, such as family poverty or mental health problems.
- The combination of family poverty and neighborhood poverty poses a double risk to a substantial number of children. For children living in dangerous environments, neighborhood conditions may matter a great deal and pose potent risk factors.
- Experimental evidence suggests that moving from high-poverty to low-poverty neighborhoods enhances the physical and psychological health of children and reduces violent crimes committed by adolescents.
- Evidence on the impacts of neighborhood conditions on childrens' early development is complex and raises many questions. For children outside inner cities, neighborhood conditions appear to be far less consequential for child development than conditions within the family. Population-based studies show more variation in achievement, behavior, and parenting within neighborhoods than across neighborhoods.

WHAT WE PROPOSE

Reduce concentrated poverty and residential segregation through neighborhood economic and housing development.

- Increase housing subsidies and ensure affordable housing wherever people want/need to live (rent control, rent tied to income, assistance with loans for housing ownership).
- Improve and stabilize neighborhood-level economic development by increasing opportunities for micro-enterprises, community development corporations, small business development, "mainstreet" improvements, empowerment and enterprise zones, and support for community partnerships.

Develop and enforce codes and standards for home and community safety, addressing toxics, contaminants, family and community violence and safe streets.

Build neighborhood connections and strengthen social fabric and informal supports.

- Support safe and accessible places for gathering and common activities—community centers, parks, libraries, schools open for community use.
- Provide resources for organizing mutual assistance groups like child care and house maintenance co-ops.

Build civil society at the neighborhood level. In partnership with communities, strengthen and integrate formal institutions that are inclusive of and responsive to residents' priorities.

- Create and strengthen mediating structures within organizations to reach out to residents who are isolated or alienated.
- Develop local leadership through opportunities for leadership training and mentoring.

NEIGHBORHOOD/COMMUNITY

OUR GOAL

Every neighborhood is safe, cohesive and supports families and children.



ACCESS TO EARLY INTERVENTIONS

WHAT WE KNOW

- Well-designed early interventions that are child-focused produce immediate gains on standardized developmental measures. These findings have been replicated in multiple studies of children living in a variety of adverse circumstances and those with a wide range of diagnosed disabilities. The largest benefits are typically found in model demonstration projects involving high costs per child.
- For poor children, the short-term benefits of higher IQ typically fade out during middle childhood, but persistent intervention-control group differences (in academic achievement, retention in grade, and referral for special education) have been documented, favoring those children who receive early services.
- Long term follow-up data on poor children provide some evidence of intervention—control differences in high school graduation, employment, dependence on public assistance, and involvement in crime.
- The measurable effects of parent-focused interventions on standardized child development scores in economically disadvantaged families are less conclusive than for families of children with cognitive, language, or sensory impairments.
- There is little empirical documentation that non-specific, general family support models for high-risk families, which typically are less expensive to deliver, have significant effects on either parent behavior or assessed child performance.
- There is considerable evidence to support the notion that model programs that deliver carefully designed interventions with well-defined goals can affect both parenting behavior and the developmental trajectories of children who are threatened by socioeconomic disadvantage, family disruption, or diagnosed disability. Programs that combine child-focused educational activities with explicit attention to parent-child interaction patterns and relationship-building have the greatest impacts.
- In contrast, services that are supported by more modest budgets and based on generic support, often without a clear definition, appear to be less effective for families facing significant risk.

WHAT WE PROPOSE

- ★ Ensure a comprehensive system of assessment and care that provides:
 - Universal early developmental screening beginning at age 3 in all school districts
 - Multiple entry points for assessment and care that are linked across services and yield a coordinated plan of care
 - Interventions with timing, intensity, and duration that are based on intervention-specific best practices
 - Family-centered, community-based and culturally-reinforcing services

Provide family literacy programs to all who need.

- ★ Provide Head Start, Early Head Start, and ECEAP to all who need.



ACCESS TO EARLY INTERVENTIONS

OUR GOAL

Regardless of income and cultural background, every parent has access to the support, information and effective services needed to identify and respond to the developmental needs of the child.

SOURCES:

WHERE DO THE SCIENCE AND POLICIES COME FROM?

The key scientific concepts (What We Know) listed under the five important contexts for early childhood development are based on the book, *From Neurons to Neighborhoods: The Science of Early Childhood Development*, produced by the National Research Council and the Institute of Medicine, edited by Jack P. Shonkoff and Deborah A. Phillips, and published in 2000 by the National Academy Press. A 75-page report that summarizes the research behind the key concepts in the book is available from Public Health–Seattle & King County at (206) 296-6817.

The policy agenda (*What We Propose*) is a product of three large meetings and several small working meetings of stakeholders in the early childhood arena, both at the county and state levels. Convened by the Epidemiology, Planning and Evaluation Unit of Public Health – Seattle & King County, these discussions were devoted to reviewing research findings and identifying appropriate public policies that would support the environments in which positive development takes place. The third large stakeholder meeting focused on prioritizing the policy areas according to perceptions of importance and opportunities to make change. While all fourteen policies were considered important, those indicated with a star on the reverse side of this sheet are those chosen for local action over the coming year.

Organizations participating in this process of identifying and prioritizing policies:

Center for Development and Disabilities, University of Washington
City of Bellevue Department of Parks and Community Services
City of Kent Human Services Department
City of Seattle Department of Neighborhoods
City of Seattle Human Services Department
Child Care Resources
Children's Home Society of Washington
Children's Hospital and Medical Center
Denise Louie Educational Center
Department of Pediatrics, University of Washington
Economic Opportunity Institute
Family and Childhood Early Support (FACES)
Foundation for Early Learning
Fremont Public Association
Headstart/ECEAP of Puget Sound
Human Services Policy Center, University of Washington
King County Children and Family Commission
King County Mental Health Division
Project Lift-Off
Project Look
Public Health – Seattle & King County
Puget Sound Educational Service District
School of Nursing, University of Washington
Shoreline School District
Talaris Research Institute
Tukwila School District
United Way of King County
Washington Association for the Education of Young Children
Washington State Child Care Resource & Referral Network
Washington Council for Prevention of Child Abuse and Neglect
Washington State Office of the Governor
Washington State Office of the Superintendent of Public Instruction

ACTION:

ADVOCATE FOR THE POLICIES THAT MATTER FOR YOUNG CHILDREN

From the prioritization, four broad arenas of public policy have emerged for attention and action.

- Moving families out of poverty
- Helping parents nurture their children
- Strengthening our system of child care
- Building a comprehensive system of child assessment and care

In the short run, we will need to organize in order to protect the funding and legislation that are already in place with regard to these policy areas. Over time, we must use these policy areas to inform the public and to advocate for all of the policy priorities listed in the agenda on the reverse side.

By strengthening advocacy, we can build public will to address the environmental factors that shape the prospects for young children. Because child health, well-being and competence all have essentially the same basic determinants, the objectives of a wide variety of private institutions and governmental departments, whether federal, state, county or city, can be met by supporting this common policy agenda. In moving this policy agenda along, we are likely to see improvements in the environments in which most children grow up, across the socio-economic spectrum. The issue is one of "universal access" to environments that will support healthy development, school readiness and success.

Obtain more copies of this agenda and share it widely. Contact the following organizations that are involved in advocating for policies that influence positive early childhood development. Get involved!

Child Care Resources

www.childcare.org
(206) 329-1011

Children's Alliance

www.childrensalliance.org
(206) 324-0340 or (800) 854-KIDS

Human Services Policy Center, University of Washington

www.hspc.org
(206) 543-8483

United Way of King County, Children's Initiative/Success by 6®

www.uwkc.org/whatwedo/initiatives/children
(206) 461-6916

Washington State Association of Head Start and ECEAP

(360) 866-1342

Washington State Child Care Resource and Referral Network

www.childcarenet.org
(253) 383-1735 ext.15

GET INVOLVED!

Obtain more copies of this agenda and share them.



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Foundation for Early Learning
Kids Get Care
King County Children and
Family Commission

Public Health – Seattle & King County

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