

## The Brookings Institution

1775 MASSACHUSETTS AVENUE, NW WASHINGTON, DC 20036-2188

TEL: 202-797-6297 FAX: 202-797-6004 WWW.BROOKINGS.EDU



### Welfare Reform & Beyond Working Paper<sup>1</sup>

# GETTING FROM HERE TO THERE: ORGANIZATION AND COORDINATION OF EARLY CHILDHOOD SERVICES

BY JAMES J. GALLAGHER, RICHARD M. CLIFFORD, AND KELLY MAXWELL

NOVEMBER 2004

PAPER PREPARED FOR THE BROOKINGS INSTITUTION – UNIVERSITY OF NORTH  
CAROLINA CONFERENCE ON “CREATING A NATIONAL PLAN FOR THE  
EDUCATION OF 4-YEAR-OLDS.”

---

<sup>1</sup> This working paper from the Brookings Institution has not been through a formal review process and should be considered a draft. Please contact the authors for permission if you are interested in citing this paper or any portion of it. This paper is distributed in the expectation that it may elicit useful comments and is subject to subsequent revision. The views expressed in this piece are those of the authors and should not be attributed to the staff, officers or trustees of the Brookings Institution.

*James J. Gallagher and Richard Clifford are both Senior Scientists at the Frank Porter Graham Child Development Institute at the University of North Carolina, Chapel Hill*

*Kelly Maxwell is a Scientist at the the Frank Porter Graham Child Development Institute at the University of North Carolina, Chapel Hill*

Brookings Working Paper

**Getting from Here to There:**

**Organization and Coordination of Early Childhood Services**

**James J. Gallagher**

**Richard M. Clifford**

**Kelly Maxwell**

Frank Porter Graham Child Development Institute  
University of North Carolina at Chapel Hill

available online at:

<http://www.brookings.edu/es/research/projects/wrb/200409conference.htm>

**Introduction**

Children in the US are increasingly starting their formal education at age 3. Here in the US where we have relied primarily on a market driven approach to providing early childhood services (Cost, Quality and Outcomes Study Team, 1995), we already have some 1 million children in schools prior to the age of kindergarten entry (Clifford, Early & Hills, 1999). In addition, many more children are receiving educational services outside the schools. Other countries are well on their way to developing a true system of services for young children and their families (Kamerman, 1989).

While this conference focuses on the need to provide services to all at risk four-year-olds to ensure that all of these children have at least one year of educational intervention prior to entering the current formal school system in the US at age 5, our contention is that efforts to accomplish this goal must take into account the reality of the shift toward universal provision of

services for preschoolers which is underway. At the very least, as we seek to ensure that these at-risk children receive early education services, we should seek to deliver these services in a way that recognizes the move toward universal services and which will blend with the universal system as it develops. In fact, the reality that many of these at-risk children are already being served through a variety of programs emphasizes the need to find a mechanism to coordinate the services. Thus, we start from the premise that a coherent system of high quality early childhood services with access for all children ages 3 and 4 is the goal. This does not mean that we would have one uniform system with all children attending a single institution, but rather the existing service providers would offer options for families which all met a unified set of standards, were open to all families who desired the service for their children, and were affordable.

The building of such a system of early childhood services is one of the larger societal challenges facing us. So let us start with the statement with which we ended a recent article. (Gallagher, Clifford, & Maxwell, 2004).

“One future option for early childhood services is simply not acceptable - the status quo. Services are too fragmented, too chaotic and too expensive in their redundancies to expect generous public support. The price for public support would be a coordinated system that the public sees as efficient and effective. Only then will we gain the necessary financial and political support needed to fulfill the goals of parents and professionals committed to an appropriate early childhood system for all children” (p. 27).

One example may suffice to illustrate the need for change. In North Carolina there are approximately 110,000 children age 4. Of these children, some 40,000 are considered to be at risk of school failure when they enter the formal school setting. In a recent review, officials

were able to determine that some 10,000 of these children were not in any program that was designed to help meet their educational needs even though Head Start, subsidized child care, Title I preschool programs, and early intervention services were all charged with addressing the needs of these children. These children were slipping through the gaps in the service delivery system.

When there is general agreement that coordination and collaboration should happen but it does not, then it is time to look at the problems involved in creating such a system. This paper examines the reasons for the current early childhood interest, the major players, the barriers to coordination, some engines for societal change, and some steps that can be taken towards that goal.

### **Why Increased Interest in Early Childhood?**

The development, care, and education of children from birth to age 5 have been the focus of rapidly increasing public interest. Numerous early childhood public policy initiatives have focused attention on the major problem of coordination and collaboration of services for young children. This increased public interest in young children seems to stem from several factors:

- A sharp increase in mothers of young children in the workforce (Kamerman & Gatenio, 2003).
- A realization of the importance of early brain development and stimulation to later development (Shonkoff & Phillips, 2000).
- Increasing evidence that a large number of young children enter the public schools unready to take advantage of what the schools offer (Zill & West, 2001; Kagan & Cohen, 1997; McMillen & Kaufman, 1996;).

- Increasing pressure to improve school achievement for children at risk for academic and social failure (Neuman, 2003; Clifford, Early, & Hills, 1999).

### **Who Are the Major Professional Players in Early Childhood?**

The needs of young children have been addressed by at least four major sources and groups. Four federally funded segments are important in understanding current services for young children—(1) child care (i.e., Child Care and Development Block Grant [CCDBG] and Temporary Assistance to Needy Families [TANF]), (2) federally mandated services for children with disabilities (i.e., P.L. 94-142 [Education for All Handicapped Children Act] and P.L. 99-457 [Education for the Handicapped Amendments of 1986]), (3) Head Start, and (4) preschool education programs supported through Title 1 of the Elementary and Secondary Education Act of 1965 (P.L. 89-10) and through state initiatives—have all been major players in providing services for differing, and sometimes overlapping, populations of young children. Each group has a similar mission: to help children (most often children with special needs or limited opportunities) master the skills and knowledge needed to adapt effectively to kindergarten at age 5. Because the groups developed independently, they have overlapping personnel preparation programs, evaluation efforts, and data systems. (Clifford, 1995).

Table 1 lists the four major players and provides information about how the programs in each area were initiated, how the programs are currently administered, the number of children served within each program area, and the amount of money now allocated to the area by the federal government. Each of the four program areas was initiated at different times, is administered by different agencies, involves large populations of children, and involves substantial sums of money. While the figures below are for all children younger than 5, Barnett and Masse (2003) estimate that the federal government spent more than \$20 billion when funds

in these programs serving children up to age 14 are included. Each program area now has cadres of professionals committed to the purposes of its authorizing legislation together with a number of institutions established to carry out its purpose (e.g., research centers, technical assistance programs, data collection systems).

**Table 1**  
**Four Major Players in Early Childhood (FY 2001)**

<b>Player</b>	<b>Initiated</b>	<b>Administered</b>	<b>Children Served</b>	<b>Federal Contribution</b>	<b>State * Contribution</b>
Child Care	Social Security Amendments of 1935	Administration for Children and Families U.S. Dept. of Health & Human Services	1.7 million	CCDBG (P.L. 104-103) \$3.1 billion  TANF \$2.3 billion	NA
Children with Disabilities	P.L. 94-142 (1975)	Office of Special Education Programs	(ages 3-5) 599,000	\$229 million	\$2.4 billion
	P.L. 99-457 (Infants & Toddlers)	U.S. Dept. of Education	(ages 0-3) 247,000	\$427 million	\$1.4 billion
Head Start	Economic Opportunity Act of 1964	Head Start Bureau U.S. Dept. of Health & Human Services	912,345	\$6.2 billion  Early Head Start (0-3)—\$432 million	NA
Title 1 and State Prekindergarten	Elementary and Secondary Education Act of 1965	U.S. Dept. of Education	740,000	\$704 million (est.)	\$2.0 billion

\*Reliable figures for state and local contributions are not available for many programs. However, Barnett and Masse (2003) estimate that total state and local contributions to programs for children under age 5 were approximately \$5.8 billion by 2001, without consideration of state contributions to child care and Head Start.

### **Child Care**

Although established by federal legislation in the 1930s, federally supported child care became a focus of the Great Society programs in the 1960s to aid children and their families. The federal child care effort comprises two major funds: the Child Care and Development Block Grant (CCDBG), which distributes money to the states, and Temporary Assistance to Needy Families (TANF), designed as part of the welfare reform program. Together these funds amounted to \$5.4 billion in fiscal year 2001 to help support child care centers, family child care homes, and other non-relative care homes for children 5 years and younger. In addition, both

federal and state governments subsidize family expenditures for child care through tax credits, deductions, and other mechanisms (Barnett & Masse, 2003).

### **Head Start**

Head Start was established as a summer program for disadvantaged youth (ages 3 and 4) and quickly became a permanent program (Zigler, Kagan, & Hall, 1996). Its aim was to help children born into poverty be ready for school by promoting good health, social skills, and cognitive growth. The program was designed to help families as well as young children and spent \$6.2 billion dollars in 2002, serving over 900,000 children. To help children younger than 3, Early Head Start spent another \$432 million. Local match is required, but not well documented, and some states add state funds to Head Start programs. Recently, a bill (H.R. 2210), the School Readiness Act of 2003, was introduced in the House of Representatives to facilitate collaboration with other early childhood programs through funds provided to eight pilot states. This represents a major shift in financing Head Start and is opposed by various organizations supporting Head Start.

### **Children with Disabilities**

Federally supported preschool services for children with disabilities started with a small demonstration program in 1968 (Gallagher, 2000) and developed further through the Education for All Handicapped Children Act (P.L. 94-142) and a special law to include infants and toddlers, the Education for the Handicapped Amendments of 1986 (P.L. 99-457) (Gallagher, Trohanis, & Clifford, 1989). These two laws were mandates requiring services to eligible children, which resulted in impressive state action supporting the federal commitment, far exceeding the federal financial expenditure.



## **Preschool Education Programs**

Preschool education programs were established through Title 1 of the Elementary and Secondary Education Act of 1965 (P.L. 89-10). The law was designed to target children in schools with a high incidence of poverty to forestall school failure. The estimated amount spent on preschool children was \$704 million (Barnett & Masse, 2003).

States have also begun to initiate their own preschool programs aimed at improving outcomes for young children when they attend elementary school. These programs, typically referred to as “prekindergarten” programs, have grown dramatically in recent years. By 2000, at least 34 states, plus the District of Columbia, had established prekindergarten programs, mostly for children at risk for academic and social failure. A few states are moving toward making these services available to all 4-year-old children, and other states and localities are following suit. Bryant and her colleagues estimate that states were serving more than 740,000 children and spending in excess of \$2 billion on these programs by the turn of the century (Bryant et al., n.d.).

Each major program area designed its own system of disbursement of resources, encouraged its own clientele, and developed rules to fit its perceived program goals. The professionals who oversaw these programs came from many different disciplines, but professionals from the disciplines of child development and education were the most heavily involved.

We are well beyond the experimental phase in providing services for children prior to entry into the formal school system in our country, yet there are few formal mechanisms for governing these diverse services either across levels of government (federal, state, and local) or across the various agencies responsible for delivering these services.

Of course, it is an oversimplification to limit our concerns about early childhood to these four groups. Within each of these four program areas, many programs are operated by religious groups, by various nonprofit agencies, and by both local and national corporations. They too will be influenced by public policy actions. Each of these subgroups further complicates the practicalities of collaboration. How can these four players and subgroups be brought together to form a seamless early childhood service system? That is the challenge to today's decision makers. A final complexity facing all four of these groups is the increasing diversity of the U.S. population, which affects goals, curricula, and personnel preparation.

### **Barriers to Reform**

Given this consensus of program needs, the relative lack of progress in collaboration suggests the need for an investigation into the 'barriers to reform.' One of the difficulties in community reform packages or educational reform proposals is that they are often based on the principles of effectiveness and economy to the exclusion of human emotions. While such proposals may well be eloquent in their plans they often are bloodless and passionless in their ignoring of potential loss of status and power of individuals or professional groups affected by the plans or the powerful role played by inertia and the status quo.

Gallagher and Clifford (2000) have presented a series of potential barriers that could hinder, delay, or postpone desired policy actions. Certainly, the self-interest of professional groups and the established patterns of service delivery of the four major players alert us to potential barriers to change (see Table 2).

**Table 2****Barriers to Reform**

There are few policies that do not find some barriers that stand in the way of implementation. Success in policy implementation often depends on knowing the nature of these barriers, how they interact, and how they can be portrayed, so that an effective strategy can be devised to overcome them.

**Institutional**

These barriers arise when the proposed policy conflicts with the current operation of established social and political institutions. If a lead agency is identified to carry out the policy, is that agency given sufficient authority and resources?

**Psychological**

A proposed policy can come into conflict with deeply held personal beliefs of clients, professionals, or leaders who must implement the policy. Any time someone loses authority or status, there can be personal resistance.

**Sociological**

Sometimes the new policy runs afoul of established mores or cultural values of subgroups within the society. The notion of family empowerment, for example, might be a difficult one for families to entertain who show deference to those in authority.

**Economic**

Often, the promise of resources to carry out a program is not fulfilled, not because of deviousness, but because of the multitude of issues to be met and the limited financial resources at the state or federal level.

**Political**

There is a periodic overturn of political leaders or political parties through retirement or elections—changes that can cause disjunction in the support or understanding on the part of political leaders.

**Geographic**

The delivery of services to rural and inner-city areas has long plagued those who have tried to provide comprehensive health and social services.

Table 2. Adapted from *Barriers to policy implementation*. Source: Gallagher & Clifford (2000).

### **Institutional Barriers**

Each of the players has established institutional support systems, personnel preparation programs, and technical assistance programs. Varieties of professional organizations also play a role in the support of particular programs. These organizations include NAEYC, the Council for Exceptional Children, the national Head Start Association, and the American Federation of Teachers. We maintain that all organizations will resist change when they perceive it as harming their own interests in early childhood. A call for interagency cooperation might create difficulties in blending the existing policies across health, social services, and educational agencies.

### **Psychological and Sociological Barriers**

Additional barriers may come from individuals (psychological) or subgroups (sociological) of individuals who perceive their own status to be threatened by proposed changes. Some professionals have worked faithfully for years for their agencies or organizations and would be justifiably concerned with major proposals for change. Similarly, some subgroups suspect that changes will downgrade their already shaky status in society. Numerous proposals have been made to fold Head Start into public education, for example, and the Head Start families and personnel have reacted negatively and strongly opposed such proposals. Sometimes professionals can be upset because they weren't consulted on the policy before it was released.

### **Economic Barriers**

Economic barriers, although far from the only barriers, are probably the most serious to be overcome. It is not clear yet whether the American public is willing to accept financial responsibility for preschool children. A recent report from the National Academy of Sciences estimates that we spend one-quarter the amount per capita on children birth to 5 as we spend on

children ages 6-17 (Ladd, Chalk, & Hansen, 1999). As long as many members of the public see early care and education as a service to parents rather than future developmental enhancement for children, they will be unlikely to pick up the cost of comprehensive programs.

### **Political Barriers**

All of these programs rely on political support to provide the authority and resources to get their jobs done. But politicians come and go, and a program may lose its protector through elections or retirement. Time constraints marked by elections and legislative calendars affect the politics that influence programs. The legislative committees that have been formed to oversee such programs also can be counted upon to question what major changes might mean for them. A program identified with one political party can be at risk when the other party comes to power.

### **Geographic Barriers**

Geographic barriers—distance and isolation in rural areas, and danger and decay in urban areas—limit the resources available for early childhood programs. Typically, the infrastructure support rests in the urban or suburban areas. A comprehensive system could help meet the needs of the young children served by these programs.

### **Pedagogical and Philosophical Barriers**

Additional barriers include the pedagogical and philosophical differences among the four major players. Head Start emphasizes health issues and parental influence on the program. The Title 1 programs emphasize preparing children for academic activities. Programs for children with disabilities emphasize individualization of programs. Attempting to meld all of these elements would be difficult indeed.

## **Status Quo**

The status quo as a force is one of the more significant barriers in policy initiation or change. In any people-serving operation (e.g., health, education, and social work), professionals become accustomed to carrying out their jobs in certain ways, and they need a powerful reason to change in order to overcome that resistance. Psychological inertia can be as powerful as physical inertia (Fullan, 1993).

One reason that is often given for change is that newer approaches are more effective and efficient. The “carrot side” of the argument is that new methods may improve performance and increase professionalism (Zigler, Kagan, & Hall, 1996). The “stick side” of the argument is that the status quo may not be allowed to continue. Professionals unwilling to change may be replaced or lose funds. Some combination of the “carrot and stick” approach may be necessary to convince people who are being asked to change to accede to these requests.

## **Limited Collaboration**

Professionals within and outside the four major groups have recognized the need for greater coordination and collaboration among service and support units in early childhood. Many attempts have already been made in local or regional settings to establish coordination efforts.

The following are a few examples of many that could be cited:

- Federal and state policies often encourage or require community-level collaboration among early childhood education and care (ECEC) programs and related family services of health, employment, housing, and transportation (Ranck, 2003, p. 61).
- Schools in Kentucky have become full-service centers for the coordination of delivery of health, welfare, and social services, promoting one-stop support for families (Bowman, 2003, p. 134).

- A number of higher education institutions have established interdisciplinary collaboration among preservice personnel preparation programs (Mellin & Winton, 2003).
- Several states support joint teacher certification programs between early childhood education and special education (Danaher, Kraus, Armijo, & Hipps, 2003).

What is the problem in seeking a coherent and collaborative system? It is simply that at present there is neither the legislative authority nor the necessary institutions to bring about comprehensive collaboration. In addition, there are anxieties about the unintended consequences of collaboration for the four players.

Despite the clear desire of many professionals to seek collaboration, the prospect of change, even favorable change, carries with it concerns about unknown consequences. When such concerns are matched against the potential benefits of collaboration, it is the "concerns" that often carry the day. To expect an eager reception for collaboration by the four players is to ask for a change in human nature and the dismissal of self-interest—expectations that are truly unreasonable.

The debate regarding the 2004 U.S. House of Representatives' version of the reauthorization of Head Start illustrates these difficulties. The House version of the bill called for shifting control of Head Start to state governments in up to eight states as a test to see whether more collaboration would be possible. Many early childhood advocates, including the National Head Start Association, opposed the bill, calling this move the beginning of the end of Head Start as we know it.

### **An Ideal Service System?**

The purpose of an ideal early childhood system is to ensure that all young children have access to affordable, high-quality care and education that prepares them for academic and social

success. The ideal system also should support America's diverse families in their efforts to provide appropriate care and education for their children. Table 3 provides a brief description of the components of an ideal system.

**Table 3**  
**Components of an Ideal Service System in Early Childhood**

Components	Rationale
Information & Support	All families would have access to information and support about parenting, child development, and community services.
Universal Screening	The ideal early childhood system would offer systematic, ongoing health and developmental screenings for all young children.
Continuum of High-Quality Services	The ideal early childhood system would offer a continuum of high-quality care and education services to meet the diverse needs of families and children.
Competent Personnel	Well prepared teachers and aides would be present in proper proportions to deliver the services to the preschool children.
Appropriate Curriculum	A well-accepted program of developmental activities would be applied to help enhance children's health and motor development, cognitive abilities, language development, and social and emotional development.
Constructive Learning Environment	Constructive learning environments, meeting professional standards, would provide sufficient space and equipment in attractive surroundings.
Adequate Financing	Direct services would have adequate funds to achieve goals for children, provide adequate compensation for staff, and purchase supplies and necessary equipment to aid program delivery.

### **Information and Support**

The information and support component of the system would link families to a network of community resources, provide public awareness for various aspects of the system, support families through transitions (e.g., moving from preschool to kindergarten), and proactively reach out to high-risk families (Clifford & Gallagher, 2001).



**Universal Screening**

The primary purpose of these screenings would be to identify problems and offer treatment or early intervention as quickly as possible to maximize each child's long-term development. These screenings would occur periodically across the early childhood age range and be offered in locations convenient and accessible to all families (Cryer, 2003).

**Continuum of High-Quality Early Care, Education, and Intervention**

Children would be engaged in meaningful and enjoyable activities that support their optimal growth and development while preparing them for academic and social success. The continuum of care and education would include part-time, as well as full-time, care and education that occur in various settings—the child's own home, family child care homes, center-based programs, and schools.

**Competent Personnel**

Plans would be available to continuously upgrade existing personnel and recruit additional qualified personnel. The programs and staff would reflect the children and families served and would facilitate children's entry into the diverse culture of the United States. This component is addressed in detail in other papers prepared for this meeting.

**Appropriate Curriculum**

The federal government currently has a major initiative underway to examine the efficacy of a variety of curricula as they seek to promote improvement in child outcomes and to support the development of new curricula (Department of Education's PCER grant program and the joint HHS/Education research program). To date we have little evidence that any one curriculum is clearly providing the guidance to teachers and administrators in a manner that leads to higher child outcomes relative to other models. There is very limited evidence of the efficacy of any

curriculum (Henry, Gordon, Henderson, & Ponder, 2003). The lack of high quality clinical trials and the realities of sporadic implementation when curricula are used in operational settings leave state and federal administrators at a disadvantage in determining how to judge individual curricula. However, having some clear guidance for programs seems only prudent, particularly given the lack of highly trained personnel in many of the programs. States have established mechanisms for approving curricula for schools in the K-12 system. While these may be less than we would hope for, they do provide a model for making rational choices of curriculum materials with limited knowledge about the efficacy of the materials. Such models could suffice until better research becomes available.

### **Constructive Learning Environment**

Learning environments would meet standards set forth in instruments such as the Early Childhood Environment Rating Scale Revised Edition (Harms, Clifford, & Cryer, 1998) or by professional groups such as the American Public Health Association and the American Academy of Pediatrics (2002) in *Caring for Our Children*, or the National Association for the Education of Young Children (NAEYC) in *Developmentally Appropriate Practice in Early Childhood Programs* (Bredekamp & Copple, 1997) and accreditation programs.

### **Adequate Financing**

Funds would be available through federal, state, and local sources, parent fees, and private contributors. Financial support would at least be the same as the per-pupil cost of public schools. It is widely recognized that few early childhood programs meet these financial standards at present (Cost, Quality, and Outcomes, 1995; Helburn & Bergmann, 2002). In addition, efficient systems for distributing government funding would be coordinated across the many different programs or through some consolidation of programs.

As described above, extensive financial resources are already in place for serving young children—our estimates are that federal and state government spending at the current time approaches nearly \$25 billion. It is not known how much local government financing is involved. Furthermore, it should not be forgotten that parents are currently paying the majority of the costs of early care and education. Mitchell and her colleagues estimate that parents pay some 60% of the total costs (Mitchell, Stoney, & Dichter, 2001). Although very substantial additional resources will be needed to ensure high-quality programs for all children and families needing those services, a substantial base exists from which to build the system. Barnett and Masse (2003) estimate that the total cost for operating a comprehensive early care and education system is at least \$40 billion. Some economy of scale and efficiency will help to offset a portion of these large expenses as the seamless system is built.

### **Individuals or Systems?**

There are two quite different approaches to the issue of improvement of services. The first is to rely upon the quality and character of the individual professional, whether it be teacher, child care worker, or special educator. The bad news related to this approach is that if the program does not go as anticipated that implies the professional responsible is incompetent or lazy or not committed to the children involved. Much concern is emerging from the negative results being spawned by the No Child Left Behind Act. Teachers and schools, never before questioned, are being accused of failing in their primary responsibility.

The second approach is to address the implementation of services as a systems issue. In this case it is the lack of a system of services that can cause an inadequate response. Most of the rest of American society have bought into the system approach for complex tasks. Whether it is the selling of cars (think of the Ford motor company), the provision of medical services, or even

the playing of baseball there is a complex system of personnel development and institutional and support services that allows their goals to be met. In education and in childcare much of the effort and responsibility is borne at the local level.

For example, consider the case of Arnie, an autistic child who must be provided specialized instruction within a system of support services. His parents were delighted upon the arrival of Arnie and only gradually did they become aware of many problems that interfered with Arnie's development. After visiting with a number of pediatricians about his slow development and his inability to interact with his parents and other children, they received a diagnosis of autism. His parents tried to get child care for him but the local child care program confessed that they did not know how to cope with Arnie's temper tantrums or his inability to communicate.

Now his parents are truly worried about Arnie and his adaptation to school. What will Arnie do in school and how will the school respond? To expect the kindergarten teacher to cope with Arnie's developmental problems is unfair to her and unfair to Arnie. The truth of this situation, which is faced over and over again, is that no single professional can be expected to plan or carry out a program for Arnie. It requires a team of professionals from special educators to psychologists, to teachers, to instructional technologists.

But how to assemble such a team? Will they all volunteer? Who will pay for the additional expenses? The parents? The father is a computer salesman who works hard but doesn't earn at a high level. Is there a system of care that can be energized in this situation? The answer is Yes, primarily because parents and professionals have lobbied for legislation that provided for special education support, so that a system of multidisciplinary support was possible.

Does anyone believe that just getting the best possible kindergarten teacher, Ms. Foster, for example, who is highly motivated, is the answer? If we could believe that, let us introduce some more youngsters: Bobbie who has been identified as socially-emotionally disturbed who attacks other children when frustrated, and Cathy who has cerebral palsy and is learning mobility skills just to get into the classroom, never mind about learning the lessons. In addition, children who do not speak English or who come from a different cultural background have additional needs beyond the ones discussed here.

Has Ms. Foster has failed? Why can't we just find the right kind of teachers? Ones that can teach and 'civilize' all those kids and not whine about it and bother the rest of us. No Child Left Behind is such a great slogan, but it must be backed up with a comprehensive system of services.

One answer is to build a series of support services so that Ms. Foster is surrounded by assistance just as Dr. Grant the local pediatrician is: nurses, laboratories, hospitals, technicians, etc. We do know how to do this, of course. Assemble a team of psychologists, educational specialists, teachers, technicians, paraprofessionals, etc. Our best funded school systems have learned how to create such a system with fiscal help from state and federal government.

To those who despair of solving these problems we give you the comments of Harvard economist, Lester Thurow (1981), who said there are many problems like this in our society and many solutions to them. The difficulty lies in trying to find a solution that does not cost money, or that does not make the comfortable in our society uncomfortable. The collective job of professionals is not merely to continue to ask for more and more resources from the public to pay for these support systems but to also create an efficient system of support that eliminates redundancy and reduces administrative bureaucracy.

Currently, major efforts are underway on the part of policy makers to move toward creating a seamless system of services, at least for 3- and 4-year-olds. We know how to build programs that are good for children in these age groups, have a modest supply of trained personnel, and, with the infusion of additional funding, have the capability in the higher education system to provide a substantial number of additional teachers. All of these factors point to relatively rapid development of a system of services for 3- and 4-year-olds.

### **Engines of Change**

The vast numbers of potential barriers to change call for special attention. Sheer persuasion, or logical arguments, applied to these barriers may not be sufficient. Gallagher (2002) has described four major engines of change that can affect early childhood programs—legislation, court actions, administrative rule making, and professional initiatives.

#### **Legislation**

Legislation moves away from persuasion as a means of changing the behavior of parents and child care workers to mandates for specific behavior. Once enacted, a law requires compliance. For example, teacher-to-child ratios become more standardized when legislation is specific about such requirements. Goals 2000 (National Education Goals Panel, 1997) stated clearly that in this country all children should be ready to learn when they enter school. This goal was stated as an expectation rather than a mandate. By contrast, the No Child Left Behind Act (P.L. 107-110) is a law that requires certain standards to be met in an effort to ensure that all children come to school ready to succeed and continue to succeed.

Consider legislation such as the Individuals with Disabilities Education Act (IDEA, P.L. 105-15), which guarantees a free and appropriate education to all children with disabilities. This law focuses on the performance of schools rather than individuals and provides for sanctions for

those schools where the students are not meeting predetermined rates of progress. IDEA has opened the door to opportunity for many young children with disabilities who would not have received needed services before the Act existed.

State legislation and other state actions have played an important role in making early care and education services available to young children. A recent example can be seen in Florida, where a constitutional amendment requires free and universal access to prekindergarten to all Florida parents who wish to have these services for their 4-year-old children. The New York state legislature set similar goals for universal access to prekindergarten several years ago. In the cases of both Florida and New York, the degree to which high-quality services will be available to families is yet to be determined. Even though it may take time to fully implement legislative intent, the existence of legislation is a powerful engine for change in our society.

### **Court Action**

Court action represents another engine of change. In *Brown v. Board of Education*, the Supreme Court mandated desegregation of our public schools. The half-century that followed was affected in many ways by that decision and by the many rulings that followed from it. The courts have also been active in many dimensions of early childhood services.

Court actions such as the Leandro case in North Carolina (*Leandro v. North Carolina*, 1999) and the Abbott case in New Jersey (*Abbott v. Burke*, 1998) have addressed the inequity of public education for young children from economically disadvantaged homes and neighborhoods and called for redistribution of resources within the states to create more equal conditions for learning. In both of these cases, high-quality early education for children prior to kindergarten was identified as a key strategy for a more equitable education. In both cases, the response to the

court rulings has created an expectation for change, which cuts across the traditional divisions in the early childhood field.

### **Administrative Rule Making**

Administrative rules strengthen the standards for early childhood programs and have changed the landscape for young children. Gallagher, Rooney, and Campbell (1999) analyzed state regulations for child care in four states and concluded that existing state regulations paid more attention to the physical health and safety of young children than to the stimulation of cognitive, social, and emotional development. Such state regulations sent a message to child care operators that developmental stimulation was not a top priority and that providing a "safe haven" for children was the main goal.

A recent strong movement to develop child-based outcome standards suggests that child development is the key goal for children. Survey data in 2000 revealed that 27 states had child-based outcome standards covering at least one developmental domain or academic content area for preschool-age children. Another 12 states were in the process of developing such standards (Scott-Little, Kagan, & Frelow, 2003). In developing standards, states typically seek to tie prekindergarten learning standards to those of their K-12 systems.

Administrative rule making tries to answer many of the questions regarding implementation of major ideas, laws, or legal decisions that must take place. Rule making on the implementation of such central ideas as placing a child with disabilities in the "least restrictive environment" has had much to do with shaping the inclusive early childhood settings of the past two decades. Thus, we see that administrative rules are another major engine for change that can help provide a seamless system of services for young children and their families.



## **Professional Initiatives**

Professional initiatives refer to actions taken by individual professionals or organizations of professionals. For example, NAEYC's Developmentally Appropriate Practice in Early Childhood Programs (Bredekamp & Copple, 1997) has had a huge impact on many early education programs. NAEYC consolidated this impact through the development of a system for accrediting early childhood programs that set new standards for practice in the field. The standards for personnel preparation established by the Council for Exceptional Children have similarly influenced the staffing of many programs for children with special needs. The American Academy of Pediatrics publication *Caring for Our Children* (American Public Health Association & American Academy of Pediatrics, 1992) also set new standards for child care in America.

Finally, the professions can influence practice both through the training of preservice professionals and through ongoing research. A series of studies to test whether early intervention could make a positive difference in the development of young children has demonstrated clearly that high-quality interventions can have a positive, long-term impact on young children. The intervention studies have proven that meaningful, if modest, gains can be made for children "at high risk" through implementation of a systematic program focusing on language development, social and emotional development, and good work habits (see Guralnick, 1997; Bryant & Maxwell, 1999; Ramey & Ramey, 1998; Schweinhart, Barnes, & Weikart, 1993; Behrman, 1995, Woolery & Bailey, 2002).

### **Changing the Early Childhood Service Systems: A Common Support System**

In seeking a seamless early childhood program, it would be too much to expect that the current four major delivery systems—federally supported child care, Head Start, federally

mandated services for children with disabilities, and federally and state-supported preschool programs—would agree to merge their service programs. However, a possible first step toward a universal system of early childhood services could be the blending of the groups' support systems so that a single support system could back up all four of the service programs and settings. Figure 1 reflects such a proposed integrated support system serving four separate service providers, and it shows the various support elements that each of the four major players includes in its operation. The supporting agencies are also included.

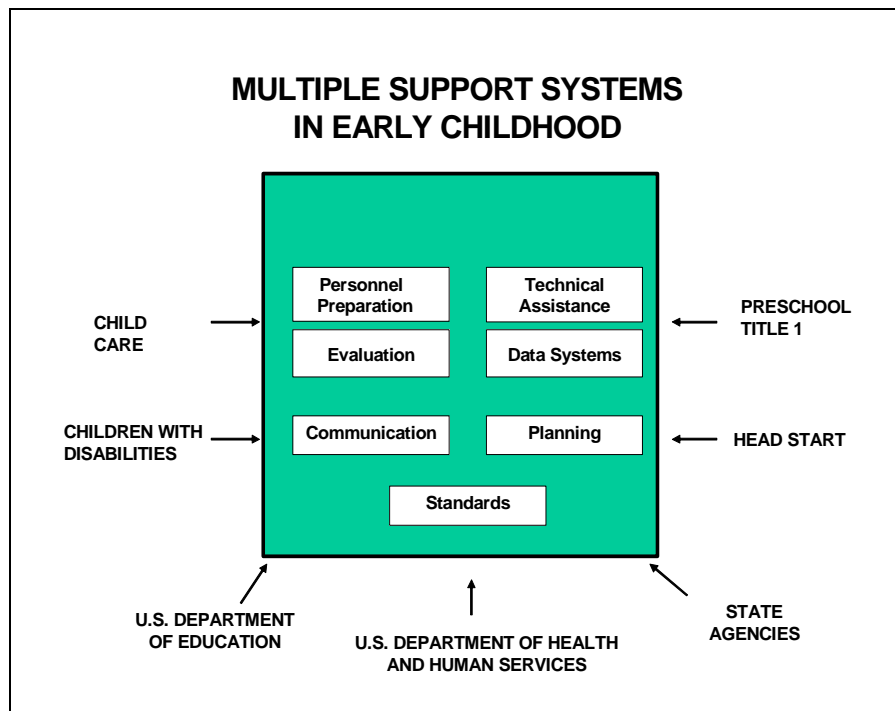


Figure 1. Support System Elements

Collaboration efforts will almost certainly require a blending of the various support system elements for these agencies. Professional groups will have to be involved for the blending of standards and communication systems. Suggestions for blending support elements follow:

- *Personnel Preparation.* One personnel preparation program would focus on early childhood development with special additions for those working with children with disabilities or children in poverty.
- *Technical Assistance.* One technical assistance (TA) program would be established instead of four.
- *Evaluation.* The strong call for accountability has caused all of the entities to consider the appropriate approach to evaluation to meet these accountability requirements. A single approach to evaluation for these programs would be developed so that four separate evaluation systems are no longer necessary.
- *Data Systems.* A single data system, instead of four, would provide a central data repository at the state and federal levels, providing resources to answer questions posed by decision makers, instead of having fragmentary information of limited value.
- *Communication.* Each of the four major programs has a series of mechanisms designed to communicate with their clientele, public decision makers, and professional colleagues. These need to be combined.
- *Planning.* A comprehensive planning unit would be established at the state level with elements at the local level, as well, to integrate the future efforts and needs of the various groups or players.
- *Standards.* Standards for the four groups would be integrated into a master plan cutting across the various service delivery sectors providing consistency for parents, professionals and administrators.

One should not underestimate the storm and fury that such a proposed integration is likely to generate in each of the four camps or in other groups that might be affected, but

considerable professional and public support can also be expected. Blending these support elements will require great ingenuity and diplomacy on the part of the various task forces and commissions charged with developing such a program. However, substantial savings in money, and in scarce personnel, could make such a combined support system attractive to decision makers already concerned about the serious budget implications of the growing early childhood field.

### **Division of Responsibility**

How should the responsibilities be allocated between various layers of government? Table 4 gives one possible answer. We discuss each level of government beginning with the role of the federal government. Rarely is the federal government the primary source of support for service delivery in education. In the K-12 system federal funding has never provided the major financial support. This role has been left to state and local governments following the Constitution of the US. Courts have consistently held that states bear the responsibility for providing equitable support for education. The federal role has been primarily focused on bringing some financial equity across states and within states across school districts of varying financial capacity and need. The federal government has long been responsible for research support and leadership training. Demonstration of national programs of excellence in early childhood could also be part of that federal responsibility.

<b>Division of Responsibility</b>	
Federal	Research Leadership Training Demonstration Financial Equity
State	Teacher Training Data Systems Evaluation Program Standards and Approval Primary Financing of Programs
Local	Operational Programming In-Service Training Shared Financing of Programs with State Grant
Professionals	Curriculum Design Research and Training

Table 4. Division of Responsibility

States would have the primary responsibility for ensuring core financing for early childhood programs in much the same way they do K-12 education. This will require a major shift in policy. States would continue to receive substantial federal resources to help finance the system and these funds would serve to provide a mechanism to achieve equity across states. Support of teacher training has long been a state responsibility, with federal support to provide assistance with specific issues. At least in the early period of expansion of early childhood services, the federal government would provide substantial support to raise the level of training of teachers much as it did with assisting states to provide qualified professional personnel serving children with disabilities.

States also would continue to play the major role in assuring program compliance with programmatic and curriculum requirements. States could build on their current child care regulations and state preschool requirements, as well as existing federal and professional

standards, to establish requirements that would cut across the range of service providers. These standards would fit with current state efforts in program accountability.

Two states, Georgia and Massachusetts, have recently embarked on major state government change to accommodate the increasing role of state government in early childhood services. Both are moving toward a new entity at the highest levels of state government to fulfill this responsibility. In Georgia, the regulatory role of the state in child care is being moved to join with the former Office of School Readiness to form a new department under the leadership of a commissioner. In Massachusetts, recent legislation creates a new department in state government charged with overseeing all early childhood services.

As with virtually all service delivery in the US, the primary responsibility for actually maintaining and delivering human services is at the local level. Some formal mechanism would be created to oversee services across the variety of providers at the local level. North Carolina's local early childhood partnerships which are non-profit entities charged with improving services for children under age five in the local area are an innovative approach to coordinating and overseeing services at the local level. The extensive network of child care resource and referral agencies across the country may also play a key role in building a system at the local level.

Finally, the professions will continue to play a key role as the system is developed. They will play central roles in curriculum design especially as it relates to serving a diverse population of children and families. They will continue to impact research and training agendas in our country. The role of the professions is discussed in more detail below.

## Recommendations

We believe that a series of actions can move us closer to the ideal seamless early childhood system. To accomplish this goal, we would utilize all of the engines of change noted in this article.

### Legislation

- Legislation at the state level could be enacted to establish organizational structures that would be committed to a coordinated early childhood program, such as creating a Department of Early Childhood in state government. All four interest groups, plus parents and higher education, would have membership in the Department of Early Childhood at the state level, and the budgets of all groups would flow through this department. Long-range planning for early childhood programs would be centered here. Legislation may also be necessary to establish and fund support system features such as common statewide data systems, technical assistance centers, and evaluation protocols.
- Legislation could establish mechanisms for major stakeholder groups including parents, professional organizations, other key agencies including Health, Human Services, the K-12 and Higher Education systems, as well as the existing early childhood service providers to have a voice in governance of the new system. One goal of such a mechanism would be to provide some stability over time as state leadership changes.
- Leadership within the federal and state legislatures should combine existing legislative committees into one Early Childhood Committee that would oversee early childhood programs. In this way, rivalries between legislative committees, each competing over pieces of the early childhood program, might be avoided.

### **Court Cases**

- Court cases such as those related to "fairness of resource allocation" represented in the New Jersey and North Carolina litigation might be brought to the Supreme Court so that a federal decision on equality of opportunity for all children could be made. The inequity in expenditures within states has been manifest for some time, but it will take something like a court mandate to shift this allocation of scarce resources.

### **Administrative Rule Making**

- A common set of program standards should be developed, which would apply to all early childhood service providers regardless of the sponsoring agency. Such rules could be made to cut across the current diverse set of service providers, bringing more consistency to the system. These rules would address at a minimum the following:
  1. Qualifications of teachers
  2. Curriculum and program design
  3. Class size and adult: child ratios
  4. Environmental conditions
  5. Health and Nutrition, and
  6. Special issues related to children with special needs.
- The responsibility for monitoring compliance with such rules would be a function of the overarching Department of Early Childhood structure (discussed above). Adequate means of implementing and enforcing these standards would need to be put in place.

### **Professional Initiatives**

- Professionals and their organizations are needed to build effective multidisciplinary personnel preparation programs and to convince reluctant higher-education



organizations that it is important to cut across discipline lines in early childhood.

Consider the number of departments in the university that have a stake in early childhood: pediatrics, sociology, psychology, early childhood education, special education, communications and speech, and human development, just to mention the most obvious examples. These departmental interests in early childhood are rarely shared with one another, and some incentives for blending their personnel preparation programs into a multidisciplinary program would seem to be necessary to build a seamless system.

- Of particular importance in the early childhood field is the current split between most four-year institutions and the community colleges and technical colleges. The lack of consistent agreements among institutions about transfer of credits (commonly known as articulation agreements) presents a substantial barrier to raising the training requirements for early childhood professionals. Federal agencies could help this process by providing funds to subsidize multidisciplinary personnel preparation programs and development of comprehensive personnel preparation plans for states.
- The support of a multidisciplinary research center, and the availability of research funds for studies on early childhood, which would bring together the various disciplines, can be an important higher education institutional step toward coordination and cooperation.
- Professionals should be involved in developing more research based curricula for young children so that service providers might have a menu of choices for a valid program.
- The development of rules and new measurements for program accountability could be initiated and supported by professional groups and teams.

### **A National Commission**

One final recommendation would be the establishment of a National Commission on Early Childhood whose task it would be to make recommendations designed to bring together disparate parts of the early childhood service and support systems. One or more of the major foundations, which have played a similar role in the past, could be convinced that now is the time for such a venture.

Surely what is needed is leadership of a neutral interested party with representation of the various interest groups. Highly respected professional scholars; public policy makers; service providers at federal, state, and local levels; and strong representation from families would make up the National Commission whose first job might be to generate subgroups on personnel preparation, technical assistance, data systems, and finances to bring a sense of reality to the discussions.

Imposing questions need to be addressed by such a commission. How would this seamless early childhood system be governed? Would the collaboration be mainly at the local level? Would it also include efforts at state and federal levels? How can higher education be brought onboard? Who would pay for the services? Who would deliver the services? What standards would be set for individual service providers? How do we make the transition from the current disjointed enterprise to a service system?

The time required to effect the changes that will be necessary for the development of a seamless system can be measured in years, if not decades. However, we now have a solid rationale for these programs (i.e., the data on early brain development, the school histories of children from at-risk environments) and the beginning of interest at the state and federal levels to examine the options for developing a comprehensive system of services. Let us end with how we

began. The status quo is not acceptable. Each of these specific programs we have described was established to address real and pressing needs of specific groups – children with special needs, children with the disadvantages of poverty and discrimination, families in need of support to enable them to participate in the workforce. However, if we wish true public support for early childhood programs we must mute ‘turf protection,’ give up the maintenance of autonomy over a select population, and build a coherent system that serves all young children.

## References

- American Public Health Association & American Academy of Pediatrics. (2002). *Caring for our children: National health and safety performance standards: Guidelines for out-of-home child care programs, 2<sup>nd</sup> Edition*. Washington, DC: American Public Health Association.
- Barnett, W. S., & Masse, L. N. (2003). Defining program quality. In Debby Cryer & Richard M. Clifford (Eds.), *Early childhood education and care in the USA* (pp. 137-166). Baltimore, MD: Paul H. Brookes.
- Behrman, R. E. (Ed.). (1995). Long-term outcomes of early childhood programs [Special issue]. *Future of Children, 5*(3).
- Bowman, B. T. (2003). Family engagement and support. In Debby Cryer & Richard M. Clifford (Eds.), *Early childhood education and care in the USA* (pp. 119-136). Baltimore MD: Paul H. Brookes.
- Bredenkamp, S., & Copple, C. (Eds.). (1997). *Developmentally appropriate practice in early childhood programs* (Rev. ed.). Washington, DC: National Association for the Education of Young Children.
- Bryant, D. M., & Maxwell, K. L. (1999). The environment and mental retardation. *International Review of Psychology, 11*(1), 56-67.
- Bryant, D. M., Clifford, R. M., Saluja, G., Pianta, R. C., Early, D. M., Barbarin, O., Howes, C., & Burchinal, M.. (in press). *Diversity and directions in state pre-kindergarten programs*. Chapel Hill, NC: National Center for Early Development and Learning, FPG Child Development Institute, University of North Carolina at Chapel Hill.
- Clifford, R. M. (1995). Párhuzamosságok: Napközbeni kisgyermekellátás az Amerikai Egyesült Államokban (Parallel play: Early childhood services in the U.S.). In K. Mihály (Ed.), *Napjaink szociálpolitikai és társadalmi igényei a kisgyermek napközbeni ellátásában* (pp. 62-75). Bölcsődék Országos Módszertani. Budapest: Intezete.
- Clifford, R. M., Early, D. M., & Hills, T. W. (1999). Almost a million children in school before kindergarten: Who is responsible for early childhood services? *Young Children, 54*(5), 48-51.
- Clifford, R. M., & Gallagher, J. J. (2001). *Designing a high quality pre-kindergarten program*. Chapel Hill: North Carolina Education Research Council.
- Cost, Quality, and Outcomes Study Team. (1995). *Cost, quality, and child outcomes in child care centers: Public report* (2nd ed.). Denver: University of Colorado, Department of Economics.

Cryer, D. (2003). Defining program quality. In Debby Cryer & Richard M. Clifford (Eds.), *Early childhood education and care in the USA* (pp. 31-46). Baltimore, MD: Paul H. Brookes.

Danaher, J., Kraus, R., Armijo, C., & Hipps, C. (Eds.). (2003). *Section 619 profile* (12th ed.). Chapel Hill: University of North Carolina, FPG Child Development Institute, National Early Childhood Technical Assistance Center.

Fullan, M. G. (1993) *Change Forces: Probing the Depth of Educational Reform*, London: Falmer Press.

Gallagher, J. J. (2002). *Society's role in educating gifted students: The role of public policy*. Storrs, CT: National Research Center on the Gifted and Talented.

Gallagher, J. (2000) The beginnings of federal help for young children with disabilities. *Topics in Early Childhood Special Education*. 20(1), 3-6.

Gallagher, J., & Clifford, R. (2000). The missing support infrastructure in early childhood. *Early Childhood Research and Practice* [Online], 2(1). Available: <http://ecrp.uiuc.edu/v2n1/gallagher.html> [2004, March 4].

Gallagher, J., Clifford, R., & Maxwell, K. (2004). Getting from here to there: To an ideal early preschool system. *Early Childhood Research and Practice*, 6(1), 1-28.

Gallagher, J. J., Rooney, R., & Campbell, S. (1999). Child care licensing regulations and child care quality in four states. *Early Childhood Research Quarterly*, 14(3), 313-333.

Gallagher, J. J., Trohanis, P. L., & Clifford, R. M. (Eds.). (1989). *Policy implementation and P.L. 99-457: Planning for young children with special needs*. Baltimore, MD: Paul H. Brookes.

Guralnick, M. J. (Ed.). (1997). *The effectiveness of early intervention*. Baltimore, MD: Paul H. Brookes.

Harms, T., Clifford, R. M., & Cryer, D. (1998). *Early childhood environment rating scale* (Rev. ed.). New York: Teachers College Press.

Helburn, S. W., & Bergmann, B. R. (2002). *America's child care problem: The way out*. New York: Palgrave.

Henry, G. T., Gordon, C. S., Henderson, L. W., Ponder, B. D., (2003). *Georgia Pre-K Longitudinal Study: Final Report, 1996-2001*. Atlanta, GA: Andrew Young School of Policy Studies, Georgia State University.

Kagan, S. L., & Cohen, N. E. (1997). *Not by chance: Creating an early care and education system for America's children*. New Haven, CT: Bush Center in Child Development and Social Policy.

Kamerman, S. B. (1989). An international overview of preschool programs. *Phi Delta Kappan*, 17, 135-137.

Kamerman, S. B., & Gatenio, S. (2003). Overview of the current policy context. In Debby Cryer & Richard M. Clifford (Eds.), *Early childhood education and care in the USA* (pp. 1-30). Baltimore, MD: Paul H. Brookes.

Ladd, H. F., Chalk, R., & Hansen, J. S. (Eds.). (1999). *Equity and adequacy in education finance: Issues and perspectives*. Washington, DC: National Research Council, National Academy Press.

McMillen, M. M., & Kaufman, P. (1996). *Dropout rates in the United States: 1994* (NCES-96-863). Washington, DC: National Center for Education Statistics.

Mellin, A. E., & Winton, P. J. (2003). Interdisciplinary collaboration among early intervention faculty members. *Journal of Early Intervention*, 25(3), 173-188.

Mitchell, A., Stoney, L., & Dichter, H. (2001). *Financing child care in the United States: An expanded catalog of current strategies*. North Kansas City, MO: Ewing Marion Kauffman Foundation.

National Education Goals Panel. (1997). *Getting a good start in school*. Washington, DC: Author.

Neuman, S. B. (2003). From rhetoric to reality: The case for high-quality compensatory prekindergarten programs. *Phi Delta Kappan*, 85(4), 286-291.

Ramey, C. T., & Ramey, S. L. (1998). Early intervention and early experience. *American Psychologist*, 53(2), 109-120.

Ranck, E. R.. (2003). Access to programs. In Debby Cryer & Richard M. Clifford (Eds.), *Early childhood education and care in the USA* (pp. 47-64). Baltimore, MD: Paul H. Brookes.

Schweinhart, L. J.; Barnes, H. V.; & Weikart, D. P. (1993). *Significant benefits: The High/Scope Perry Preschool study through age 27* (Monographs of the High/Scope Educational Research Foundation No. 10). Ypsilanti, MI: High/Scope Educational Research Foundation.

Scott-Little, C.; Kagan, S. L.; & Frelow, V. S. (2003). *Standards for preschool children's learning and development: Who has standards, how were they developed, and how are they used?* Greensboro, NC: SERVE: SouthEastern Regional Vision for Education.

Shonkoff, J. P., & Phillips, D. A. (Eds.). (2000). *From neurons to neighborhoods: The science of early childhood development*. Washington, DC: National Academy Press.

Wolery, M., & Bailey, D. B., Jr. (2002) Early childhood special education research. *Journal of Early Intervention*, 25(2), 88-99.

Zigler, E. F; Kagan, S. L.; & Hall, N. W. (Eds.). (1996). *Children, families, and government: Preparing for the twenty-first century*. New York: Cambridge University Press.

Zill, N., & West, J.. (2001). *Entering kindergarten: A portrait of American children when they begin school* (NCES-2001-035). Washington, DC: National Center for Education Statistics.