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HOW CITIES EMBRACE THEIR INFANTS AND TODDLERS

AN EARLY CHILDHOOD
ACTION COLLECTIVE REPORT

The brain undergoes its most rapid growth during the first few years of life. As cities like Philadelphia expand their pre-Kindergarten (pre-K) services, it is important to consider the supports, care, and education that very young children may receive prior to entering pre-K if we are to achieve the best results. With this in mind, we analyzed initiatives supported by and/or implemented in 11 cities that feature infant and toddler care. Our full report describes the case studies, common elements across initiatives, and challenges, that cities have addressed. While we hope that Philadelphians find our recommendations especially useful as they roll out large-scale, free, high-quality pre-K services, the lessons learned from the analysis

apply to anyone committed to ensuring that all children succeed.

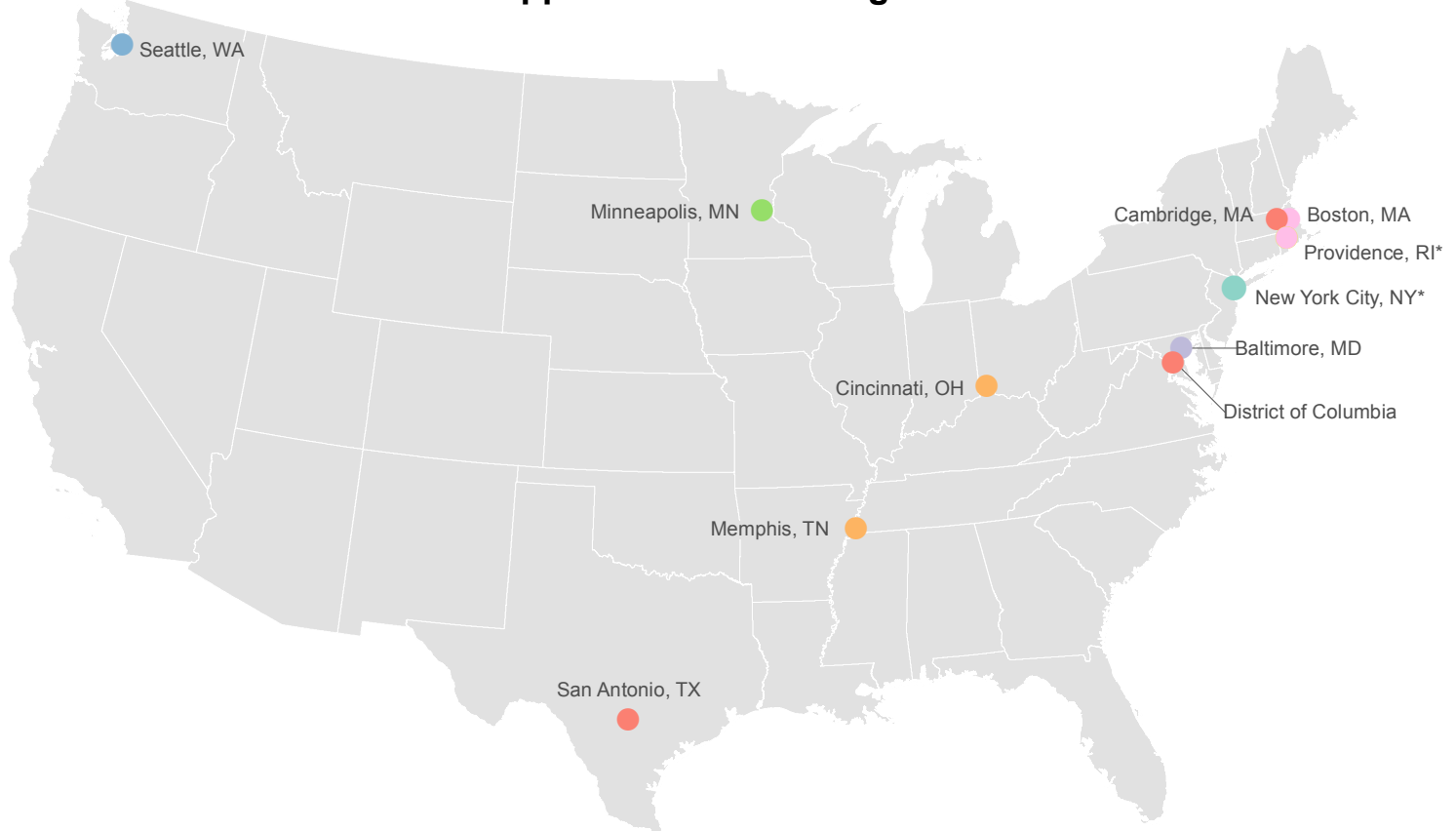
We found that robust early care and education systems are comprehensive and include features such as **technical assistance**, **developmental screening**, and **two-generation programming**. Indeed, local government is not the only impetus for systems change: families, advocates, community-based nonprofits, and philanthropic organizations can all contribute to initiating and implementing system reforms. Advocates can support pre-K and ensure our infants and toddlers are a priority. See Figure 1 below for the salient features in the cities we selected for review.

FIGURE 1

FEATURE	CITY INITIATIVE
CITY-WIDE MESSAGING	Minneapolis Talking is Teaching initiative
DEVELOPMENTAL SCREENING	Boston Screen to Succeed/Thrive to Five
ACCESS TO HIGH-QUALITY EARLY LEARNING EXPERIENCES	Cambridge Baby University New York City Infant and Toddler Resource Center District of Columbia Quality Improvement Network Providence Ready to Learn Providence San Antonio The Very Early Education Centers
CO-LOCATING HEALTH AND SOCIAL SERVICES	Baltimore B'more for Healthy Babies
COMPREHENSIVE APPROACHES	Seattle Best Starts for Kids
FORMAL COLLABORATION TO ADVANCE CITYWIDE EFFORTS	Cincinnati Every Child Succeeds initiative Memphis Early Success Coalition
SUSTAINED COMMITMENT FROM PHILANTHROPIC AND CITY GOVERNMENT LEADERSHIP	District of Columbia Birth to Three Policy Alliance New York City 's Child Care and Early Education Fund

FIGURE 2

Select U.S. Cities' Approaches to Serving Infants and Toddlers



* The programs in Providence, RI, and New York City, NY, each entail two model strategies: 1) access to high quality early learning experiences; and 2) developmental screening and sustained commitment from philanthropic and city leaders, respectively. For visual clarity, the red dot representing access to high quality early learning experiences is not displayed on the map. ●

Model Strategies

- Citywide messaging campaigns
- Developmental screening
- Access to high-quality early learning experiences
- Co-locating health and social services
- Comprehensive approaches
- Formal collaboration to advance citywide efforts
- Sustained commitment from philanthropic and city leaders

BALTIMORE

B'more for Healthy Babies (BHB) is an initiative to reduce infant mortality in Baltimore City through programs emphasizing policy change, service improvements, community mobilization, and behavior change.

BOSTON

Screen to Succeed/Thrive to Five Parent Partners engages parents and caregivers from city neighborhoods to conduct peer-to-peer outreach with ethnically and linguistically diverse communities, and includes a focus on parent knowledge of, buy-in, and participation in, developmental screening for their children.

CAMBRIDGE

Baby University is a program designed for parents with children prenatal to age 3 whose mission is to increase parents' knowledge on a variety of child-rearing topics; strengthen parent-child relationships; break parental isolation; and connect parents to beneficial community resources.

CINCINNATI

Every Child Succeeds offers Greater Cincinnati and Northern Kentucky families a collaborative evidence-based home visitation program to help parents create a nurturing, healthy environment for their children, and is connected to a broader collaboration.

MINNEAPOLIS

Talking is Teaching is an infant-toddler-specific parent awareness campaign launched as part of the mayor's *Cradle to K Cabinet Plan to Address Early Childhood Disparities*, which was developed to improve outcomes for infants and toddlers.

SEATTLE

Seattle's Best Starts for Kids provides a comprehensive approach to improve health and well-being by investing in prevention and early intervention for children, youth, families, and communities. Using a new local tax levy, 50% of funds are dedicated to prenatal to 5, with a comprehensive approach.

DISTRICT OF COLUMBIA

The Quality Improvement Network/Early Head Start Child Care Partnerships use a "hub" based approach to expand access and improve quality for their infant-toddlers through an approach that integrates financing for early learning and comprehensive services and quality improvement.

The Birth to Three Policy Alliance provides resources to a wide range of organizations seeking to partner with the District of Columbia government to improve policy, services, and coordination to improve outcomes for infants and toddlers.

MEMPHIS

Early Success Coalition is a broad-based coalition of service providers and community leaders that works to develop and expand an early childhood comprehensive system of high-quality services for children from pre-conception to age eight that engages families, promotes resiliency, and supports positive early childhood development. There is a critical focus on babies and toddlers through its home visiting and Early Head Start work, as well as its child care work.

NEW YORK

The New York City Infant Toddler Resource Center provides technical assistance, individualized intensive technical assistance, and training opportunities for regulated or licensed child care sites. The New York City Child Care and Early Education Fund (NYC-CC&E) is a private funders' collaborative dedicated to the improvement of early childhood education in New York City with a history of working in partnership with City and state government on infant-toddler reform and other early childhood issues.

PROVIDENCE

Ready to Learn Providence, which is part of a broader Providence Plan provides professional development for center-based and family child care providers and includes a focus on infants and toddlers and their participation in formal early learning settings.

SAN ANTONIO

The Very Early Education Centers provide education to preschoolers and a variety of strategies to support caregivers and families of infants and toddlers, including training for caregivers, parenting support for families, and play groups.

COMMON STRENGTHS

Developers involved in many of the programs we reviewed built strong, cross-sector collaborations with ongoing community input. The partnerships leveraged a wide range of resources, maximized their reach, and ensured that efforts targeted those most in need. Further, many of the programs incorporated well-defined goals and metrics for reporting. Developers also succeeded in:

- showing a clear conceptualization of the program's intended impact from the outset;
- supporting their efforts by continually collecting and analyzing information;
- helping to ensure that the program could make continuous improvements to its structure and processes; and
- defining the outcomes well and ensuring they could be shared and replicated by others.

SHARED CHALLENGES

The first of many challenges that cities have experienced in rolling out infant and toddler programs underscores the need to make structural changes to ensure that early childhood offerings correspond to geographic need where low-income, racial/ethnic minority families live. Second, increasing the number of affordable, high-quality seats in any early childhood education program can take many years and require additional funding to support subsidized care. Third, not all families choose formal child-care settings for various reasons, including fluctuating schedules that conflict with traditional child-care hours, lack of programs that are suited to the cultural and/or linguistic values of the family, or a preference for more informal settings. To support infants and toddlers who do not participate in formal care, we can still promote services such as free or low-cost physical, dental, social-emotional, and mental health services, as well as two-generation programming that includes career services and housing supports.

CONSIDERATIONS FOR PHILADELPHIA

No single program meets the needs of all families in a community. Our review highlights a range of infant and toddler strategies that other cities found compelling, worthwhile, and feasible. Successful early childhood systems used many strategies to serve families and create access to the services that addressed their needs and circumstances.

As Philadelphia implements its far-reaching pre-K initiative (PHLpreK), it is essential that other local actors continue to address the needs of infants and toddlers.

Together, these approaches will span the early care and education continuum and build on one another to increase the number of children ready for kindergarten.

One next step is a focused infant and toddler needs assessment that informs an infant toddler action plan for Philadelphia. To be sure, every city initiative that we reviewed showed elements of cross-sector learning, and developers included a diverse and broad range of parties in planning efforts. We can all learn from their efforts and create a sustained, robust system of our own. Are you ready to roll up your sleeves?

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ABOUT THE AUTHORS

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The Early Childhood Action Collective (ECAC) is an initiative of Public Health Management Corporation, sponsored by the William Penn Foundation. ECAC is a multi-disciplinary consortium comprising researchers, policy experts, and practitioners who share a commitment to creating a better future for Philadelphia's children by informing policy and practice decisions to help move Philadelphia's early childhood education sector forward.

The opinions expressed in this report are those of the authors and do not necessarily reflect the views of the William Penn Foundation.