DOCUMENT RESUME

ED 448 914 PS 029 142

AUTHOR	Little, Loyd, Ed.
TITLE	Early Developments, 2000.
INSTITUTION	North Carolina Univ., Chapel Hill. Frank Porter Graham Center.
SPONS AGENCY	National Inst. on Early Childhood Development and Education (ED/OERI), Washington, DC.
PUB DATE	2000-00-00
NOTE	62p.; Published three times a year. For 1999 issues, see ED 443 564.
CONTRACT	R307A60004
AVAILABLE FROM	Early Developments, Frank Porter Graham Child Development Center, CB No. 8185, University of North Carolina at Chapel Hill, Chapel Hill, NC 27599-8185; Tel: 919-966-0888; Fax: 919-966-0862; e-mail: hargrove@mail.fpg.unc.edu; Web Site: http://www.fpg.unc.edu.
PUB TYPE	Collected Works - Serials (022)
JOURNAL CIT	Early Developments; v4 n1-3 Spr-Win 2000
EDRS PRICE	MF01/PC03 Plus Postage.
DESCRIPTORS	*Child Development; Children; Day Care Centers; Depression (Psychology); Early Childhood Education; Early Experience; *Early Intervention; Family Involvement; Family Programs; Infants; Information Dissemination; Mothers; *Outreach Programs; Parent Child Relationship; Parents; Preschool Teachers; Program Descriptions; Public Policy; *Research Projects; State Regulation; Teacher Student Relationship; *Theory Practice Relationship
IDENTIFIERS	Carolina Abecedarian Project NC; *Day Care Quality; North Carolina; Smart Start NC; State Policy

ABSTRACT

This document consists of the three 2000 issues of a journal reporting new research in early child development conducted by the Frank Porter Graham Child Development Center at the University of North Carolina at Chapel Hill. Articles in the spring 2000 issue focus on a follow-up study of the Abecedarian Project, children of depressed mothers, child-teacher relationships, and early childhood education program quality. The summer 2000 issue focuses on how North Carolina is making major changes in rating child care centers, the impact of comprehensive community initiatives on child care quality, the relationship between state regulations and child care in four states, and barriers preschool teachers encounter in their work. The winter 2000 issue delineates the core values of the Frank Porter Graham Child Development Center and highlights projects showing the relationships between research and the outreach vision, a holistic approach to outreach, bridging the gap between theory and practice, parent leadership, and making research work more accessible. Each issue also lists recent publications by researchers at the Frank Porter Graham Child Development Center. (KB)

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ED 448 914

Early Developments, 2000

Loyd Little, Editor

Volume 4, Numbers 1-3
Spring-Winter 2000

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early developments

Frank Porter Graham Child Development Center University of North Carolina at Chapel Hill Spring Volume 4, No. 1

ES 029142

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Long-Term Consequences of Child Care

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Vol.4, No. 1

Early Developments is published three times a year by the Frank Porter Graham Child Development Center at the University of North Carolina at Chapel Hill.
Website:http://www.unc.edu

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With this issue, we welcome Turner McCollum as our new graphic designer for **Early Developments.** *Turner has taken over the responsibility from Miki Kersgard who has joined another department at UNC-Chapel Hill. We hope that you will enjoy the new look to the magazine.*

We want to salute Miki for her work in doing the layout and design for the magazine previously and wish her well in her new position.

The cover for this issue is from a child enrolled in the Frank Porter Graham Child Care Center.

Typefaces used in the publication are: Arial Black, Arial Narrow, Gil Sans, Garamond (body text) and Nueva.

Early Developments is funded in part by the University of North Carolina at Chapel Hill and in part by PR/Award Number R307A60004, administered by the Office of Educational Research and Improvement, National Institute on Early Childhood Development and Education, U.S. Department of Education. Contents of articles do not necessarily represent the positions of the U.S. Department of Education. Endorsement by the federal government should not be assumed.

8500 copies printed at a cost of $0.77 copy.

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Don Bailey

Long-Term Consequences of Child Care

"Benefits of Quality Care Persist into Adulthood"

"Mom's Depression Can Affect Children's Learning"

"More Children Attending PreK in Public Schools"

"Child-Teacher Relationship Predicts Social Relations"

from the Director's Office

Headlines such as the above this year reflect the exciting research that is giving us more insight into child care and child development. For example, new studies by the Frank Porter Graham Center and the National Center for Early Development & Learning, both based at the University of North Carolina at Chapel Hill, reinforce the growing public awareness that programs for helping children should start much earlier than they typically do.

In this issue, we look at the dramatic results of the Abecedarian Project Follow-Up, which shows that the positive effects of educational child care on poor children, which was given almost from birth to kindergarten, persist until at least age 21. This article starts on page two.

Our research continues to show that child care programs must be of high quality. Such programs need to stimulate children, provide for more teacher training and compensation, offer comprehensive learning curricula, and encourage staff to work more closely with families.

We are learning more about the importance of relationships for very young children. An article on page ten reports that at age three, children whose mothers are chronically depressed fare significantly worse on tests and other measures of school readiness, verbal comprehension and language skills than children of mothers who are never depressed. Another article, which begins on page 12, looks at the importance of child teacher relationships.

But there is still much to be done. What is the best way to implement the things we are learning? What should governing agencies do in the way of standards? How should we finance early childhood programs? In an article on pages 14-16, we take a look at some of the more innovative early childhood programs around the country.

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Abecedarian Project

Age 21 Follow-Up

Gains from high quality child care persist into adulthood — landmark study

Poor children who received early educational intervention had higher scores on mental, reading, and math tests than children who didn't receive the intervention and, more importantly, these effects persisted until at least age 21, according to researchers at the Frank Porter Graham Child Development Center at the University of North Carolina at Chapel Hill.

Don Bull

"Our study provides scientific evidence that early childhood education significantly improves the scholastic success and educational achievements of poor children even into early adulthood. The importance of high quality, educational child care from early infancy is now clear," said **Frances Campbell**, principal investigator of the Abecedarian Project Age 21 Follow-Up.

It is one of the longest running and most carefully controlled studies of it's type in America, having begun more than two decades ago, researchers said. It is believed to be the first study that definitively links high quality infant/preschool child care with positive outcomes in the children as adults.

Data also showed that more than twice as many children who received the intervention attended college than those who did not.

Furthermore, young adults in the intervention group were two years older, on average, when their own first child was born than those who didn't receive intervention.

"These data are significant," said **Craig Ramey** of the University of Alabama, director of the early intervention study, "not only for parents, but for policymakers seeking to make a difference in children from low-income families and for directors and administrators of child care programs."

"The degree of scientific control in this study gives us greater confidence that differences between the treated and untreated individuals can be attributed to the intervention itself, rather than to differences among treated and untreated families," said Campbell.

The Abecedarian project differed from most other childhood intervention projects in that

1) it began in early infancy whereas other programs began at age two or older, and
2) treated children had five years of exposure to early education in a high quality child care setting whereas most other programs were of shorter duration.

The project began with 111 infants from low-income families. Of those, 57 were randomly assigned to a high-quality child care setting and 54 to a non-treated group. The latest assessment of the children, who are now 21 years old and older, covered 104 of the original group.

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Joseph Sparling, who helped design the early childhood curriculum, said that each child had an individualized program of educational activities consisting of game-like interactions that were incorporated into the child's day. "These activities were designed to enhance social, emotional, and cognitive development, but gave particular emphasis to language," he said.

Over the years, Ramey said, children in the intervention group scored significantly higher on cognitive tests than children in the control group. Through middle adolescence, the differences between the groups remained large for reading and large-to-moderate for math.

Campbell said, "Welfare reform has increased the likelihood that children in poverty will need early child care. The educational stimulus value of these early caregiving years must not be wasted. More and more of America's children will need out of home care. This is especially true for poor children. We must not lose this opportunity to provide them the early learning experiences that will increase their chances for later success."

Researchers have placed the executive summary of the study and other information on the web site <www.fpg.unc.edu/~abc>.

It is believed to be the first study that definitively links high quality infant/preschool child care with positive outcomes in the children as adults.

Highlights of the study

- Young adults who received early educational intervention had significantly higher mental test scores from toddlerhood through age 21 than those who were untreated.
- Enhanced language skills in the children probably increased the effects of early intervention on cognitive skills performance.
- Reading achievement scores were consistently higher for individuals with early intervention. The differences between the groups remained large from primary school through age 21. Enhanced cognitive skills appeared to positively affect reading achievement.
- Mathematics achievement showed a pattern similar to reading, with treated individuals earning higher scores. The differences were medium in contrast to the large effects for reading. Again, enhanced cognitive functioning appeared to positively affect results.
- Those with treatment were significantly more likely still to be in school at age 21–40% of the intervention group as compared with 20% of the control group.
- A significant difference was also found for the percentage of young adults who ever attended a four-year college. About 35% of the young adults in the intervention group had either graduated from or were at the time of the assessment attending a four-year college or university. In contrast, only about 14% in the control group had done so.
- Young adults in the intervention group were, on average, two years older (19 years) when their first child was born compared with those in the control group (17 years), although the youngest individuals in both groups were comparable in age when the first child was born.
- Employment rates were higher (65%) for the treatment group than for the control group (50%), although the trend was not statistically significant.

For more information, search for Carolina Abecedarian Project at <www.fpg.unc.edu>.

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Moussorgsky

Hal Robinson, 1966 Guitar courtesy of Carroll Barros • Billy Davis

Remembering how we began . . .

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It was 1966. The Green Bay Packers were basking in the limelight of winning the first Super Bowl. The cassette was introduced as the newest technology for music. The Mamas and the Papas had exploded onto the music scene with two hits: "California Dreamin" and "Monday Monday."

And a two-year-old girl named Beth Robinson was the first enrollee at a new child care research center in three trailers on Cameron Street in Chapel Hill, NC. To mark the occasion, her father played a record of Beethoven's Ninth Symphony, fourth movement.

Beth's father was Hal Robinson, co-founder with **Ann DeHuff Peters** of the behavioral sciences arm of the Child Development Institute at the University of North Carolina at Chapel Hill. The other arm of the institute was the Biological Sciences Research Center, headed by Morris Lipton.

Those were the post-Kennedy days. Research money was beginning to flow toward disadvantaged children, mental retardation, and poverty. The civil rights movement was growing. Grants from the National Institutes of Health had gone out to a number of institutions that year concerning mental retardation, but the only one that focused on prevention was the one that came to UNC-Chapel Hill. Or more specifically to a child development unit now known as the Frank Porter Graham Family and Child Care Program.

"Hal was determined that our daughter would be the first enrolled," said **Nancy Robinson**, who directed research at the center. The Robinsons wanted to examine this basic question: Could child care help prevent intellectual deficits in what are now called at-risk families? Peripheral questions had to do with whether group care for infants was or was not a good idea, and what it took to do it well; and how mixed-race and mixed-socioeconomic groups could be created in a positive way.

The playing of Beethoven on Beth's first day was not only for dad. One way to help children at risk, so Hal theorized, was to stimulate them visually and aurally.

"I remember going to violin class. I learned how to play 'Humpty Dumpty' and the teacher, a woman I think, laughed a lot. I liked it," said Beth, now a geophysicist working in US Office of Management and Budget. "I remember being outside with my dad and mom in the morning, and I tried both of their coffees. I liked dad's a lot better (he took milk and sugar) than mom's (black.)"

"It was exciting. There was a sense of starting a project, a sense of doing something unique. We all had a sense of mission," said **Joe Sparling** who in the spring of 1967 joined the team that now included **Isabel Lewis** and **Frank Loda**, a pediatrician.

They were also part of an even grander, revolutionary idea that had been kicked around for a year or two: an entire complex for at-risk children from birth to age 12. It would be the first such complex in the nation and seed money had already been planted by the federal government, UNC-Chapel Hill, the Carnegie Foundation, the state and the Chapel Hill-Carrboro School system.

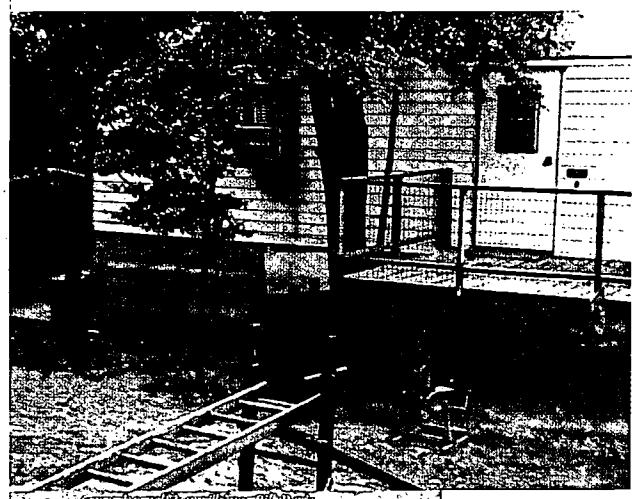
Part of the new complex would be an elementary school, and Sparling was recruited to help design and to be administrator of the school. In the meantime, he was named associate director of FPG.

The idea behind the complex, according to a newspaper article at the time, was "the prevention of intellectual deficit due to cultural deprivation and the enhancement of personal and social development." The medical facility would "be concerned with discovering the causes, prevention, treatment and cure of mental retardation and emotional disturbance."

From day one it was an intervention program for children at risk, but it was also a program that from the beginning set up a "real world" community mix of children and families from many walks of life.

"Moussorgsky" and the "sight of goldfish dangling in a plastic bag on the crib" was how Newsweek magazine described the Robinson's project in a 1968 article. The children were also taught French.

Those early days were filled with the camaraderie of shared struggles. Sparling remembered rushing to cover his data when it rained because the roof leaked in one trailer. The children's playground was mostly sand and large rocks. Play equipment included tractor tires for swings and riding "horses" made of tree logs nailed onto 2 x 4s. Metal barrels with "diapers" written on them stood by the front door of one trailer.



Courier-Journal/Louisville Times/Billy Davis

"There was a spirit of hopefulness. We talked about breaking the cycle of poverty. Really break it. We said it as if we were going to do it. We had a sense that we were going to accomplish something," said Sparling, now retired.

But as cost figures came in and other considerations were weighed, the complex eventually fell through, as did the ideal of a "real world" community. Funding became available only for children considered directly at risk. The vision of scattered small buildings was replaced by a large administrative building that housed all the services. The Robinsons left, although the child care center itself continued and grew.

In 1970, Jim Gallagher was named director of FPG. He recruited Craig Ramey to take over the child care project, which was expanded and refined into the Abecedarian Project. Considered one of the premier longitudinal child care studies in America, it continues today with data showing that significant benefits of the "stimulating child care" persist until at least the children are adults. (See related story on page 2.)

Courier-Journal/Louisville Times/Billy Davis

From the very beginning, there was a medical component studying health of children. For example, **Al Collier** and others began studying the frequency of child illnesses in the center. Their research expanded into respiratory tract infections and complications (children's respiratory tracts were cultured every two weeks at the center), vaccines against respiratory pathogens, new ways to detect respiratory infection, and otitis media.

During the 1970s, Sparling and Isabelle Lewis devised 100 experiences for young children from birth to 36 months in the form of games. Each game was self-contained on a card with pictures and descriptions, and the games were presented in sections spanning about six months of developmental age. *Infant Learning Games* was first published in 1978 in a loose-leaf notebook format with removable game cards. Later, the book became a hardback and a paperback and 100 learning games became 150 and then 300. That led to other popular books for parents and teachers, such as *Learningames for the First Three Years* and *Learningames for Threes and Fours and Partners for Learning*.

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The Abecedarian children graduated from child care into school. Investigator **Frances Campbell** rounded up grants and the work continued. Also, beginning in the mid-1970s, FPG began providing training for UNC nursing students, offering instruction and practice in such areas as child health assessment, infant stimulation, day care, and behavior management.

Additional researchers were recruited and worked in such areas as nutrition, premature infants, otitis media, the effect of second-hand cigarette smoke on infants, child care quality, and inclusion.

By the late 1970s and 1980s, center researchers were securing a stronger national reputation and adding more research into policy implications. The Carolina Institute for Research on Early Education for the Handicapped examined the experiences and perspectives of families of children with disabilities.

Through the years, the configuration of the child care operations changed in response to new research. For example, the child care program admitted its first children with disabilities in 1984. And several years ago, age groupings became more flexible to accommodate children with varying development levels. Also, child-sized toilets designed specifically for children with disabilities were added so that children with disabilities could learn independence and gain competence.

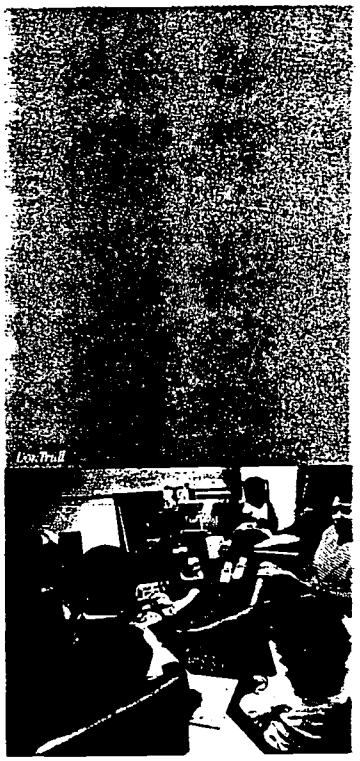
In the mid-1990s, the playground area was redesigned and equipped following the standards of the Consumer Product Safety Commission, which are based heavily on accident research.

The child care center has often been used to pilot a program. For example, **Jonathan Kotch**, a professor of maternal and child health at UNC-CH and an FPG fellow, directs a training program for early child care and education professionals, particularly in health and safety aspects. The study was piloted at the FPG child care facility and later carried out at more than 65 child care centers.

Last year, two child care classrooms were added as part of a new model demonstration project for very young children (18-36 months of age) with autism and their families. FPG will disseminate the model to other early intervention programs in North Carolina and provide training and technical assistance.

Another study underway at the center may have significant program implications for early childhood teachers and child care center administrators. The project compares what happens when a child has the same caregiver for the first three years of life with what happens to children when caregivers change in each of the first three years.

The center continues to be a practicum site for students from a variety of health and education disciplines.



But knowledge cannot be pulled from basic research directly into practice any more than crude oil can be pumped from the ground into an automobile. It needs that crucial stage of development that transforms fundamental discoveries about children into curriculum products, teaching practices and parenting techniques.

One of the original dreams of the founders of FPG died early on – a large research and medical complex and a laboratory school working with children at risk from birth to age 12.

Perhaps it was ahead of its time.

But what didn't die were the goals and beliefs and motivations of the women and the men who created the Frank Porter Graham Center. Those dreams live on: Intervention. Collaboration across disciplines and university departments. Solid research.

Helping young children and their families reach their full potential still drives our researchers and staff. Three decades later, you continue to feel the "excitement," the "spirit of hopefulness," and "a sense that we're going to accomplish something."

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Thirty-four years ago, Hal and Nancy M. Robinson helped begin the FPG Child Care Center. After leaving FPG, they joined the University of Washington. Before his death in 1981, Hal founded the UW Center for the Study of Capable Youth, now named for him. Nancy remained in the field of mental retardation but took up the reins of the center at Hal's death. Among the notable programs of the center, which serves gifted children, are a Transition School and Early Entrance Program for young teenagers, a clinic, summer program, and extensive research.

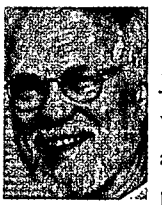
Earlier this year, Nancy Robinson visited FPG and at one point, she, former FPG Director Jim Gallagher and former Associate Director Joe Sparling, sat around reminiscing.

Here are selected excerpts:

Jim Gallagher: "I remember visiting you and Hal in 1965 or '66, I think it was. I was still at the University of Illinois; and you had put in a grant request to NICHD for your project here. I was part of a site team to visit and look around."

Nancy Robinson: "The idea was prevention aimed at poverty. The war on poverty and the war on mental retardation were going on side by side but nobody was saying they were the same one. At the beginning, this center was both middle-class and lower-income and cross-racial....and that was also a big issue at that point. There was a huge question at the time about whether infants could be accommodated in group care. And so the center started with infants and 2-year-olds."

Nancy: "In the child care center, children were grouped across ages, with a special effort to keep true siblings in the same group. Infants were kept together until fully ambulatory, I think, and then placed in the cross-age groups. Children were grouped by age for 'preschool classes' for ease of instruction and because there were some activities that just couldn't happen if there were toddlers interfering."



Joe Sparling: "Reception to our work? Some departments, say at the school of education and psychology were in general very cool toward what we were doing. I think they felt that our work was perhaps too messy and too vague. It wasn't what their professors 'ought' to be doing."

Jim: "There were a number of other projects around the country working on mental retardation and trying to stimulate development... so there was a community of researchers and scholars who were communicating with each other doing the same thing."

fpg

Recent Publications

Resources within reason: Materials that translate brain research into activities for daily use. Catlett, C., & Winton, P. (1999). *Young Exceptional Children, 2*(1), 28.

Resources within reason: Infant-caregiver connections. Catlett, C., Winton, P., Barrera, I., McCollum, J., & Yates, T. (1999). *Young Exceptional Children, 2*(2), 28.

Parent education: A term whose time is past. Winton, P.J., Sloop, S., & Rodriguez, P. (1999). *Topics in Early Childhood Special Education, 19*(3), 157-161.

Preventing secondary conditions and promoting health, well being, and quality of life. McMillen, J. S., Simeonsson, R. J., & McDevitt, L. (1999). In R. J. Simeonsson & L. McDevitt (Eds.), *Issues in disability and health: The role of secondary conditions and quality of life (pp 205-220).* Chapel Hill: University of North Carolina, Frank Porter Graham Child Development Center, North Carolina Office on Disability & Health.

Behavioral style of young boys with fragile X syndrome. Hatton, D.D., Bailey, D.B., Hargett-Beck, M.Q., Skinner, M., & Clark, R.D. (1999). *Developmental Medicine & Child Neurology, 41*, 625-632.

Kindergarten teachers' practices related to the transition to school: Results of a national survey. Pianta, R.C., Cox, M.J., Taylor, L., & Early, D. (1999). *The Elementary School Journal, 100*, 71-86.

The children of the cost, quality, & outcomes study go to school: Executive summary. Peisner-Feinberg, E. S., Clifford, R. M., Burchinal, M. R., Culkin, M., Howes, C., Kagan, S. L., Yazejian, N., Byler, P., & Rustici, J. (1999). Chapel Hill: University of North Carolina, Frank Porter Graham Child Development Center.

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Parents' report of vocabulary and grammatical development of African American preschoolers: Child and environmental associations. Roberts, J. E., Burchinal, M., & Durham, M. (1999). *Child Development, 70*(1), 92-106.

Otitis media and hearing loss: Is child development affected? Roberts, J. E. (1999). *Seminars in Otitis Media Management, 2*(1), 1-2.

Otitis media and later language and learning. Roberts, J. E., & Wallace, I. (1999). *Seminars in Otitis Media Management, 2*(1), 10-14.

Controversial practices: The need for a reacculturation of early intervention fields. McWilliam, R.A. (1999). *Topics in Early Childhood Special Education, 19*, 189-193.

Needs and supports reported by Latino families of young children with developmental disabilities. Bailey, D., Skinner, D., Correa, V., Arcia, E., Blanes, M., Rodriguez, P., Vázquez, E., & Skinner, M. (1999). *American Journal on Mental Retardation, 104*, 437-451.

Narrating self and disability: Latino parents' constructions of identity vis-à-vis their child with special needs. Skinner, D., Bailey, D., Correa, V., & Rodriguez, P. (1999). *Exceptional Children, 65*, 481-495.

Community development approaches for early intervention. Buysse, V., Wesley, P., & Skinner, D. (1999). *Topics in Early Childhood Special Education, 19*(4), 236-242. *ed*

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Depressi

Children of depressed mothers score lower on measures than children of mothers who are never depressed

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The on-going nationwide Study of Early Child Care by the National Institute of Child Health and Human Development (NICHD), continues to provide significant data for parents, professionals, and policymakers about the relationship between early child care and children's development.

Data released in the September 1999 issue of Developmental Psychology *shows that at age three, children whose mothers are chronically depressed fare significantly worse on tests and other measures of school readiness, verbal comprehension and language skills than children of mothers who are never depressed. Those whose mothers are sometimes depressed fall somewhere in between.*

Here are other findings from this report:

- Depressed mothers in general were less sensitive to their children, their children displayed poorer verbal and language skills and showed more problem behaviors.
- Children whose mothers were more sensitive, however, did better on measures and behaved better regardless of their mother's level of depression.
- Women with higher incomes and other advantages were more responsive and played better with their children despite their depression possibly because they were less stressed.
- Income made no difference in sensitivity and responsiveness among mothers who were not depressed.
- Women who were despondent most of the time not only were least sensitive but also were the only group to show a decline in sensitivity between the 15-month and 24-month assessments. As toddlers emerged from the period some call the "terrible twos" and became less willful, interactions with mothers grew more positive.

Other data released last year from the NICHD Child Care Study shows that higher quality child care is related to less problem behavior.

Here are highlights from that report:

- Day care in the United States is "fair," but not outstanding.
- Such factors as a family's income, mothers' psychological well-being, and maternal behavior have more of an influence on children's social competence at two and three years of age than does the children's day care arrangement.
- Quality child care was related to children displaying greater social competence and cooperation and less problem behavior at two and three years of age.
- More experiences in groups with other children predicted more cooperation with other children and fewer problem behaviors at both two and three years of age.
- The consistency of the day care setting also played a role in the development of social competence. At age two, children who had been in a number of different day care arrangements showed more problem behaviors than did children who had been in fewer day care arrangements.
- Child care experience has no discernible influence on the security of children's attachments to their mothers by age three.
- In general, the education of the mothers was more strongly related to positive qualities of maternal care than was the amount or quality of child care. However, mothers were slightly more positive and supportive with their children when less child care was used or when child care quality was higher.
- Parents have an important influence on children's development regardless of how much child care their children experience. Comparisons between children in child care and those experiencing exclusive care from their mothers tell us little until we consider the quality of care. High quality child care offers an advantage to children and low quality care a disadvantage for cognitive and language development as compared to care from the average mother.

The researchers suggest possible ways for improving the nation's child care: by improving the ratio of child care givers to children, lowering group siz increasing care givers' levels of educ tion, and increasing the safety and intellectual stimulation of child care settings.

Investigators who are working on t NICHD team includes **Martha Cox** an **Margaret Burchinal** from FPG and the National Center for Early Developme & Learning (NCEDL), also based at UNC-Chapel Hill, and **Robert Bradley** and **Robert Pianta** from NCEDL. Bradley is with the University of Arkansas at Little Rock and Pianta is with the University of Virginia at Charlottesville.

Besides UNC-Chapel Hill, other da collection centers are located at the universities of Arkansas at Little Rock California at Irvine, Kansas, New Hampshire, Pittsburgh, Virginia, Washington at Seattle, Wisconsin, and Temple University. The overall NICHD study began in 1991.

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Child-teacher relationship in child care predicts later social relations

Relationships *child&teacher*

Following are excerpts from "Social-emotional classroom climate in child care, child-teacher relationships and children's second-grade peer relations" by Carollee Howes, UCLA. Data for this paper, which is in press at Social Development, *was gathered in the Cost Quality and Outcomes Study, a five-year on-going longitudinal study examining the effects of child care in four states.*

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The quality of children's early relationships with their teachers in child care is emerging as an important predictor of children's social relations with peers as older children. Our data explored the relative contributions of early classroom social/emotional climate and individual relationships and behaviors to social competence with peers five years later.

Results

- Children who rated high in peer aggression, disruption, and social withdrawal were rated high in child-teacher relationship conflict and low in child-teacher relationship closeness.
- Children who rated high in prosocial behavior with peers also were rated high in child-teacher relationship closeness and low in child-teacher relationship conflict.
- Classrooms with higher levels of behavior problems had lowers levels of child-teacher closeness.

Predictive factors

Children's second-grade social competence with peers ratings could be predicted by

- preschool classroom social-emotional climate,
- four-year-old behavior problems and child-teacher relationship quality and
- contemporary child-teacher relationship quality.

Aggression ratings were best predicted by

- a preschool classroom high in behavior problems and low in child-teacher closeness,
- the child's poor child-teacher closeness as a four-year-old and
- contemporary child-teacher relationship conflict.

Disruption ratings could best be predicted by

- being a boy,
- preschool classroom climates high in behavior problems and low in child-teacher closeness as a four-year-old and
- high levels of child-teacher conflict as a second grader.

Prosocial ratings could best be predicted by

- being a girl,
- preschool classroom climates high in time spent interacting with peers,
- the child's low levels of behavior problems as a four-year-old and
- high levels of child-teacher closeness and low levels of child-teacher conflict as a second grader.

Ratings of social withdrawal could best be predicted by

- a classroom climate high on behavior problems,
- low levels of individual behavior problems as a four-year-old and
- low levels of child-teacher closeness as a second grader.

Discussion

Considerable individual variation in children's social competence with peers as second graders can be understood by examining both their individual experiences as four-year-olds in child care and the social emotional climate of their child care classroom.

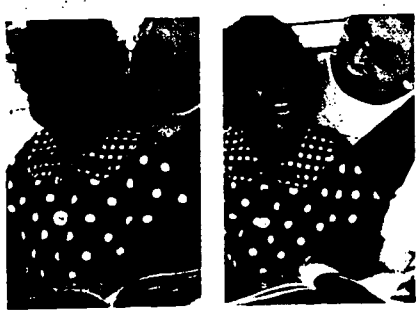
These findings support the premise that individual relationships are constructed within particular contexts. The contributions of the individual children, their teachers and the climate of the context are all important predictors. Both child care teachers and elementary teachers may benefit from an increased awareness of the importance of the social and emotional climate of the classroom.

This suggests that teacher preparation programs may need to focus on this aspect of curriculum for young children as well as more traditional material.

Underpinning our thinking

Howe's perspective on teacher-child relationships is drawn from attachment theory, which assumes that children use their relationships with significant adults to organize their experiences.

Current research suggests that children with close child-teacher relationships are also socially competent with peers. Children perceived by teachers as difficult four-year-olds tend to build child-teacher relationships high in conflict.



These persist so that by kindergarten, children who were problematic four-year-olds tend to be less able than children with other relationship histories to use the child-teacher relationships to master the academic content of school.

Our outcome measure, second-grade social competence with peers, is significant because by mid-elementary school, individual differences in children's social competence with peers appears to stabilize and predict future adaptive or non-adaptive behavior in adolescence.

Aggression and social withdrawal are maladaptive behaviors, indicating the absence of social competence.

If children feel emotionally secure with the teacher they can use her as a secure base and a resource for exploring the learning opportunities of the classroom.

Each child-teacher relationship is built independently of the child's prior adult-child relationships (including child-mother) and of the other child-teacher relationships in the classroom.

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Innovative ideas in early education exchanged at Georgia conference

Educators, researchers, and legislators from Europe, Australia, and America came together just over a year ago in Atlanta, to talk about the "single most important investment we can make" as Georgia Gov. Zell Miller said. That investment is providing early education opportunities for the nation's young children.

Participants in the conference "Education in the Early Years" heard from domestic and international programs; considered the most recent research; and discussed alternatives to structuring and financing these programs. Sponsors included the National Center for Early Development & Learning.

Following are excerpts from states trying innovative techniques

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Collaborative innovations

Massachusetts's discretionary grant program requires the collaboration of early care and education providers, families with young children, and other members of local communities, reports **Elisabeth Schaefer** of the state Dept. of Education. Local Community Partnerships for Children Councils:

- choose the lead agency that administers the project (public school, Head Start or child care agency)
- conduct needs assessments
- create comprehensive service systems for 3- and 4-year-old children and their families
- evaluate community plans, implementation of plans, and outcomes and
- serve as policy and planning bodies. The state mandates collaboration, a needs assessment plan, and then provides funds. Partnerships serve 3- and 4-year-olds in families with incomes up to the state median, $55,000 for a family of 4. The state requires communities to use a sliding-fee scale to determine what parents pay for services, including services provided in schools.

Minnesota has created the State Department of Children, Families & Learning (CFL) that brings together K-12 education with community service programs, according to **Barbara Yates** of CFL. Parents and community members are part of program, advisory, and planning committees.

This means:

- Creation of a single voice for childhood services which gives these issues more prominence in the executive and policy arenas.
- More comprehensive and coordinated access to data.
- More integrated funding. Policymakers have a better opportunity to examine state-level barriers that impede services and give a more coordinated response.

Connecticut has two major collaborative thrusts, according to **Elaine Zimmerman** of the Connecticut Commission on Children.

- The school reading program (passed in 1997) offers full access for three- and four-year-olds, the pooling of dollars across social service and education departments to expand hours and quality, service integration linking healthcare, literacy, employment and job training at the preschool site. A career ladder supports the work experience, training and career paths of providers. Preschool programs must be accredited or in the process of accreditation with NAEYC, Head Start or other similar standards. The program gets $80 million for the first two years of a five-year plan; it also contains $70 million in loan funds for capital expansion.
- The literacy program (passed in 1998) creates a comprehensive early intervention strategy targeting at-risk children K-3rd grade. The state appropriated $20 million for intensive reading programs, reduced class size, full-day kindergarten, after-school and summer school programs, and teacher training.

Parents are written into both bills as consumers with whom institutions must collaborate proactively.

Oregon's collaborative early childhood system serves children, ages 0-8, and their families, according to **Dell Ford** with the state Department of Education. The essential elements are family involvement, inclusion, positive relationships, child development, professional staff, continuity, health, an appropriate environment, and effective administration.

Oregon has an open competitive process for funding programs; all service providers can apply except religiously oriented programs. Also, schools must look at transition issues for preK students. Schools must coordinate with child care. Partnerships ensure that someone at the school works with health and human resources.

It is time that America determines to make the most out of this critical time in a child's life. If our children are going to compete in a global market, we must make them global thinkers. It is incumbent to do everything we can – as soon as we can – to prepare them to learn and to function in a world no longer limited by state or national boundaries.

— Zell Miller
Georgia governor

The state has allocated money for preK to partner with federal Head Start to increase the number of low-income children receiving early education services. This is known as Head Start Prekindergarten. Also, Temporary Assistance to Needy Families money is used to help federal Head Start expansion efforts to extend the day/year of Head Start services. Oregon's goal is to serve 50% of eligible children by 1999 and 100% by 2004.

Infrastructure innovations

Vermont, through its Early Childhood Workgroup, has developed a number of interrelated factors to strengthen its infrastructure, according to **Cheryl Mitchell** of the Vermont Agency of Human Services. These include:

- Core standards for all center-based, home-based, and home-visiting programs.
- A career lattice that links early childhood services across the career spectrum.
- Increased incentive payments for NAEYC-accredited programs.
- An extensive training system and the involvement of higher education in professional development.
- A revolving loan fund for improving child care settings and a mini-grant program for equipment, supplies, and specialized training.
- Use of interactive television and outreach.
- Partnership between state and community collaboratives around enhanced quality in early care and education.
- Links between schools, centers, and home-based providers.
- Reinforcement of family-centered practice.

Texas has formed the Texas Head Start-State Collaboration Project (THSSCP) which creates and supports statewide partnerships among Head Start, child care and preK programs. Parents are members of the THSSCP Task Force and participate in various workshops. THSSCP gets $300,000 a year from Head Start (federal) and child development block grant (state). (continued on page 16)

(Texas continued from page 15)

These major projects are being implemented:

- Texas Core Standards
- Texas Career Development System
- Early Care and Education Collaboration Tool Kit
- Transition Training Pilots

North Carolina's "TEACH" component of its statewide Smart Start initiative is an umbrella for a variety of scholarship programs that help child care workers take college courses and get paid for it, according to **Sue Russell** of the Day Care Services Association. TEACH has operated for eight years and provided more than 4,000 scholarships.

Another state program—Child Care WAGE$ Project— provides salary supplements to eligible child care teachers, directors, and family child care providers linked to the level of their education.

Both projects maintain comprehensive databases that track participants' demographics, history, progress, increased education, turnover, and so forth. TEACH funds come from private and public sectors, including foundation and corporate sources. The Child Care WAGE$ Project is funded with Smart Start money. Both projects have shown that increased compensation can have a dramatic impact on turnover.

Funding innovation

Thirty nine states fund preschool programs with their own money from special taxes, lotteries and gaming, state general funds, state education appropriations, and other methods, according to **Anne Mitchell** of the Early Childhood Research Institute and **W. Steven Barnett** of Rutgers University Graduate School of Education.

Nationwide, child care and early education is funded 60% by families, 39% by government, and 1% by the private section.

PreK is rapidly growing in state budgets. Some 39 states have money for preK or add on to Head Start. The trend is for three- and four-year-olds with few initiatives for children birth to five.

Funding solutions suggested include

- Educating parents, the public and the government about the costs of low quality and a lack of services
- Building a system on existing resources and models
- Creating a funding partnership among parents, government, and employers
- Using a mix of public sources, such as general revenues from taxes and lotteries, state budget surpluses, increased tax on upper income families (especially capital gains), dependent care assistant plans with matching contributions and rollover, a children's trust fund similar to the Social Security system, and a 50% tax on campaign funds.

Evaluation innovation

Georgia's ongoing evaluation of its Prekindergarten Program looks for program characteristics that produce a "competitive advantage" for children, according to **Gary T. Henry** of Georgia State University. The evaluation also examines which educational practices in the years after preK enhance or dampen the effects of the preK program on four-year-olds.

Program quality, teachers' beliefs and practices, and developmentally appropriate practices in preschool are measured on a stratified probability sample of more than 3,000 children. Family background and preschool program characteristics are monitored. Parents are interviewed each year for the first three years.

These outcomes are measured: rating of student performance on cognitive, behavioral, and social skills, attendance, promotion, referrals to special programs, and expectations for each student by parents and teachers.

Nearly 1,000,000 preK children being served in public school areas

Schools and school districts are becoming increasingly involved in providing services to children and families prior to entry into formal school at the customary kindergarten entry age.

Using data from the 1995 National Household Education Survey (US Department of Education), a new study by researchers at NCEDL estimates that some 900,000 prekindergarten children were served in a public elementary, junior high or high school in 1995.

"School systems are a major new force in early childhood. This has both positive and negative implications for the field," said Researcher Richard M. Clifford, who is also co-director of the National Center for Early Development at UNC-Chapel Hill.

On the positive side, he said, schools bring a strong tradition of service to all children. A 1999 report showed that standards for state-funded pre-kindergarten programs in many states are quite high. "Second, schools represent a strong potential ally in securing revenue for early childhood programming."

On the negative side, school officials have been historically reluctant to incorporate services to children prior to kindergarten entry age—a position sometimes supported by public opinion regarding the appropriate role of the education system, said Diane Early who also worked on the study.

She said, "Schools have been slow to meet the needs of families for services beyond the traditional school day (usually about six-and-a-half hours/day) and school year (usually around nine months). Today most families with children three to four years old age need full-day (at least eight hours a day) and full-year services."

In an article published in a recent Young Children, the researchers wrote, "We propose the creation of a National Commission on Early Childhood Services to examine the issue of how we, as a country, will serve our youngest citizens. Until we have agreement on the basic issues of who has responsibility for governing early childhood services, who has responsibility for financing these services, and how we can best take advantage of the rich resources for serving children in this country, many families will continue to face a patchwork of services with many children spending their early years in settings of unknown quality."

"School systems are a major new force in early childhood. This has both positive and negative implications for the field."

– Richard M. Clifford Researcher, Co-director National Center for Early Development & Learning

For more information:

"Almost a Million Children in School Before Kindergarten: Who is responsible for Early Childhood Services?" Richard M. Clifford, Diane M. Early & Tynette Hills. *Young Children* 54 (5), 48-51.

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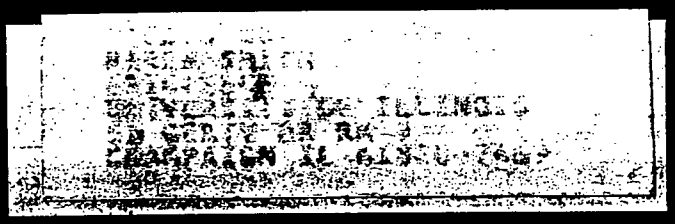

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Summer 2000 Volume 4, Number 2

Improving
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Frank Porter Graham Child Development Center at The University of North Carolina at Chapel Hill

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Volume 4 No.2
Summer 2000

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Periodicals postage paid
at Chapel Hill, NC

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www.ncedl.org

Early Developments is published three times a year by the Frank Porter Graham Child Development Center at The University of North Carolina at Chapel Hill. It is funded in part by The University of North Carolina at Chapel Hill and in part by PR/Award Number R307A60004, administered by the Office of Educational Research and Improvement, National Institute on Early Childhood Development and Education, US Department of Education. Contents of articles do not necessarily represent the positions of the U.S. Department of Education. Endorsement by the federal government should not be assumed.

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From the Director

Nearly four years ago, our initial issue of Early Developments dealt with quality care. Since then, communities and states have begun implementing higher standards and more families have become aware of and are looking for higher quality. Attempts to improve quality take many forms and equally diverse is the research into the nature of care and outcomes for children and families.

Our research at the Frank Porter Graham Child Development Center (FPG) keeps pace with the times, and in this issue, we offer an update on our first issue. In an article beginning on page 6, we focus on how our own state – North Carolina – is making major changes in rating child care centers. The impact of these changes is examined at several levels: centers, the training of assessors, and state policy..

In a study discussed on page 4, FPG researchers found that a comprehensive community initiative can improve child care quality if significant funds and activities are focused on the issue. Quality was significantly related to the number of local quality improvement activities in which the child cares centers participated.

Researchers also looked at one nationally recognized program – North Carolina's Smart Start – and found that assistance to child care centers helps young children come to school ready to succeed if the assistance is directly related to quality improvement. This story begins on page 2.

We have also analyzed the relationship between state regulations and child care in four states. In an article on page 10, research indicates that policies set higher standards for child protection than for enhancement of development and learning. Analysts said, "Such regulations support the image of child care programs being a safe haven rather than for development enhancement. The limited requirements for child care personnel and for community interaction also encourage that image. These minimum standards departed substantially from professional judgements about what is needed in child care settings."

In a survey, described in an article beginning on page 14, teachers of preschoolers report that they are able, generally, to engage in the practices they endorse. Some barriers were found: the most common were "children with behavior problems interfere" and a "lack of planning time." This article is in our special section devoted to the National Center for Early Development & Learning.

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Child outcomes IMPROVE if aid to child care centers is DIRECTLY RELATED to quality improvement

Targeting the right

Smart Start assistance to child care centers helps young children come to school ready to succeed if the assistance is directly related to quality improvement, according to a new study conducted by researchers at the Frank Porter Graham Center at UNC-Chapel Hill.

Specifically, children who attended child care centers that participated in Smart Start activities directly related to improving quality had better cognitive and language skills when they entered kindergarten than did children from other child care centers or family child care homes. Additionally, fewer children in the Smart Start-Direct group were rated as having behavior problems by their kindergarten teachers.

Smart Start is a partnership between North Carolina state government and local leaders, service providers, and families to better serve children under six and their families. The state distributes money to county partnerships, which are non-profit corporations established specifically for the purpose of administering Smart Start activities. The primary goal is to ensure that all children enter school healthy and prepared to succeed.

This new study, which included a total of 508 children, looked at a group of children attending Smart Start centers and children attending other child care centers or family child care homes. Within the Smart Start group, researchers identified 142 children who attended centers participating in activities directly related to improving child care quality. The others in the Smart Start group attended centers with activities described as supportive. (See sidebar.)

stuff

"Findings suggest that program change efforts need to be directly related to improving the quality of child care if they are to have an effect on children's school entry skills. To affect school entry skills, the type–not just quantity–of support is important," said **Kelly Maxwell**, lead researcher on the project.

"The findings and recommendations from this study should not be construed to mean that local partnerships should provide none of the activities listed under the indirect category," said **Donna Bryant**, principal investigator of the FPG-UNC Smart Start evaluation team.

"Ensuring that all teachers are certified in CPR, for instance, is important for children's health, but should not be expected to raise children's kindergarten entry skills," she said.

Bryant said she thinks the local Smart Start partnerships need to pay more attention to the linkages between the activities they fund and the outcomes they intend to achieve.

Activities DIRECTLY RELATED to improving quality

- Enhanced subsidies for higher child care quality
- Enhanced subsidies for higher teacher education
- License upgrades
- On-site technical assistance
- Quality improvement and facility grants
- TEACH (Teacher Education and Compensation Helps) scholarships, which provide education scholarships and support for release time for child care teachers.
- Teacher education scholarships
- Teacher salary supplements

Activities INDIRECTLY RELATED to improving quality

- CPR training
- Developmental screenings
- Director administrative training
- Enrichment activities
- Expansion and start up grants
- Health and safety assessments
- Playground safety
- Teacher substitutes
- Transportation
- Specialists
- Subsidies (not tied to quality)
- Workshops

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Focused use of money, activities can improve child care quality

A comprehensive community initiative can improve child care quality if significant funds and activities are focused on the issue, according to a study by researchers at the Frank Porter Graham Center at UNC-Chapel Hill.

The quality of child care, as measured by the Early Childhood Environment Rating Scale (ECERS), at 180 child care centers in North Carolina was significantly higher in 1996 than 1994. The quality was significantly related to the number of local quality improvement activities in which the child care centers participated.

Some of the centers in this study were part of the state's Smart Start initiative; others were randomly sampled. The state gives money to county partnerships, which are established specifically for administering Smart Start. These partnerships plan how to best meet their own community needs, improve existing programs and design new ones.

Changes in quality were related to Smart Start participation. Quality ratings were specifically tied to the number of Smart Start quality improvement activities in which a center participated, the percent of full-funding allocation received by the county, and the proportion of Smart Start funds designated for child care. Many centers took advantage of multiple Smart Start opportunities.

Further, the rate of increase in the proportion of centers licensed at the higher AA level was higher in Smart Start counties than in other N.C. counties.

Other findings:

- Overall, only 14% of the preschool classes in 1994 were providing good quality care. In 1996, 25% of the preschool classes were providing good quality care.
- Money spent on child care quality improvement efforts was related to ECERS quality, particularly for counties that received more Smart Start funding.

Researchers cautioned that there was still much room for improvement, however, with 75% of the centers still below the quality threshold.

NOTE: Since data were collected for this study, North Carolina has directed that at least 70% of the Smart Start partnerships' budgets be allocated to child care.

Editor's note: The above excerpts are from Effects of a Community Initiative on the Quality of Child Care by FPG researchers Donna M. Bryant, Kelly L. Maxwell & Margaret Burchinal. The article appeared in Early Childhood Research Quarterly, 1999, Vol. 14, pages 449-464.

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Reaching for the Stars

The rated license or star system, as it's called, adds three voluntary levels of quality to the two basic levels previously available in North Carolina. Centers and family child care homes can earn licenses with up to five stars based on a point system composed of three components: **staff and director education, compliance history, and program standards.**

Although the rated license does not solve all problems associated with attaining quality in child care, it does help parents become informed consumers who can choose better care for their children.

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The new star system affects nearly 9,000 centers in North Carolina that care for nearly a third of the state's children under five

"Next on the video is an art activity. Ready? Roll the tape."
A group of children are playing with modeling dough at a picnic table in a yard. A teacher shows how to use a thick dowel to roll the dough flat. Some of the preschoolers pay attention while others smack their dough delightedly with their hands. Everyone seems to be having a fine time.

Those watching the tape include five women from various areas of North Carolina who are beginning training on using the Family Day Care Rating Scale (FDCRS) to judge the quality of a family child care home.

After a minute or two, the video stops. Cathy Riley, one of the trainers, says, "All right. Now rate the center on 'Art,' which is item 19 in your video training guide." The trainees silently grade the family child care home on art. Then they discuss their rankings. Most give it a four. They discuss whether they could say with certainty that the children were offered art at least three times a week and how creative the teacher was allowing the children to be.

At one point, Trainer Riley says, "You rate what you observe." In fact, she adds, "When you first go into the family child care home in the morning, tell the owner/operator that you will want to observe everything. And that includes preparing the food, diapering, taking children to the bathroom, naps – everything."

The group then re-starts the video to find out how experts had rated this home's art. They had given it a four.

Using videotape taken in a child care facility to learn how to judge the quality of care is the start of intensive training for these North Carolina Rated License Assessors. They are part of a cadre being trained to implement a new rated license adopted last year in North Carolina.

After video training, trainees complete a number of live observations under the direction of the trainers from FPG, **Lisa Waller, Cathy Riley** and **Kris Fulkerson**. The overall training is directed by **Thelma Harms** and **Debby Cryer**, co-authors of the environment rating scales, who also conduct the final practice observations before certifying that trainees are ready to be official assessors for the North Carolina rated license.

The assessors must reach a reliability of 85% (within one point) on each of the four environment rating scales before they can conduct assessments of child care programs for infants and toddlers, preschoolers, and school-age children in centers, schools and family child care homes. After each live practice observation, the trainer and trainees compare their scores and talk about discrepancies of more than one point.

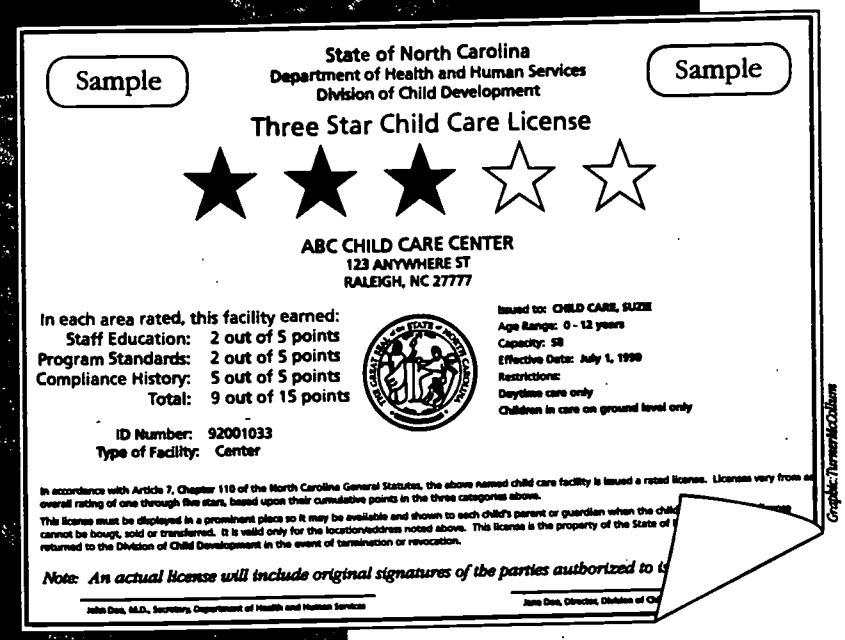
The accuracy and objectivity of the assessors is key to the credibility of any certification system. As one trainee put it, "The child care providers really want to know who we are, what our training is, and what level of reliability we've been trained to. I tell them we've been trained to 85% accuracy by the authors of the scales. That seems to carry some weight."

In addition to providing the initial training, FPG trainers conduct a reliability check on each assessor at the sixth assessment completed with each scale. This check assures that assessors maintain their level of reliability. So far, 19 assessors have been hired across the state, some full time and some part time. The new system affects the nearly 9,000 centers in the state that care for nearly a third of the state's children under five. It does not change the minimum standards for child care, but it does add higher gradations in standards.

The rated license or star system, as it's called, adds three voluntary levels of quality to the two basic levels previously available in the state. Centers and family child care homes can earn licenses with up to five stars based on a point system composed of three components: staff and director education, compliance history, and program standards.

Today's training class will help these assessors determine the average score on the FDCRS rating scale used as part of the program standards component for family child care homes. The other scales are the **Early Childhood Environment Rating Scale**,

(continued on page 8)



Sample

State of North Carolina
Department of Health and Human Services
Division of Child Development

Sample

Three Star Child Care License

ABC CHILD CARE CENTER
123 ANYWHERE ST
RALEIGH, NC 27777

In each area rated, this facility earned:

Staff Education:	2 out of 5 points
Program Standards:	2 out of 5 points
Compliance History:	5 out of 5 points
Total:	9 out of 15 points

ID Number: 92001033
Type of Facility: Center

Issued to: CHILD CARE, SUZIE
Age Range: 0 - 12 years
Capacity: 58
Effective Date: July 1, 1990
Restrictions:
Daytime care only
Children in care on ground level only

In accordance with Article 7, Chapter 110 of the North Carolina General Statutes, the above named child care facility is issued a rated license. Licenses vary from a
overall rating of one through five stars, based upon their cumulative points in the three categories above.
This license must be displayed in a prominent place so it may be available and shown to each child's parent or guardian when the child
cannot be bought, sold or transferred. It is valid only for the location/address noted above. This license is the property of the State of
returned to the Division of Child Development in the event of termination or revocation.

Note: An actual license will include original signatures of the parties authorized to

John Doe, M.D., Secretary, Department of Health and Human Services

Jane Doe, Director, Division of Ch

Graphic: Thomas McCollum

Centers and family child care homes can earn licenses with up to five stars based on a point system composed of three components:

1. **staff and director education,**
2. **compliance history, and**
3. **program standards.**

(continued from page 7) Infant-Toddler Environmental Rating Scale and the School-Age Care Environment Rating Scale.

Whichever scale is being used, it is particularly important because it is based on observation in classrooms. Observation with a valid and reliable instrument is used to show the ongoing daily quality of care and education experienced by children.

The star system, which is administered by the N.C. Division of Child Development, was designed to give parents a better idea of how good their child care center is, as well as giving center operators clear indicators to guide program improvement.

"Research at FPG shows that many parents find it difficult to tell the difference between good programs and bad programs," said Cryer. If parents can't really tell what the quality is, there's a problem with the consumer information that parents have." She said that according to one study, parents on average spend less than one minute a day in their child's program, making it difficult for them to know what happens to their child once they have left.

The format of the new license makes it easy to see at a glance how many of the five stars a facility has earned, because only the earned stars are filled in [See picture of sample license on this page]. State officials say they're hoping that parents will ask what's required to fill in the rest of the stars.

The new license has specific requirements for each component, designed to improve the quality of care for children. When centers and homes receive their star rating from the licensing consultant, they also receive a comprehensive report on every component. The report includes written detailed feedback from the assessor who observed in their facility about areas of strength and areas where improvement is needed. This detailed report gives the child care providers a blueprint for improvement.

Getting a five star license requires centers and family child care homes to provide high quality in many areas including: protection of children's health and safety, organization of the caregiving space, provision of appropriate materials for play and learning, practice of positive and supportive interaction with children, and stimulation of language and thinking skills through engaging activities.

Each child care facility will have different areas of strengths and weaknesses. Some may need to make or purchase additional materials while others may need to seek training for their staff so that the materials they have will be put to better use.

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Some may need to improve their classroom discipline techniques while others may need to establish better relationships with parents.

Although spending more is not the determining factor in getting a good rating, the director of the N.C. Division of Child Development, Stephanie Fanjul, said the state is sensitive to the fact that meeting higher standards may cost more.

That's one reason that multiple stars are voluntary. A center can operate with only one star, which means minimum requirements are met. Centers that had the old "A" rating automatically get one star. The state has allocated $15 million a year so that centers can improve. This money goes to centers that already receive state subsidies. Operators can earn between $14 and $25 extra per subsidized child per month, depending on how many stars they have.

In addition, millions of dollars have been funneled into the state's Smart Start partnership system. [See related stories beginning on page 2 and page 4.] For example, in Wake County, centers that add more stars could receive between 5% and 40% more money per child through Smart Start.

Some critics have said that while the five-star system is a good start, it's still weak in some areas. "We're especially lax on ratios, group size, and especially teacher education," Cryer said. "I go to centers and I realize that many staff members lack training and some have been hired on the spot, with no reference checks."

Studies show that across the US, child care providers earn an average of only $7.50 an hour or $13,125 a year. This is considered a major reason for the problem in recruiting and retaining qualified staff. Turnover in child care staff ranges from 25-50% nationally.

Fanjul said she wishes the state could do more. "I wish we financed it. I wish we'd make it possible for every child to get high quality care and for every child care teacher to be paid appropriately. We're not there yet."

Although the rated license does not solve all problems associated with attaining quality in child care, it does help parents become informed consumers who can choose better care for their children.

If you want to know more

NCEDL Spotlight #18:
Teacher education, wages key to outcomes.
< www.fpg.unc.edu/~ncedl/PDFs/spot18.pdf >

NCEDL Spotlight #2: Quality Child Care
< www.fpg.unc.edu/~ncedl/Pages/spotlt2.htm >

NCEDL Policy Brief on Quality Care
< www.fpg.unc.edu/~ncedl/PDFs/briefl1.pdf >

The children of the cost, quality, & outcomes study go to school: Executive summary. Peisner-Feinberg, E. S., Clifford, R. M., Burchinal, M. R., Culkin, M., Howes, C., Kagan, S. L., Yazejian, N., Byler, P., & Rustici, J. (1999). Chapel Hill, N.C.: University of North Carolina at Chapel Hill, FPG.
< www.fpg.unc.edu/~ncedl/Pages/cq.htm >

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'A safe haven' is just the beginning in child care and education

SAFE HAVEN

"As we enter the 21st century it is clear that we are changing our view of early child care from one of a safe haven to one of developmental enhancement. We need to make sure that our regulations reflect that changed view."
– Jim Gallagher

A study of child care regulations in four states – California, Colorado, Connecticut, and North Carolina – shows that state policies generally set higher standards for child protection than for enhancement of development, according to a new study by researchers at the Frank Porter Graham Center at UNC-Chapel Hill.

"Such regulations support the image of child care programs as being a safe haven rather than for development enhancement. The limited requirements for child care personnel and for community interaction also encourage that image," said Jim Gallagher, one of the researchers on the study.

He said, "These minimum standards departed substantially from professional judgements about what is needed in child care settings."

The study analyzed the rules and regulations for center-based care from the four states that had previously been studied for the national Cost, Quality and Outcomes study.

Investigators developed and applied rubrics to compare policies with recommended practices in the areas of structure, operations, personnel and context.

Researchers did a separate analysis comparing regulations for protecting the child versus regulations for enhancing child development.

"While we recognize that state standards represent minimum requirements, it is still important to focus on what we consider as "minimum" for child care and child development," said Robin Rooney, another researcher with the project.

It appears easier, from these findings, to establish standards for child protection than for enhancement of child development, she said.

"This may be because there is a strong consensus about just what is required for protection of safety and freedom from abuse than about what is needed to enhance development, or it can also mean that, as a society, we are not quite determined to use child care programs to enhance child development through regulations. We can easily agree on safety standards, but we may differ from one another on how to best help the child reach higher levels of cognitive, social, and motor development," said Rooney.

These findings indicate that the minimum standards for these four states do not include many standards for child development that would be considered important by professionals in the field, Gallagher said.

"While we should be cautious in assuming a causal relationship between minimal state standards and the number of inadequate or mediocre child care settings that we found in these four states (as well as some outstanding programs), it seems likely that hard pressed directors of child care centers will meet the minimum standards first and then consider what else they should be doing," he said.

"If we do wish for a strong role for child care centers to enhance development, then some higher and more specific development enhancement standards need to be written," said Gallagher.

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Researcher's recommendations

Eliminate lowest standards

These analyses point out that "we still are a long way from matching child care regulations with what we know as quality. A strong step in the right direction could be made by eliminating some of the lowest standards that are now considered acceptable."

The researchers said, "We should recognize that policymakers might dilute standards to avoid the political ramifications of shutting down non-responsive child care centers. However, state licensing agencies could offer incentives for meeting higher standards through increased public subsidies for personnel preparation and by delaying the time that child care providers have in meeting high standards so that they can be reasonably reached. For example: By the year 2004, we will expect directors to have advanced levels of preparation in child development administration."

More precise language

Regulators should describe the practices they intend to promote. Expectations for health and safety practices were more frequently described in detail, while other quality practices – particularly those related to child development – were referred to vaguely, or not at all.

To link policy with quality practices, such as specific levels of personnel training, access to stimulating materials, and positive relationships with families, descriptive language and examples of how that expectation might be implemented are needed. Without language to describe quality practices, such practices may be assumed to be optional.

Gallagher said, "A message needs to be sent through our regulations that we expect children to have positive experiences that enhance development in child care as well as keeping children healthy and safe."

Encourage developmental enhancement

One important role for professional groups and associations at the state and federal level would be to review periodically the rules and standards for child care to assure that they match current thinking in the field.

One of the eight National Goals in Education endorsed by the 50 governors and the president was that "all children should arrive at school ready to learn." Gallagher said, "As we enter the 21st century it is clear that we are changing our view of early child care from one of a safe haven to one of developmental enhancement. We need to make sure that our regulations reflect that changed view."

Personnel requirements (higher level of professional preparation) should be made explicit.

Gallagher and Rooney conducted the research for the National Center for Early Development & Learning based at UNC-Chapel Hill.

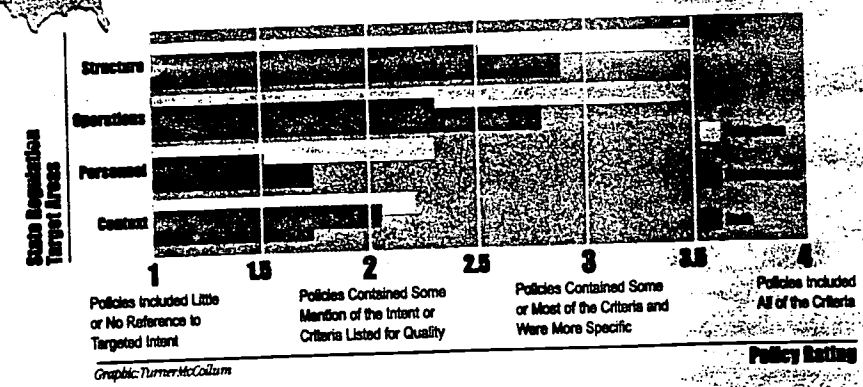
If you want to know more:

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

Love, J., Schochet, P.Z., & Meckstrom, A.L. (1996). *Are they in any real danger? What research does – and doesn't – tell us about child care quality and children's well being*. Princeton, NJ: Mathematica Policy Research Inc.

National Association for the Education of Young Children. (1998). NAEYC position statement on licensing and public regulation of early childhood programs. *Young Children*, 43-50.

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



Graphic: Turner McCollum

The above content analysis summary of state regulations is a composite rating of four states – California, Colorado, Connecticut, and North Carolina. For each target area, researchers developed separate rubrics for differential analysis of *child protection* (health and safety) and the enhancement of *child development* aspects of the policies.

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National Center for Early Development & Learning
NCEDLNEWS

Making Transition Connections:

A collaboration of families and schools

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NCEDL's free monthly Enewsletter

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Go to our web site at <www.needl.org> and fill in the ENewsletter box with your email address.

or

email Loyd Little at <loyd_little@unc.edu> and ask to receive the ENewsletter.

The Kindergarten Transition Project at the National Center for Early Development & Learning has developed a school-based approach designed to enhance connections among children, families, teachers and peers during the transition to kindergarten.

University of Virginia Researchers Marcia Kraft-Sayre and Robert Pianta say these connections can be important supports to children and families during this period of change and reflect recent attempts to describe what "ready schools" can do to ease transitions (National Education Goals Panel, 1997).

Activities are intended to increase familiarity with school, provide for consistent expectations between home and school, and make children and families more comfortable interacting with school.

"In addition, these relationships enable kindergarten teachers to more easily, and earlier, use the resources of families to support children's competence in school," Kraft-Sayre said.

How the program was developed

Researchers collaborated with preschools, elementary schools, a summer pre-kindergarten program, and parents to learn about current transition practices, and then cooperatively designed a set of activities to foster positive transition experiences.

Regular meetings were held with teachers, family support workers, and principals to discuss factors that enhanced or hindered these kindergarten transition activities. In addition, families were asked about their experiences with their children's transition to kindergarten.

Recommended activities

"A package of activities affecting many connections – child-teacher, family-teacher, child-peer, and others – is more likely to support a successful transition, than any one activity alone. For example, children in one school system are enrolled in preschool with peers with whom they will go to elementary school," Pianta said.

By arranging with elementary school principals and teachers for these children to be in the same kindergarten classroom together, peer relationships developed in preschool can be carried over into kindergarten.

Several preschools promote family-school connections by providing family support services. A family support worker, who is assigned to the preschool and elementary school, meets regularly with families in their homes, connects them to community resources when needed, provides opportunities for involvement in groups to discuss shared interests and address transition issues, and works to engage families in positive relationships with school.

Meetings between parents and kindergarten teachers before the onset of kindergarten, are arranged by the teacher and family support worker to help establish parent-teacher communication. The family support worker can be a bridge of continuity for families as their children transition to kindergarten and by accompanying them during visits to the elementary school when needed.

An additional connection involves linking pre-kindergarten children with their anticipated elementary school through opportunities for rising kindergarten children to visit their classroom in the spring before their kindergarten year.

Children from four-year-old classes and from special education classrooms are included, and can visit the kindergarten classroom, tour the school, participate in recess and eat lunch in the cafeteria.

Familiarizing children with their kindergarten teacher and specific classroom activities prior to school entry, in conjunction with a number of other transition activities reduces uncertainty for the child.

Finally, said Pianta, perhaps the most important activity to enhance kindergarten transitions has been collaborative group meetings where key players in the transition process – the

teachers, principals, and family workers – all work together.

These meetings allow discussion of problems and solutions and build connections among program staff. For example, preschool and kindergarten staff, with the mutually shared goal of having preschool peers together in kindergarten, are working together to achieve this goal when kindergarten placement decisions are made.

Collaboration is fundamental

The researchers said collaboration among everyone involved is fundamental to both the development and implementation of a kindergarten transition program.

Suggested family/school connections

- Arrange a time for parents to meet with the preschool and kindergarten teachers to discuss the expectations of kindergarten and their children's specific needs.
- Organize an informal dinner with parents and kindergarten teachers in conjunction with school open houses or back to school nights.
- Place children with kindergarten teachers who taught their older siblings to build upon pre-existing family-teacher bonds.
- Encourage families to engage their children in literacy activities at home, such as reading together.

Suggested child/school connections

- Provide opportunities for children to interact directly with their anticipated kindergarten teachers by arranging visits to kindergarten classrooms during story time, center time, recess, or a special school function.
- Familiarize children with their kindergarten teachers by reviewing their names, showing their pictures, and discussing what the kindergarten classroom will be like.
- Orient preschool children to the expectations of kindergarten, discuss the rules for learning and behaving, such as walking in a "kindergarten line."

Suggested peer connections

- Arrange for children to interact with future kindergarten classmates at preschool or outside the classroom setting.
- Identify a current kindergartner to serve as "buddy" to a preschooler. Plan visits to the kindergarten classroom when the kindergarten "buddy" reads a story, demonstrates how to play a game, or shows the younger child how to use the classroom computer.

Suggested program connections

- Arrange discussions between preschool and kindergarten personnel about classroom practices and specific needs of individual children.

If you want to know more

Pianta, R. C., & Walsh, D. J. (1996). *High-risk children in schools: Creating sustaining relationships*. New York: Routledge, Kegan-Paul.

The transition to kindergarten. Pianta, R.C., & Cox, M.J. (Eds). Bailey, D.B. (Series Ed.). (1999). Baltimore, MD: Brookes Publishing.

U.S. Department of Health and Human Services. Administration for Children, Youth and Families, Head Start Bureau. (1996). *Effective transition practices: Facilitating continuity: Training guide for the Head Start learning community*. Aspen, CO: Systems Corporation.

"Popsicle night"

promotes transition in a fun way

The following vignette exemplifies the transition activities used by NCEDL researchers in the kindergarten transition project:

During the summer prior to the start of kindergarten, a playground "popsicle night" was offered for the rising kindergartners, parents, siblings and other family members. This informal, low-key activity enabled the children and their families to experience the school in a fun and non-demanding manner.

It was held from 6:30-7:30 PM, so that parents who worked during the day could attend. Unlike a kindergarten orientation, there was no formal agenda. Elementary school personnel and the family worker joined families on the playground and answered questions.

For example, one parent asked about immunizations for school entry. The principal explained the process and offered to follow up with the family.

The turnout for this was actually better than for the more formal kindergarten orientation at one of the schools. Several of the children were initially hesitant to play and stayed close by their families, but quickly warmed up as their preschool friends arrived. Children were able to reconnect with preschool peers, and become familiar with the school playground.

Families met other families of classmates of the children, and were able to interact informally with school staff. All and all, this activity helped ease the transition to school in a relaxed and fun way.

Preschool teachers report engaging in practices they endorse

A national survey of 1,902 preschool teachers reveals that they are able, generally, to engage in the practices they endorse.

Teachers were given a list of twenty-one practices and asked to rate to what extent a practice happened in their classroom and to what extent they would want the practice to occur "in a perfect world." Few discrepancies were found between reported and ideal practices.

Although teachers endorsed a variety of practices, on most items teachers said that they are able to use the practices they endorse, according to **Diane Early** and **Richard Clifford** at UNC-Chapel Hill and **Carollee Howes** at UCLA who conducted the study for NCEDL.

Smallest discrepancies

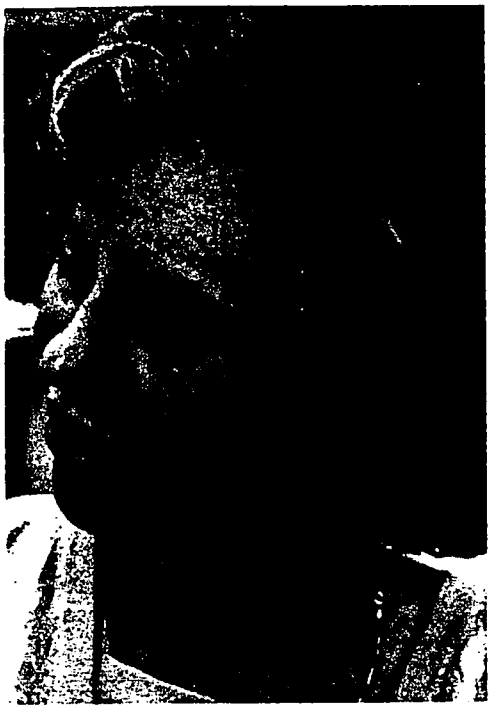
On many items teachers reported almost no difference between their practices and their ideals. The four items with the smallest discrepancies between beliefs and practices were:

- All children in the group have to take part in all activities.
- Children practice skills on worksheets.
- Children are involved in group lessons.
- Children spend time playing.

Largest discrepancies

Teachers reported that in a perfect world, they would engage in some practices slightly more. The four items with the largest discrepancies between beliefs and practices were:

- We have a daily science experience.
- Children have time to be alone when they want it.
- We have a daily math experience.
- We have a daily music activity.



Demographic variables

There were significant differences found in examining which teachers endorsed group-centered beliefs based on the sponsorship of their center, said Early. Group-centered beliefs are those that encourage all children to engage in the same activities at the same time and at the same pace. It is the opposite of child-centered beliefs that encourage individualized activities and pacing.

Teachers in public schools, Head Starts, and other non-profit centers endorse group-centered beliefs significantly less than do teachers in religiously affiliated or for-profit settings, the data indicated. Additionally, teachers with more education endorse group-centered beliefs less.

To measure group-centered beliefs, teachers were asked a series of questions about how often they believe certain practices would take place in a perfect world. Teachers with more education had lower scores on the measure of group-centered beliefs.

Interestingly, teachers with larger groups endorse fewer group-centered practices, said Clifford. There was no relation between the amount of time a teacher has worked at the center and her group-centered beliefs.

Conclusions and implications

Early childhood teachers largely see themselves as engaging in the practices that they endorse, said Early. On average, they do not report many barriers to conducting their classes in the ways they think are best (as evidenced both by the small discrepancies between their reported practices and beliefs and by the low ratings they give to the barriers listed in the survey).

Different teachers do endorse different practices, especially with regard to group-centered versus child-centered practices. Although teachers uniformly agree that reading, math, science and music activities should take place daily, there is not uniform agreement with respect to beliefs about practices like involving children in group instruction and insisting that children complete all activities.

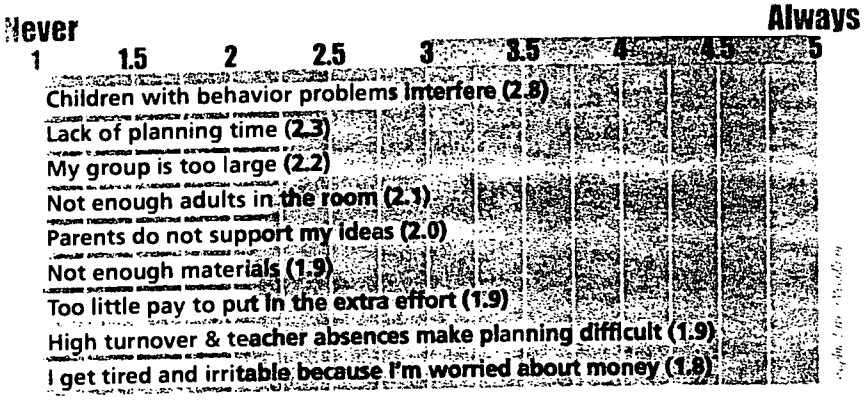
Attention should be paid to helping teachers adopt knowledge and values related to child-centered practices, Early and Clifford said. Other research has indicated that child-centered practices predict the best outcomes for children. These data indicate that teachers who endorse such practices report being able to engage in them. However, teachers do not uniformly endorse child-centered practices. Changing teachers' knowledge and values may be a key to improving practice.

Barriers to endorsed practices

The listing below indicates the top-rated barriers to engaging in endorsed practice. Not surprisingly, all the barriers were given relatively low ratings. Earlier, the answers to questions about practices and beliefs indicated that teachers see themselves as employing the practices they endorse.

Most commonly cited barriers

The survey asked teachers, "How often do the following prevent you from teaching/caring for your group in the way you would in a perfect world?"



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New book examines critical issues in transitions

This book contains ten chapters presented at a national transitions synthesis conference sponsored by NCEDL. An additional five chapters were written after the conference, and reflect the discussions and deliberations of the synthesis groups.

416 pages
Brookes Publishing Co., Baltimore,MD

"Our aim in this book is to provide a comprehensive treatment of an area of knowledge that has been neglected for too long and is need of systematic attention.... We want to help organize and frame the debate on critical issues regarding the early primary education of an increasingly diverse group of young children."

The above quote is from the preface of The Transition to Kindergarten, which has been published as the first in a series by the National Center for Early Development & Learning at the University of North Carolina at Chapel Hill.

Editors Robert Pianta of the University of Virginia and Martha Cox of UNC-Chapel Hill said, "The education of young children is receiving an unprecedented level of attention in the United States and, for good or bad, will be a focus of educational reform as the twenty-first century begins. Understanding and influencing the transition from home to school, from child care to school, and from early childhood to elementary programs will likely be a focus of a great deal of attention in the policy, research, and practice communities."

Chapter subjects

1. "An Ecological Approach to Kindergarten Transition" provides a conceptual model for looking at transitions.
2. "Early Schooling and Social Stratification" looks at how early school experiences provide advantages for some children and disadvantages for others that then reinforce the sorting of individuals into the hierarchical layers characteristic of societies.
3. "Assessing Readiness" examines the national "ready for school" goal and other key issues regarding readiness.
4. "Promoting Education Equity and Excellence in Kindergarten" looks at demographic trends and educational experiences by groups of children from different backgrounds and different kindergarten programs they attend.
5. "Diverse Perspectives on Kindergarten Contexts and Practices" focuses on research related to teachers' practices in kindergarten classrooms.
6. "Families and Schools: Rights, Responsibilities, Resources, and Relationships" reviews and identifies critical issues for families and schools in the context of children's transition to school.
7. "Changing Schools for Changing Families" examines the nature of, and barriers to, parent involvement and innovations in school-based support for families.
8. "Beginning School for Children at Risk" reviews why the transition to school for children in poverty is considered important for scientific inquiry, education improvement and societal concern.
9. "Children with Disabilities in Early Elementary School" looks at research and practices related to the transition to school-age services for young children with disabilities and their families.
10. "Kindergarten Practices with Children from Low-Income Families" discusses research on low-income children and families and implications for schools and classrooms.
11. "Research on the Transition to Kindergarten" examines how research design and methodology constrain the current knowledge base on transitions.
12. "Personnel Preparation and the Transition to Kindergarten" suggests a rethinking of the preparation of teachers and other staff serving children and their families.
13. "The Practice of Effective Transition" offers recommendations and rationales for practices for those involved in children's transition into kindergarten.
14. "Policy and the Transition Process" discusses specific issues with policy implications and advances a set of principles for analyzing policy related to transitions.
15. "The Changing Nature of the Transition to School" suggests significant trends for the next decade in relation to shifting demography, education of young children in public schools, and the changing nature of families and schools.

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Winter 2000 | Volume 4, Number 3

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Errata

Editor's Note: It should be noted that in the article "Reaching for the Stars" in the last issue of *Early Developments*, the Rated License Assessment Project is administered by the Department of Human Development and Family Studies at the University of North Carolina at Greensboro, with FPG one of seven subcontractors. The article focused on FPG's work.

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From the Director
Don Bailey

Our Core Values

THE MISSION of the Frank Porter Graham Child Development Center is to cultivate and share the knowledge necessary to enhance child development and family well being. To accomplish this mission, we hold five central values:

1. All children have a right to a safe, healthy, and developmentally stimulating childhood.
2. Research is our primary mechanism for developing the knowledge to enhance child development and family well being.
3. Improving practices and policies are essential components of our work.
4. A high standard of integrity is the benchmark of our work.
5. A collegial, diverse, and supportive environment is essential to achieving our mission.

Earlier this year, we concluded the first phase of a major strategic planning effort for FPG. Among the outcomes of that planning was a statement of our core values, shown above in shortened form.

Another outcome of this planning was the crafting of a vision statement for the center's outreach mission. Here is a synopsis of that vision:

- We make our work accessible to the public, professions, the university and each other.
- We provide technical assistance and teaching in our areas of expertise to the public, professions, the university and each other.
- We commit time to the public, professions, the university and the center.
- We seek input from constituents, use this information to shape our work when we can, and respond to constituents' needs when possible.
- We evaluate our outreach efforts.

In this issue of *Early Developments*, we highlight projects that show the relationships between research and our outreach vision. Of course, outreach has been part of the center's history since it began in 1966. Over the years, many projects have had outreach components, providing technical assistance, model programs, materials for the field, and so forth. Many of these outreach efforts have been the work of one investigator or a group of investigators linked via a project.

Today, we begin a more holistic approach to outreach. How can we as a center better serve the needs of the field and the public? What broader partnerships can be created to help meet our outreach efforts? How can technology enhance our outreach mission? How can the center as a whole better support our investigators in outreach work?

Inside this issue, you will find not only some our latest research, but also projects that are good examples of how we are fulfilling our outreach vision. ed

Improving Outreach Taking outreach to the next level of excellence

MANY PEOPLE THINK of FPG as primarily a research center. Certainly research is at the heart of our mission. One of our core values is to conduct the best research possible to develop the knowledge that we need to enhance child development and family well being.

But knowledge alone is not enough. Research organizations that focus on issues of fundamental human concern, such as the well being of children and families, have a responsibility to share that knowledge with others in order to improve practice. We also have a responsibility to learn from practitioners and parents so that our research efforts can be better informed.

Terms such as "outreach," "consultation," "technical assistance," or just plain "TA" have become so much a part of the jargon and history at Frank Porter Graham that we often assume that everyone knows exactly what we are talking about. By these terms we refer to the processes by which our center helps individuals and organizations learn new information, improve practice, comply with regulations, or accomplish goals.

Fortunately, outreach became a core feature of the center's activity early in its history. In 1968, the Bureau of Education for the Handicapped (now the Office of Special Education Programs in the U.S. Department of Education) began to create a national network of projects designed to demonstrate how early intervention services could be provided for infants and preschoolers with disabilities.

As these projects emerged, it became apparent that many needed help in different aspects of their work. Some needed assistance with curriculum development, others with evaluation, and others with public awareness. As a result, in 1972 FPG was awarded a grant for TADS, the Technical Assistance Development System, under the direction of Dr. David Lillie. The mission of TADS was to provide support and assistance to these projects (130 at the time, now more than 700) in whatever aspect of help was needed.

This was quite a challenge. How can one organization possibly have the expertise to help any project with any need? In hindsight, however, this project set the stage for a new vision of outreach, one that still influences our work today.

The old view of outreach assumes that there is an EXPERT who knows the answer to lots of important questions. The EXPERT'S job is to make sure that people who need this information (the CLIENTS) get it and use it.

Unfortunately, the expert model didn't work very well in many cases. Often the expert really did not have the needed information. And when he or she did, that information might not have been conveyed in a way that was acceptable or useful to clients.

So TADS took a new approach, with several key components. A needs assessment was essential to any outreach endeavor, with needs preferably being identified by the project staff themselves. A plan followed, agreed upon by both the project and the technical assistance coordinator. Then it became the responsibility of both the local project and the TA project to locate the expertise or resources necessary to meet the identified needs.

This process has worked so well that the project has been continuously funded for 28 years. Now known as NECTAS (the National Early Childhood Technical Assistance System), this project provides technical assistance to all 50 states and territories in implementing federal legislation for young children with disabilities.

Since then we have had many other examples of outreach efforts. Our child care program has served as a demonstration for high quality child care practices, and thousands of visitors and student trainees have visited or trained in the center since 1966.

A wide range of curriculum and assessment materials has been developed for use by teachers and program administrators. We have developed case study materials to help professionals deal with complex situations in uncertain environments.

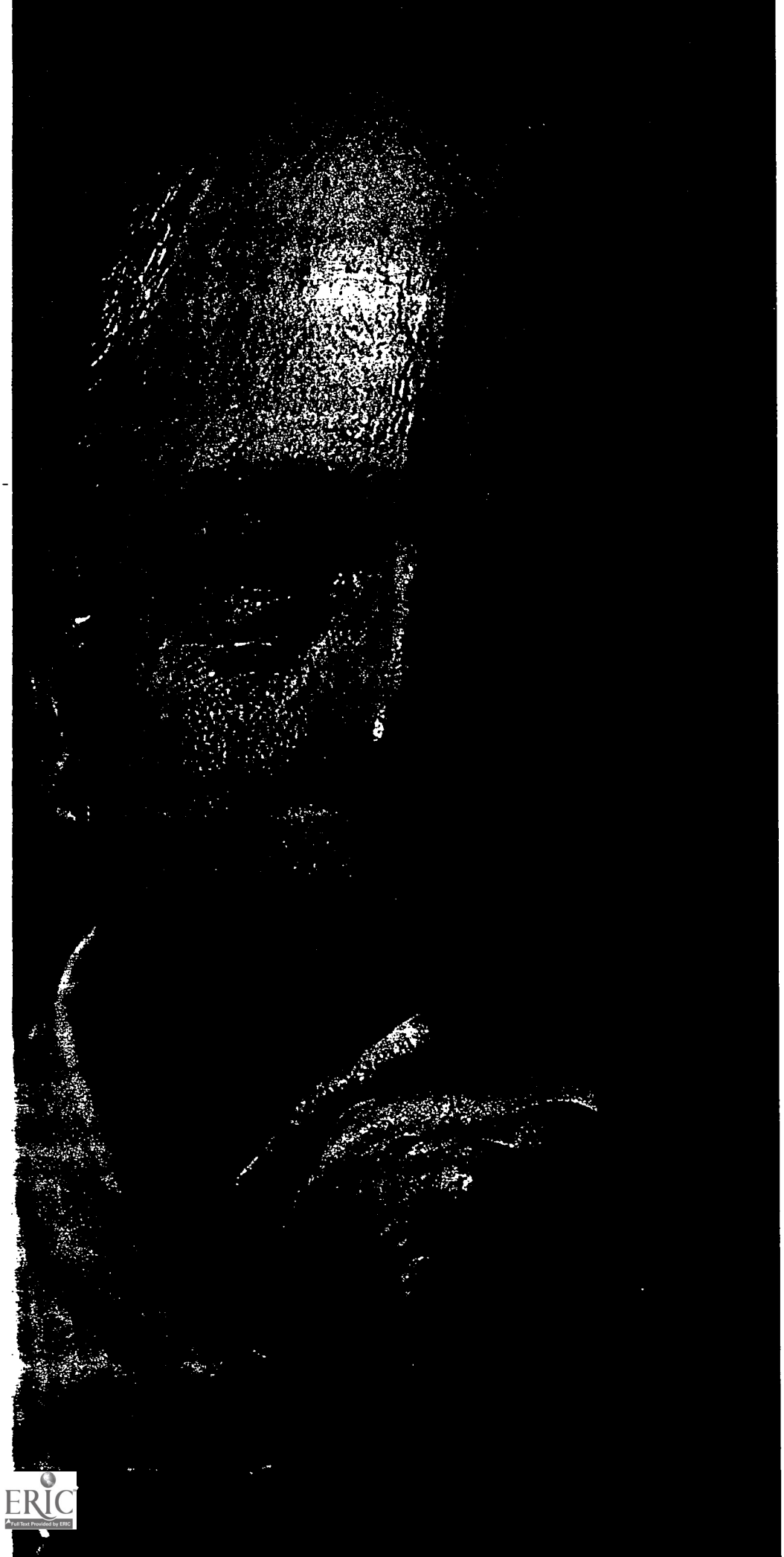
We help university faculty change the ways they teach and the content of their coursework. For example, we recently received a grant from the U.S. Department of Education to help university programs around the nation better prepare professionals to work with infants with vision impairments or blindness.

A parent leadership development project helps parents of children with disabilities gain the skills and confidence to take on leadership roles at the state and local level.

Our publications and dissemination office helps with the visual design side of dissemination, including the graphic design of print materials and slides. In recent years, the center has created a popular web site and has launched this national magazine, *Early Developments*.

All of this work has been important and we hope helpful to the field. However, almost all of this work thus far has relied on individual initiatives by center investigators.

Last year we began to think more broadly. We began by creating a strategic planning group that was primarily comprised of individuals outside the center. This group was positive about our outreach efforts,



by Don Bailey

but recommended that we consider establishing a central outreach office and to identify, as a center, what are the most important outreach needs of the field.

With funding from the Z. Smith Reynolds Foundation, we have created a new position, director of outreach. We want the outreach director to look outside the center and examine the needs of the field, see who our potential audiences are, and analyze the various ways in which we could expand our outreach efforts.

One issue facing the new outreach director will be how to provide enduring support for the center's outreach activities. Most of our projects are time-limited in their funding or designed for specific audiences.

Once funding ends, we often don't have the resources to continue. We want the outreach director to help find ways to continue to support outreach efforts beyond the funding periods of specific projects. This will require working with our newly established development office in fund-raising related to outreach.

A recent report on the state of early childhood teaching says that even if we did not generate any new knowledge about children over the next decade, we would have a full agenda in just getting current knowledge to be applied in making policies and implementing programs.

Research and outreach are both essential functions of a center such as FPG. We are committed to expanding our outreach role and making it even more responsive to the needs of the field over the next 10 years.

[see page 7 for more about outreach at FPG]

Committing Time to the Public and Professions

"SCIENCE IS AN IDEAL BASE TO RECOGNIZE AND CULTIVATE POTENTIAL BECAUSE THROUGH HANDS-ON ACTIVITIES CHILDREN CAN DEMONSTRATE THEIR THINKING AND PROBLEM-SOLVING ABILITIES AND IT PROVIDES A HIGH-INTEREST BASE TO INTEGRATE READING, MATH, WRITING AND THE ARTS. SCIENCE IS IDEALLY SUITED FOR OBSERVING POTENTIAL BECAUSE IT IS NOT HEAVILY DEPENDENT ON EARLY LANGUAGE EXPERIENCES."

– MARY RUTH COLEMAN

Mary Ruth Coleman

SHE SETS ASIDE A DAY A WEEK FOR OUTREACH She's president of The Association of the Gifted (a division of the Council for Exceptional Children). She's on the editorial/review boards of five national trade journals. She's on three national committees. She meets from time to time with staff members of congressional legislators to discuss pending educational issues. Her research includes directing a science-based model for recognizing and nuturing K-2 students with hidden potential in poor and diverse communities.

While the time that Mary Ruth Coleman commits to the public and the professions (it adds up to more than a day a week) may be unusually high for a researcher at the Frank Porter Graham Center, it is by no means rare.

Much of Coleman's national work involves teachers who work with gifted children and with children with exceptional learning needs. For example, she's on the Knowledge and Skills Committee that sets the professional standards used by the National Council for Accreditation of Teacher Education and the Interstate New Teacher Assessment and Support Consortium to review and accredit institutes of higher education that prepare teachers to work with children with exceptionalities.

Another committee that she's on is revising the standards for gifted education. And she's on the National Association for the Gifted Legislative Committee. She said, "This year has been really exciting because for the first time ever, we have federal legislation addressing, identifying and serving gifted and talented students."

Her commitment to helping others is reflected in her research. One of her projects is U-STARS (Using Science Talents and Abilities to Recognize Students). "The search for hidden talent has become one of the most important educational objectives in the last decade. The limited number of children from economically disadvantaged and culturally diverse families found in programs for gifted students across the nation is proof that there is something seriously amiss in the identification and nurturing of exceptional talent," she said.

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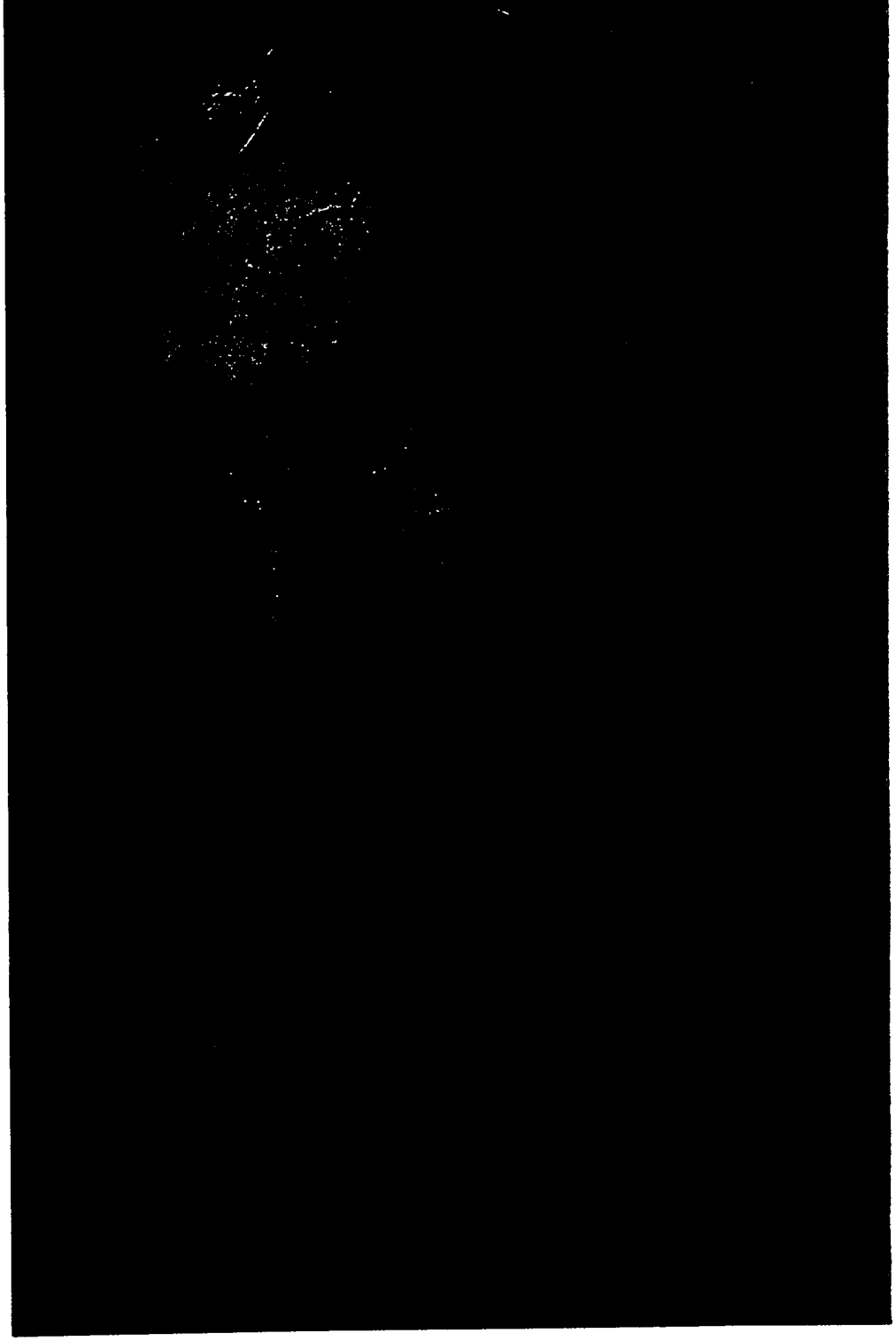
Jim Gallagher

"MUCH OF WHAT WE THINK OF NOW AS STANDARD ACCEPTABLE SYSTEMS OF SERVICES, PRACTICES, AND EXPECTATIONS FOR ACCOMPLISHMENT IN SPECIAL EDUCATION AND EDUCATION OF THE GIFTED HAVE THEIR ORIGIN IN RESEARCH, LEADERSHIP, AND ADVOCACY BY JAMES GALLAGHER."

– CITATION FROM THE WALKER AWARD



OVER THE YEARS, one of the most visible FPG researchers has been James Gallagher, who also directed the center for a decade. Recently he received the Razor Walker Award for service from the Watson School of Education at UNC-Wilmington.

The Walker Award is considered one of the state's most prestigious and unique service awards. It is presented to "those who have, through personal commitment and tenacity, made a significant impact on the lives of our young people." The awards are so named to honor individuals who have "walked the razor's edge" by taking risks to benefit children and youth in NC.

The citation for Gallagher reads, in part, "Much of what we think of now as standard acceptable systems of services, practices, and expectations for accomplishment in special education and education of the gifted have their origin in research, leadership, and advocacy by James Gallagher."

In the 1960s, he was the first director of the-then Bureau of Education for the Handicapped and deputy assistant secretary for planning, research and evaluation in the US Office of Education.

The citation said that he "helped to establish a national agenda to grant special educational rights to gifted children and individuals with disabilities. With a three-pronged approach working directly with federal agencies and providing technical assistance and training to states and local projects, he led efforts to adopt and implement policy and service initiatives at the national, state and local levels."

Gallagher recently received a "paper of the year" award from the Gifted Child Quarterly published by the National Association of Gifted Children, Washington, DC. He is also on a national advisory committee that is examining educational opportunities for gifted and talented youth in the US.

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"THE INVITATION TO BE ON NATIONAL BOARDS COMES BECAUSE THEY WANT MY PROFESSIONAL EXPERTISE AND HELP WITH THEIR WORK. IF IT'S A GRANT-FUNDED EFFORT, IT HELPS THEM (AND IT HELPS US) TO WORK TOGETHER, SHARING KNOWLEDGE IN THE SAME AREAS OF INTEREST BUT REFLECTING DIFFERENT EXPERIENCES AND APPROACHES."

– PAM WINTON

Pam Winton

PAM WINTON SERVES on three local boards, five state boards and 12 national committees, councils, or boards related to her areas of interest, which are personnel preparation in early childhood intervention, family-professional collaboration and disability/inclusion.

She said, "The invitation to be on national boards comes because they want my professional expertise and help with their work. If it's a grant-funded effort, it helps them (and it helps us) to work together, sharing knowledge in the same areas of interest but reflecting different experiences and approaches."

Winton said that her membership on several of the local and state boards came about "because of relationships in the community around advocacy. These new joint ventures are valuable exchanges for both sides," she said. She organized and chairs the Constituents Advisory Board for the National Center for Early Development & Learning at FPG.

"As FPG moves into our new outreach mode whereby we invite more constituents to advise us, it is important to recognize the reciprocal nature of these relationships," she said.

About the many presentations she makes and other programs she participates in annually, Winton said, "I view these as part of my responsibilities to the field. Many of the invitations are from people with whom I have worked. I feel it is part of the dissemination and follow-up work associated with grants that fund my position."

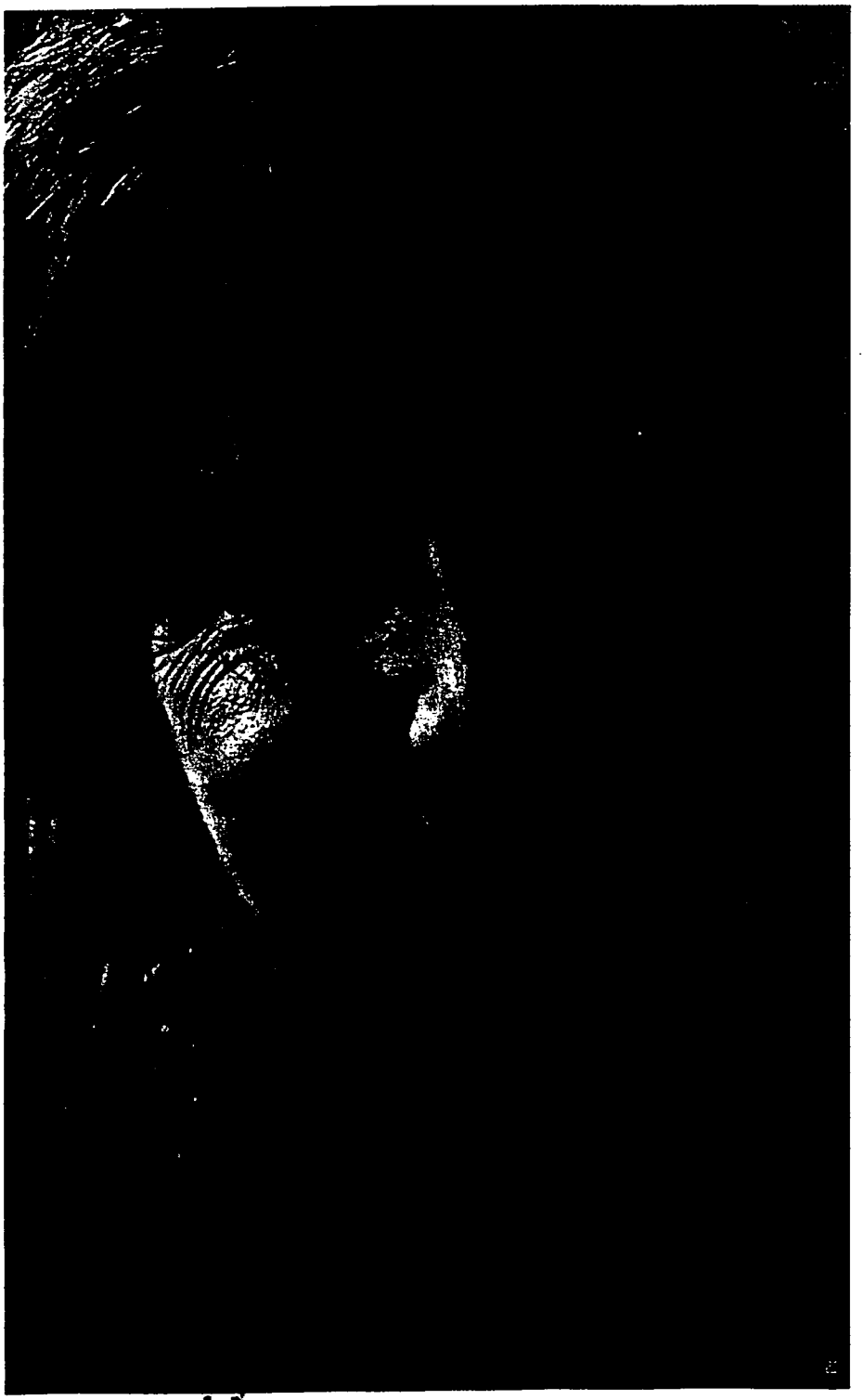
If you want to know more

USTARS **www.fpg.unc.edu/~USTARS**

NCATE **www.ncate.org**

INTASC: **<http://education.uindy.edu/intasc.html**

Constituents Advisory Board at NCEDL
www.fpg.unc.edu/~ncedl/PAGES/constit.html



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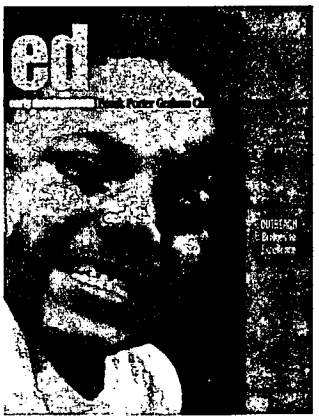
Outreach Publications and Projects at Frank Porter Graham

For more information on any of the publications shown on this page, please contact us at **www.pubs@mail.fpg.unc.edu**



Early Developments (magazine)
Target Audience: Administrators, Educators, Policymakers, Families, Researchers, Practitioners

NECTAS

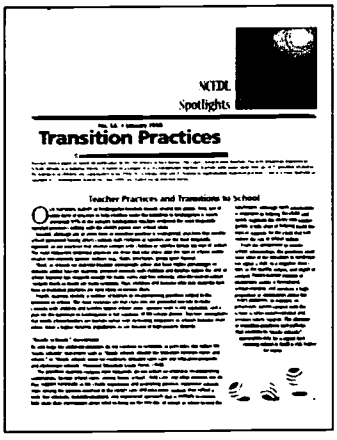
The largest outreach project at FPG is the National Early Childhood Technical Assistance System (NECTAS), which provides responsive technical assistance to programs supported under the Individuals with Disabilities Education Act (IDEA). These include programs designed for infants and toddlers with disabilities (Part C of IDEA) and for preschoolers with disabilities (Section 619-Part B of IDEA) in all states and participating jurisdictions.

Last year, NECTAS delivered 7,500 client-centered services. The NECTAS consortium includes Zero to Three, the National Association of State Directors of Special Education, Georgetown University Child Development Center, the Federation for Children with Special Needs, and the Center on Disability Studies at the University of Hawaii at Manoa.

Partnerships for Inclusion

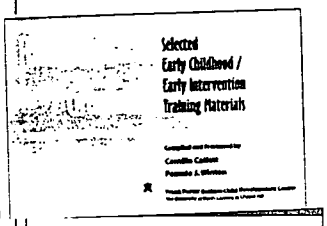
(PFI) provides a variety of technical assistance activities to NC communities to develop and improve inclusive services to young children with disabilities and their families. Services include training, product development, referral and resource linking, and consultation to local agencies.

Last year, PFI held 162 events with about 4,000 parents and professional participants across North Carolina. Training ranged from bilingual child development workshops to on-site consultation.



Spotlights (research summaries)
Target Audience: Administrators, Educators, Policymakers, Professionals

All Together Now (magazine)
Target Audience: NC Early Childhood Educators, Interventionists, and Families



Selected Early Intervention Training Materials (Resource Guide)
Target Audience: Legislators, Administrators, Funding Agencies

ECERS-R, FDCRS (assessment scales)
Target Audience: Evaluators, Administrators, Consultants, Child Care Providers

NEW SCRIPTS

NEW SCRIPTS is one in a series of projects aimed at producing long-lasting and meaningful changes in university training programs. Core values of the project include commitments to building on existing personnel resources and expertise, interprofessional participation, family-centered, and team-based ecological approaches that include administrators, faculty, families and practitioners in personnel development. NEW SCRIPTS has expanded the model developed in early projects by focusing on diversity and community college participation.

Smart Start (brochure)
Target Audience: Administrators, Professionals, Faculty, Families

ENewsletter (on the web)
Target Audience: Administrators, Media, Policymakers, Professionals

Press releases
Target Audience:Public

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Bridging the Gap between Theory and Practice

How would you handle these?

A home-based interventionist arrives at an inner-city apartment and discovers that the young mother she was supposed to visit is out and has left her baby in the care of a 6-year-old girl.

An early interventionist is shocked when the mother of a 12-month-old with anencephaly announces that they have decided to institutionalize the baby and forfeit parental custody.

What should these interventionists do next?

ANALYZING AND DISCUSSING dilemmas based on real life situations can be a powerful bridge between theory and practice, and this is what the Case Method of Instruction (CMI) is all about.

"It's important to know theory, facts and skills, but only insofar as someone can use those in problem-solving and decision-making when confronted with real-life situations," said P.J. McWilliam, co-director of the CMI-Outreach Project at FPG.

In CMI, trainees are presented with narrative descriptions of situations that practitioners are likely to encounter. These case stories present a dilemma from the point of view of a practitioner or group of practi-tioners and, in the end, the situation is left unresolved. Just like real life, the situations are complicated with many factors contributing to the dilemma. There's no one obvious solution but, rather, several alternative ones.

In disseminating their work, the CMI project team has gone beyond the expectations of its funding agencies to create a web site that includes more than two dozen case story narratives as well as role-plays and team simulation activities. The web site also offers tools for incorporating these stories into teaching and other aids such as general teaching tips for using CMI. Also, McWilliam has this year published *Lives in Progress: Case Stories in Early Intervention* with an accompanying instructor's manual.

Don Bailey, director of FPG, said the CMI project is an "excellent example of one of our projects that offers much more to instructors than just information. It's a way of helping people make the kinds of complicated decisions they face every day, for which there are no easy answers."

CMI trainees are taught to sort through the facts of a situation, identify the issues or problems, analyze various factors contributing to the problems, and to use sound judgment in deciding upon a course of action. During discussions, the instructor creates an atmosphere of suspended judgment, encourages independent problem-solving and keeps the discussion going without becoming involved in the actual problem-solving.

"IT'S VERY REWARDING TO WORK WITH INSTRUCTORS AND TO WATCH THEM TAKE THE RISK OF TRYING OUT THIS VERY DIFFERENT METHOD OF TEACHING. IT'S EVEN MORE REWARDING TO HEAR FROM THEM A FEW MONTHS AFTER THEY HAVE PARTICIPATED IN THE WORKSHOP AND HAVE TRIED THE METHOD WITH THEIR OWN STUDENTS OR TRAINEES. 'BECAUSE IT IS ONLY THEN THAT INSTRUCTORS COME TO TRULY UNDERSTAND THE IMPORTANT BENEFITS OF CMI."

- RESEARCHER P.J. MCWILLIAM

According to McWilliam, "CMI requires instructional skills and a philosophy of teaching that are quite different from traditional methods of teaching." Because of this, the project provides intensive three-day workshops for university faculty as well as individuals responsible for inservice education.

Instructors in Louisiana, Kentucky, Georgia, Iowa, Delaware, and West Virginia have already attended workshops or will do so over the coming year. Instructors include representatives from early childhood special education, early childhood education, social work, psychology, nursing, and the allied health professions. After the training, ongoing support helps instructors incorporate CMI into their own training of early interventionists. Plus, a follow-up session is held about six months later.

"Our long-range plan," explained McWilliam, "is that project-trained instructors will teach other instructors in their home state about CMI and we will provide supports for their teaching."

She and co-director Pat Snyder of Louisiana State University Health Sciences Center, who have worked together in promoting and evaluating the case method for nearly a decade now, conduct all of the project's workshops.

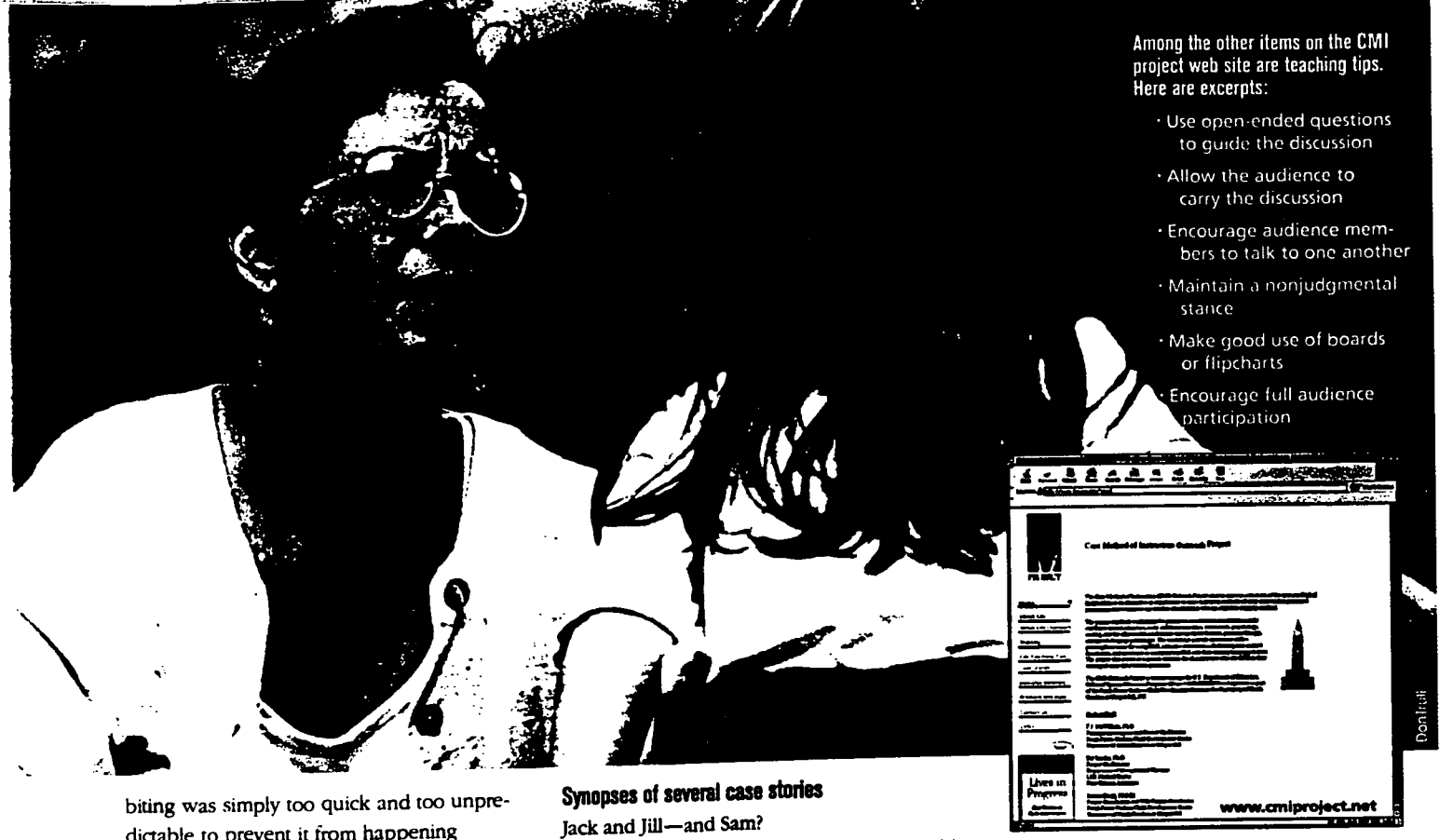
One of the case stories on the CMI website

Pink Slip (abridged)

"What is it about children's biting that pushes people's buttons so?" wonders Stacy, as she contemplates the current situation in her classroom of two-year-olds. One of the toddlers in her class, Carly, started biting the other children about two months ago. At one point, Stacy had thought the problem was resolved but, then, Carly started biting again. And yesterday, Carly bit the wrong child-Michael. Michael's mother was outraged.

She blames Stacy for not protecting her son from Carly's assaults and now she is out for blood. She has told Stacy that Carly should be dismissed from the child care and has threatened to sue Carly's parents if she ever bites Michael again. Michael's mother isn't the only parent who feels this way. Another mother has also voiced her concerns to Stacy and suggested that Carly be dismissed.

Stacy thinks the parents are overreacting and doesn't feel as though it's right that she, alone, be held respon-sible. After all, wasn't she already doing everything she could to stop Carly's biting? It just wasn't easy. Carly's



Among the other items on the CMI project web site are teaching tips. Here are excerpts:

- Use open-ended questions to guide the discussion
- Allow the audience to carry the discussion
- Encourage audience members to talk to one another
- Maintain a nonjudgmental stance
- Make good use of boards or flipcharts
- Encourage full audience participation

Don Irell

biting was simply too quick and too unpredictable to prevent it from happening completely.

Each case story has a series of questions to kick-start discussions. For example, here are several of the more advanced discussion questions about the "Pink Slip" story:

- In the story, Stacy asks herself why it is that parents react more emotionally to children's biting than to other forms of aggression. Is this true? If so, how would you answer her question?
- Not only are other parents complaining, some are also suggesting that Carly be dismissed from the child care. Is this a fair request? Could Stacy have done anything differently to avoid having the situation escalate to this point?
- The story includes a brief description of one incident involving Carly's biting. What clues does this incident have to offer about the reasons for Carly's biting?
- What additional or alternative strategies, if any, does Stacy have for handling Carly's biting? Which of these would you choose and why?
- Is there anything that Stacy could do to defuse the situation involving the parents of other children in the classroom?
- To what extent should Carly's mother be involved in developing and implementing plans to stop Carly's biting?

Synopses of several case stories

Jack and Jill—and Sam?

Sam's mother, desperate for summer child care, enrolled him at Jack and Jill Child Care Center without explaining the extent of his special needs. His persistent misbehavior was infuriating to the staff, and serious consideration was being given to dismissing him from the program. This story describes the efforts of a consultant, Monica, to assist the child care staff and support Sam's inclusion in this less-than-perfect integrated setting.

Supermom

Wilson Jordan is a 10-month-old who has Down syndrome. With the exception of frequent ear infections and a mild heart defect, Wilson is doing quite well. Wilson's mother, Ellen Jordan, concerns the early intervention professional more than Wilson himself. Ellen seems so intent on making Wilson "normal" that she doesn't appear to enjoy the little boy behind the Down syndrome. Ellen knows everything there is to know about Down syndrome and all that goes with it. She has therapists coming to their home as often as possible and now, she is talking about cosmetic surgery, weight control, and computers.

Close to Home

The last few months have often seemed like a nightmare for Bill and Carla Johnson. Their five-month-old daughter, Elizabeth, was born with a chromosomal abnormality that usually results in death before two. Elizabeth has severe developmental delays and has spent much of her short life in the hospital. The case describes a visit that therapist Linda Cummings makes the day before Elizabeth is due for another surgery. Linda is made aware that Carla's feelings about the child are not necessarily shared by her husband, Bill. This case also touches upon the sometimes-inevitable effects of the professionals' personal lives on their work with children and families and vice versa.

If you want to know more

CMI web site:
www.cmiproject.net

McWilliam, P.J. (2000). *Instructor's guide for lives in progress*. Baltimore, MD: Paul H. Brookes.

McWilliam, P.J. (2000). *Lives in progress: Case stories in early intervention*. Baltimore, MD: Paul H. Brookes.

Snyder, P., & McWilliam, P. J. (1999). Evaluating the efficacy of case method instruction: Findings from preservice training in family-centered care. *Journal of Early Intervention*, 22, 114-125.

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Parents Take the Lead: seeking input from constituents

Parent Leadership Development Project

"ABSOLUTELY! WHY WOULD YOU MAKE POLICIES WITHOUT CONSULTING THE PEOPLE WHO ARE MOST AFFECTED BY IT? THAT JUST DOESN'T SEEM VERY LOGICAL!"

– TAMMY ARNOLD
PLD PROJECT PARTICIPANT

AN EARLY CHILDHOOD TEACHER in Pembroke, NC, said, "I joined the parent leadership program because I felt this type of information would be of value for me to share with service providers as well as with students."

Parents of a child with disabilities in Kings Mountain, NC, said, "We wanted to do more than what we had been doing, and we wanted to learn how to help others, too."

A woman who lives in Marion, NC, said, "I thought this would be a good opportunity to learn new ways to help me be a more effective voice in the community."

These are the voices of some of those taking part in one of the newest projects at the Frank Porter Graham Child Development Center (FPG) and one that is creating a model to increase family involvement and empowerment in early childhood arenas. The Parent Leadership Development Project (PLD) offers training and support to parents who want to develop their leadership skills. Many will go on to assume a variety of advocacy and advisory roles with state and local agencies and organizations in North Carolina.

The project builds on a growing body of research showing the benefits of involving parents and other family members in all aspects of planning, delivering, and evaluating early education and intervention services. "Developing strong parent-professional alliances is a critical first step in improving the quality and cultural responsiveness of services to children and families," explained FPG Researcher Pat Wesley, co-principal investigator of PLD.

FPG Director Don Bailey said, "This is one of our projects in which seeking input from constituents is more than just a byword; it is critical to the investigators' work. Our project staff interview parents about their leadership ideas and work with them to make sure the

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training they receive through the project meets their needs."

PLD has recruited 72 parents and other family members of children with disabilities interested in working with professionals to improve services to children and families. These parents are receiving intensive training, including follow-up activities to develop communication, collaboration, and presentation skills while they learn about the early care and intervention systems. Project participants represent diversity of culture, language, family constellations (single parents, teenage parents, foster parents, grandparents) and socioeconomic resources.

Parents will then be linked to institutions of higher learning and organizations and agencies that provide early education, early intervention, and family support services.

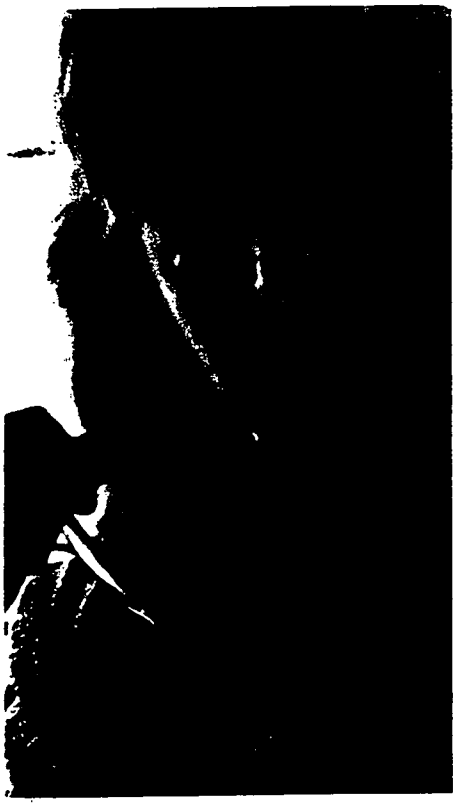
Tammy Arnold, who lives in Marion and has two children with disabilities, said that although she was already involved in community activities, she wanted to know even more. So she signed up for the parent leadership project. One of the particularly useful aspects of the training, she said, is that it is especially for parents. "Most of the things I had previously been involved in were directed at professionals, but parents were invited. It was really nice to have something specifically designed for parents."

Tammy is the community resource coordinator for a family resource program in Marion. It is staffed by employees of the Family Infant and Preschool Program (FIPP). "FIPP is the lead agency for providing the early intervention in the area, but our resource program is for ALL families."

[Story continued on page 12]

"DEVELOPING STRONG PARENT-PROFESSIONAL ALLIANCES IS A CRITICAL FIRST STEP IN IMPROVING THE QUALITY AND CULTURAL RESPONSIVENESS OF SERVICES TO CHILDREN AND FAMILIES."

- RESEARCHER PAT WESLEY



Features of the PLD model

- A series of leadership retreats for parents focusing on information about early care and intervention systems to increase parent leadership skills
- Follow-up activities with parents as they implement action plans to expand their partnerships with professionals
- Production of a Parent Leadership Directory, a Facilitator's Guide to Parent Leadership Development, and a videotape about parent leadership roles
- Support to professional organizations, programs, and agencies across North Carolina as they address their goals to increase parent representation and involvement
- A comprehensive program evaluation and dissemination of findings to a wide audience

New study shows challenges of parental involvement

Smart Start provides children under age six access to high-quality and affordable childcare, health care and other family services. A new study reveals the challenge of involving parents in Smart Start board decision-making. Smart Start is a public-private initiative to help North Carolina children enter school healthy and ready to succeed.

Among the study findings were these

- The "interested public" views parents as important and qualified to make decisions about how Smart Start money is spent, but not involved and not having influence compared to other stakeholder groups.
- Challenges to parent involvement, cited by local Smart Start administrators, include:
  - Recruiting and retaining parents on local boards
  - Defining the role of parents on boards
- Three major factors affect how meaningfully parents are involved in board activities: structure, logistics, and climate. In terms of climate, a prominent theme in survey interviews was that some parents on boards feel intimidated.
- Boards are actively addressing some of these factors; however, factors such as climate are not defined in the same way by everyone.
- These factors (structure, logistics and climate) are more likely to be described as impediments rather than supports, which validates the fact that parent involvement on boards is a major challenge.
- Smart Start boards identified as being successful in involving parents on boards are
  - sensitive to power and equity issues and embed such considerations in all board activities, according to board members.
  - make board decision via a consensus decision-making process versus a more formal and structured majority rule (e.g., *Robert's Rules of Order*).
  - acknowledge that meaningfully involving parents on boards is a continual struggle.

This study is funded by the National Center for Early Development & Learning, also based at the University of North Carolina at Chapel Hill.

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[continued from page 11]

"FAMILIES SHOULD BE CONSIDERED ESSENTIAL ADVISORS IN PUBLIC POLICY, RESEARCH, PERSONNEL PREPARATION, AND PROGRAM DEVELOPMENT, AS WELL AS PARTNERS IN ALL ASPECTS OF THEIR CHILDREN'S CARE AND EDUCATION."

– RESEARCHER VIRGINIA BUYSSE

Parent Leadership Development Project

Tammy said she thinks there should be more family involvement in public policy, research, and program development.

Gwen Locklear, another program participant, works with child care providers in Robeson County and is also a part-time early childhood instructor at Robeson Community College. She said, "All of the [FPG] training that I have attended has been very informative, user-friendly, and productive."

She said, "I think that collaboration is a must in the child care industry with parents as advocates for quality child care. I hope more parents of children with disabilities will get involved and voice their concerns about issues that affect their child."

Locklear is also coordinator of the Robeson County Wage Enhancement Project, a salary supplement project for child care providers in the county who increase their educational background.

Although many professionals recognize the value of having families as consultants, advisors, and members of boards and committees, there are a number of barriers, according to Virginia Buysse.

- Logistical problems such as lack of transportation or difficulty in making child care arrangements and balancing family needs
- Administrative constraints
- Lack of money for parent reimbursement
- Parents' lack of knowledge or experience with leadership roles
- Limited opportunities and support for parents in these positions
- Inadequate representation of the full spectrum of families who participate in early intervention.

"Our assumption is that most early intervention professionals already understand the importance of collaborating with families, but lack effective strategies for putting this philosophy into practice," explained Pat Wesley.

Charles and Lucy Plyler of Kings Mountain joined the Parent Leadership project and praised the training: "The course was set up in a way that gave us a chance to use what we were learning as we were learning it."

Even before their training was complete the Plylers became key figures in starting a parent council in the school that their daughter attends.

Don Bailey said that another center under FPG's wings -the National Center for Early Development & Learning - has used a strong and active constituents advisory board for more than four years. "This board, whose members include parents, professionals, teachers & administrators, gives us excellent feedback about our outreach products, and also offers opinions to our investigators even as they begin planning a research project. This kind of interactive, responsible, and educated input from constituents is one of our most valuable resources.

Why involve families?

- Families are in the best position to judge how services are delivered and the extent to which services address their priorities and concerns.
- Families offer authentic experiences and fresh insights about their children, and may identify problems or inconsistencies in early care and intervention systems with which professionals have been accustomed.
- Family stories and perspectives help professionals make the connection between theory and practice.
- Families of young children with disabilities constantly are required to adapt, to find solutions among resources that are sometimes limited, and thus, their observations and ideas can be powerful tools for improving the quality of services.
- Families of young children envision an ideal system of early care and intervention services differently than professionals, and their view is not limited by bureaucratic tradition.

This Project is funded for three years by the US Department of Education, Office of Special Education Programs, with additional funding from the divisions of Women's and Children's Health and Early Intervention, NC Department of Health and Human Services.

If you want to know more

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Going the Extra Mile making research work accessible

PARTICIPANTS IN MCWILLIAM'S STUDY INCLUDED SPECIAL EDUCATORS, REGULAR EDUCATORS, FAMILIES OF CHILDREN WITH DISABILITIES, AND FAMILIES OF TYPICALLY DEVELOPING CHILDREN IN KINDERGARTEN THROUGH THIRD GRADE FROM 93 SCHOOLS ACROSS NORTH CAROLINA. A TOTAL OF 93 SPECIAL EDUCATORS, 72 REGULAR EDUCATORS, 111 THERAPISTS (SPEECH LANGUAGE, OCCUPATIONAL, AND PHYSICAL THERAPISTS), 89 FAMILIES OF CHILDREN WITH DISABILITIES, AND 56 FAMILIES OF TYPICALLY DEVELOPING CHILDREN FROM ELEMENTARY SCHOOLS WERE INVOLVED.

ROBIN MCWILLIAM
PRINCIPAL INVESTIGATOR
SCHOOL PRACTICES PROJECT

AFTER STUDYING INTERVENTION PRACTICES in the early elementary grades in North Carolina, investigators at FPG have created checklists to help families, professionals, school administrators and teachers.

"Our School Practices Project looked at three specific areas: family-centered practices, integrated and coordinated services and individualized and developmentally appropriate practices," said Robin McWilliam, principal investigator of the School Practices Project of the Early Childhood Follow-Through Research Institute. "As lists of barriers to implementing good practices were developed, we saw a need for something practical that could be easily understood. That led to the checklists."

These lists are designed for use by families, school personnel, and professionals who work with children with disabilities and their families. Each checklist is focused on a particular area. For example, one of the lists is "Family-Centered Intervention Planning: Family Preparation."

"This research team did more than just present data and analysis from their study; they went the extra mile to help constituents. They prepared the information in a highly readable format and made it readily available by posting it on our website. Checklists were created to help families, professionals and school personnel begin to lower some of the barriers to more quality services," said Mark Wolery, director of the Early Childhood Follow-Through Research Institute at FPG. The School Practices Project is one of a number of projects under the institute.

FPG Director Don Bailey said work such as this helps the center fulfill one aspect of its overall mission. "A value held by this center is that our work be accessible to the public and the professions. One critical aspect of this is that the work also be readily understandable and available."

Participants in McWilliam's study included special educators, regular educators, families of children with disabilities, and families of typically developing children in kindergarten through third grade from 93 schools across North Carolina. A total of 93 special educators, 72 regular educators, 111 therapists (speech-language, occupational, and physical therapists), 89 families of children with disabilities, and 56 families of typically developing children from elementary schools were involved.

Here are some of the study findings

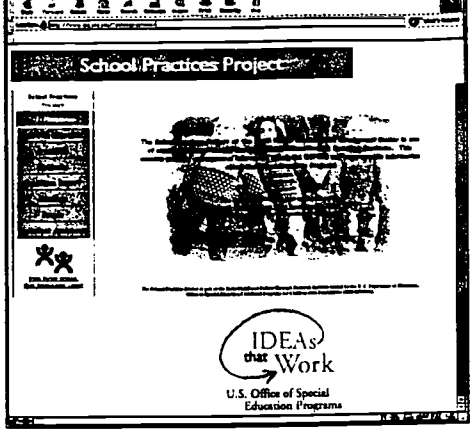
1. Family-centered practices
   - Families report less communication occurring than do school personnel.
   - All four groups (special educators, regular educators, families of children with disabilities, and families of children without disabilities) thought ideally that families and school personnel should work together more than they currently do.

2. Integrated and coordinated services
   - Regular educators, special educators and therapists agreed on their descriptions of current practices, reporting that services are moderately collaborative (average scores were around 3 on a 5-point scale).
   - Special educators, regular educators and therapists thought ideally that school professionals should collaborate and communicate more than they currently do.
   - Of the three disciplines surveyed, special educators had the highest ideals for how school personnel should work together.

3. Individualized and developmentally appropriate practices
   - Regular education teachers and teacher assistants thought ideally that classroom practices should be more individualized and developmentally appropriate than they currently are.

McWilliam said, "Solutions to these kinds of problems are complex, of course. Participants in the study cited barriers and made recommendations. In addition to that, we broke out a few easy things that could be done."

He said that although this study involved North Carolina schools and reflects the regional nature of



School Practices Project Homepage
www.fpg.unc.edu/~schoolpractices

A sample checklist: "Working Well With Families"

(Use this checklist to facilitate positive relationships among school personnel and families.)

When working with families, do you

- O 1. Treat families with the same respect you show friends?.
- O 2. Ask families if they are happy with how things are going at school?
- O 3. Listen to and acknowledge each person's concerns?
- O 4. Ask what you can do to help address these concerns?
- O 5. Put yourself in the family's shoes?
- O 6. Use clear, simple words?
- O 7. Give families choices about as many things as possible?
- O 8. Communicate frequently with families?
- O 9. Tell families the good things about their child (not just the bad)?
- O 10. Refrain from complaining to the families?
- O 11. Ask for families' input before making decisions that affect them (e.g., assigning homework that requires their help)?
- O 12. Invite families to be involved in school-wide decision making?
- O 13. Support families' decisions about their child?
- O 14. Look for and support the things that parents do well?
- O 15. Ask families to tell you about their child's strengths and needs? (This may be particularly useful at the beginning of the school year.)
- O 16. Show an interest in the whole family, not just the child?
- O 17. Respond to messages within a day?
- O 18. Thank the person for talking with you?
- O 19. Follow through with your assigned/ volunteered tasks?
- O 20. Convey to families a positive attitude about the parents?

the schools and services, checklists could still be used as general guidelines for other regions.

Checklists such as these created by the School Practices Project are some of dozens of products produced annually by FPG for many types of users. "When our investigators plan dissemination, they develop different products for different constituents," said Bailey. "For example, it would not be unusual for data from a study to be presented traditionally through an academic journal, but then also as one of our one-page *Spotlights* aimed at administrators and then perhaps included in an article in *All Together Now*, a FPG magazine that goes to upwards of 20,000 people involved in early intervention and education in North Carolina."

In addition, he said, dissemination through the public media, such as press conferences, is often used when data warrant it. An example is the national release of information last fall from the Carolina Abecedarian Study, one of the longest-running studies of its kind. A key finding from that study is that early childhood education significantly improves the scholastic success and educational attainments of poor children even into early adulthood, according to Investigator Frances Campbell.

One research project at FPG sends its findings to targeted constituents via an email-delivered newsletter.

Other partners in the School Practices Project are the University of Kentucky and the Orelena Hawks Puckett Institute in North Carolina. ed

If you want to know more

School Practices Project
www.fpg.unc.edu/~schoolpractices

McWilliam, R.A. (Ed.). (1996). *Rethinking pull-out services in early intervention: A professional resource.* Baltimore, MD: Paul H. Brookes.

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Brief description of checklists

Getting Your Foot in the Door: Strategies for Promoting Collaboration
Concrete ideas to promote more collaborative relationships between school professionals serving the same child.

Collaborative Consultation Meetings
A guide to joint problem-solving meetings. Reading the checklist items can help prepare educators for these meetings. Completing the checklist after a meeting can provide useful feedback about how participants promoted collaborative consultation during the meeting.

Family-Centered Intervention Planning: Routines-Based Interview
A guide to help school professionals through interviews with families and teachers and help identify strengths and needs of children within the home and school activities.

Family-Centered Intervention Planning: Interviewing Tips
Useful "dos and don'ts" for leading a family-centered planning meeting and keeping everyone focused on the task at hand.

Family-Centered Intervention Planning: Family Preparation
To help prepare families for family-centered intervention planning meetings.

Family-Centered Intervention Planning: Staff Preparation
To help prepare teachers for family-centered intervention planning meetings.

How to Recognize a Quality Classroom
An observation scale which emphasizes individualized and developmentally appropriate practices for use in kindergarten through third-grade general education classrooms that include children with special needs.

Working Well With Families
Use this checklist to facilitate positive relationships among school personnel and families.

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Directory of early childhood teacher prep programs available

"THE IMPORTANCE OF TEACHER EDUCATION AS A KEY FACTOR IN HIGH-QUALITY EARLY CHILDHOOD PROGRAMMING HAS BEEN WELL DOCUMENTED. STATE AND FEDERAL PROGRAMS ARE SLOWLY STRENGTHENING THEIR STAND-ARDS FOR STAFF. HEAD START HAS MANDATED THAT 50 PERCENT OF TEACHING STAFF MUST HAVE AN ASSOCIATE'S DEGREE BY 2003. THE DIRECTORY IS IMPORTANT BECAUSE IT PROVIDES A WAY FOR EARLY CHILDHOOD TEACHERS TO LOCATE COLLEGES AND UNIVERSITIES TO GET THEIR DEGREES."

- PAM WINTON

A NEW NATIONAL DIRECTORY of institutions that offer programs for early childhood teachers has been published by the National Center For Early Development & Learning (NCEDL), based at the University of North Carolina at Chapel Hill, and the Council for Professional Recognition (CDA), a nonprofit agency in Washington, DC. The data for the directory was gathered as part of a national survey conducted by NCEDL. This is the first such collaboration between NCEDL and CDA.

The National Directory of Early Childhood Teacher Preparation Institutions, which contains listings for nearly 1,400 two- and four-year colleges, is available on line at the CDA web site www.cdacouncil.org and in print from CDA.

The directory is organized alphabetically by state/jurisdiction, and then alphabetically by city. Each listing contains the name of the school, address, phone number, a contact person, email address (if provided), and the early childhood specialty area (i.e. infant/toddler, preschool, school-age, etc.). Information has been compiled also for institutions in Guam, Puerto Rico and the Virgin Islands.

Carol Brunson Day, director of the Council for Professional Recognition, said, "There has been a major increase in government attention to the needs of young children. At least 42 states have some sort of early childhood initiative underway, and schools are showing an increasing interest in serving children prior to kindergarten entry. Early childhood teacher preparation programs are playing an increasingly important role in ensuring that the stronger standards for early childhood teachers translate into a more competent, confident workforce, able to serve ALL young children."

She said that the directory also identifies institutions offering CDA training and distance-learning programs. Institutions that offer a CDA training program develop their curriculum independent of the council's participation or endorsement.

Day said that individuals choosing to study in these programs should ensure that the training meets the educational requirements stated in the Child Development Associate Assessment System and Competency Standards book.

Survey of Sample Programs

A phone survey of program chairs was also made of a sample of the early childhood teacher preparation programs. Pam Winton and Diane Early of NCEDL, who directed the survey, said highlights of the survey findings include these:

- Students graduating from bachelor's programs are most likely to teach in kindergarten and elementary settings, and students from associate's degree programs are most likely to work with infants, toddlers, and preschoolers.
- There are more early childhood programs offering associate's degrees (57 percent) than there are offering bachelor's degrees (40 percent.)
- The mission of most programs, whatever the degree, includes preparing future teachers to work with infants, toddlers, and preschoolers, preparing early interventionists, and providing training to the existing early childhood workforce. NCEDL

Sample listing from
North Carolina state section
ALBEMARLE
Stanly Community College
EARLY CHILDHOOD
141 COLLEGE DRIVE
ALBEMARLE, NC 28001
Contact: SARAH L. POTTER
Title: PROGRAM HEAD
Contact number: 704-982-0121x314
ECE program: 1 AND 2-YEAR
ECE Coursework:
INFANT TODDLER

Sample listing from
California state section
Santa Ana
Santa Ana College
HUMAN DEVELOPMENT
1530 WEST 17TH STREET
SANTA ANA, CA 93706
Contact:
GWEN MORGAN-BEAZELL
Title: CHAIR
Contact number:
714-564-6000x6810
Email Address:
ECE program: 2-YEAR
ECE Coursework:
INFANT-TODDLER
PRESCHOOL
SCHOOL-AGE
DISABILITIES
FAMILY CHILD CARE
DISTANCE LEARNING PROGRAM

If you want to know more

- The directory may be accessed at **www.cdacouncil.org**
- For information about buying printed copies which are $8 each, **call 1-800-424-4310.**
- National Center for Early Development & Learning: **www.ncedl.org**

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Winter 2000 | Volume 4 Number 3

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Early Developments is published three times a year by the Frank Porter Graham Child Development Center at The University of North Carolina at Chapel Hill. It is funded in part by The University of North Carolina at Chapel Hill and in part by PR/Award Number R307A60004, administered by the Office of Educational Research and Improvement, National Institute on Early Childhood Development and Education, US Department of Education. Contents of articles do not necessarily represent the positions of the U.S. Department of Education. Endorsement by the federal government should not be assumed.

8500 copies printed at a cost of $0.76 cop.

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EFF-089 (3/2000)

PS029142