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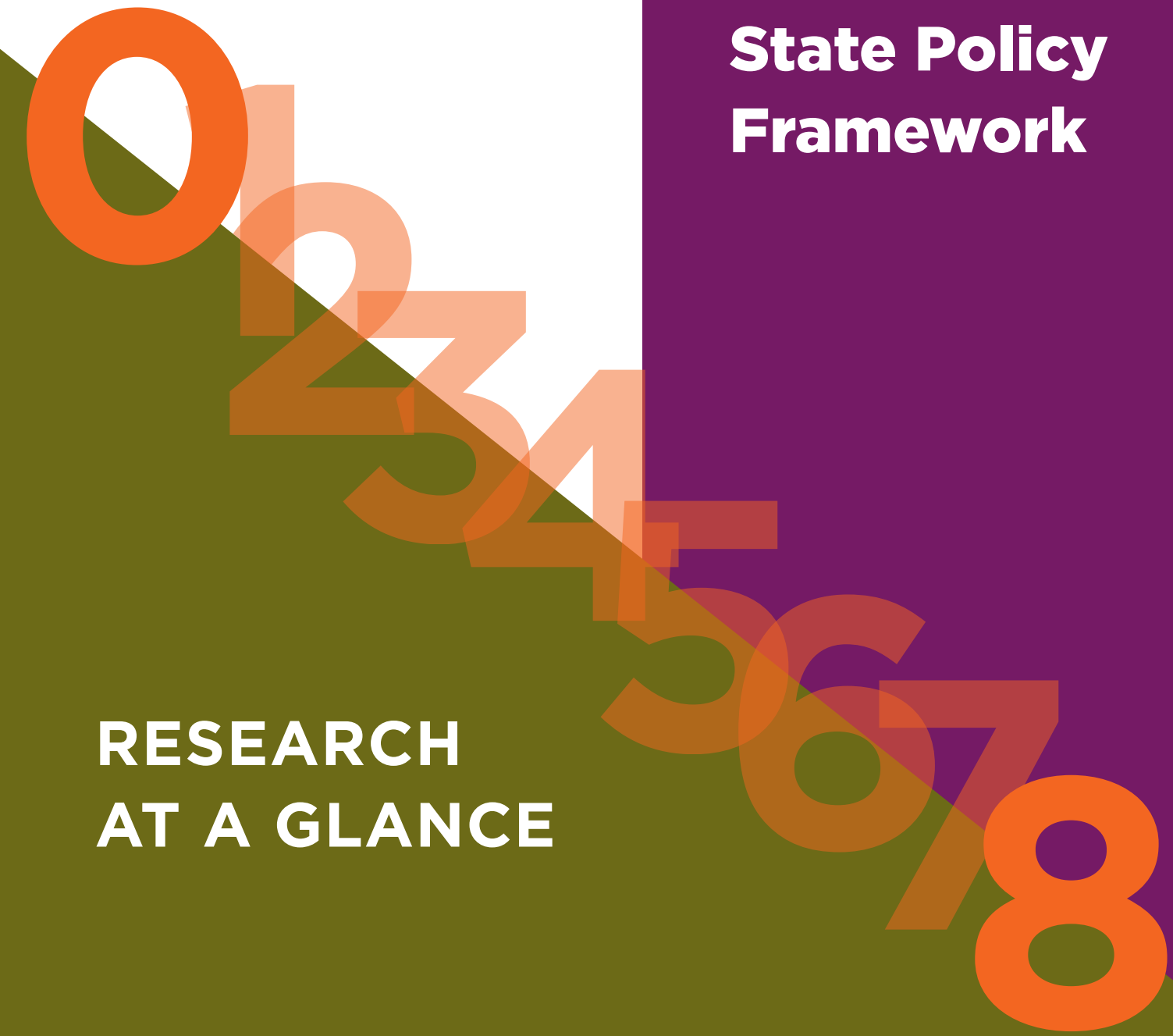

RESEARCH AT A GLANCE

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Research at a Glance: The Research Base for a Birth through Eight State Policy Framework – Revised[1] outlines the research that supports each of the policy areas in the recently revised Alliance for Early Success' Birth through Eight State Policy Framework. *Research at a Glance* provides an overview of the evidence base for the policy choices in the Framework, summarizing the factors that contribute to, and sustain, the healthy growth and development of young children. Research citations for each policy choice are organized at the end of this document and can be easily accessed by clicking the highlighted words in the policy choice statements.

Research at a Glance is a compendium to the revised Framework that highlights three important messages:

1. there is an evidence base for the policy areas and policy foundations identified in the Birth through Eight State Policy Framework;
2. the years starting at birth and continuing through age eight are critical for achieving good health, strong families, and better learning outcomes that are sustained later in life; and
3. the supports children receive, and experiences they have, have a cumulative effect—each experience influences the next and sustains the growth and development that came before.

OVERVIEW

Early experiences in childhood lay the foundation for later success. The relationships, environments, and supports that children experience have a profound impact on their development, because critical neurological and biological systems grow most rapidly in these earliest years. Throughout early childhood, from birth through age eight, children need early, consistent, high-quality supports to promote and sustain their developmental gains.

State policies can help build a strong foundation that puts young children, particularly vulnerable[2] young children, on a path to success. The Alliance for Early Success developed the Birth through Eight State Policy Framework (Framework) in 2013 as a tool, or roadmap, to inform decision-making and guide policy choices. The original Framework focused attention on what is critical within and across different aspects of early childhood development to address the physical, social, and cognitive needs of young children and families within various contexts. The Framework was the collective work of more than 150 experts, including leaders in the fields of early childhood and K-12 education, advocates, researchers, policymakers, and foundation officers. In 2015, the Alliance for Early Success revised the Framework to reflect the latest research and best practice evidence. The revised Framework emphasizes policy options in the areas of health, family support, and learning and augments the original Framework by providing a set of cross-cutting policy options that bridge these three areas.

1 See The Research Base for a Birth through Eight State Policy Framework, which is an expanded version of the Research at a Glance overview.

2 "Vulnerable" is defined as having one or more of the following risk factors, which increases the likelihood of poor health, learning, and economic outcomes: poverty, low parental education, single or teenage parent, homelessness, and high residential mobility.

POLICY AREAS: HEALTH, FAMILY SUPPORT, LEARNING, AND CROSS-CUTTING POLICIES

The revised Birth through Eight Policy Framework is informed by developmental science theory and research, which asserts that development is a dynamic, interactive process that is not predetermined, but occurs in the context of relationships, experiences, and environments. Children interact with their world in dynamic and active ways and thereby actively shape their own development with their unique characteristics, interests, and needs. Children's developmental trajectories are created over time through these transactions. Patterns of interacting with the world are built on the experiences children have, and each experience influences the next.

The period of birth through eight is a critical period for this dynamic interplay between individual growth and the contexts of development, which can include the internal, biological context of the child as well as the home, school, and community contexts; the cultural context; and even the local, state, or national policy context. Supporting children's growth and well-being within and across these important contexts during early childhood can ultimately lead to good health, strong families, and better learning outcomes that predict long-term health, high school graduation, and sustained success over time.[1]

Developmental research indicates that targeted and cross-cutting policies in health, family support, and learning during the critical years starting at birth and continuing through age eight can make a difference in children's life trajectories.

CROSS-CUTTING POLICIES AT THE INTERSECTION OF HEALTH, FAMILY SUPPORT, AND LEARNING

The domains of child development are interconnected. Children's experiences in the world influence their health, social competence, and cognition in an integrated way. Existing skills support the development of new skills. For example, physical and mental health and socio-emotional well-being provide the foundational conditions for building cognitive and language skills.[2] Policy approaches can acknowledge these interconnections by supporting cross-cutting services that address multiple skills and conditions.

While targeted policy approaches are necessary to ensure that families' unique and specific needs are met, cross-cutting policies address children's development across the contexts in which development occurs—families, the home, communities and early care and education settings—and the employment and economic conditions of their parents. Cross-cutting policies also recognize the multiple risk factors that some families encounter and the cumulative effect that stress can have on young children.[3] They emphasize the importance of prevention strategies as well as early detection and intervention strategies.[4]

Accountability systems that provide comprehensive data for tracking needs and outcomes should accompany cross-cutting and targeted policy approaches. And, policies and programs should be based in the tenets of implementation science that assert the importance of evidence-based program design, a trained and skilled workforce, strong leadership, and a process for planning for continuous improvement.[5].

CROSS-CUTTING POLICY STRATEGIES

1. Foster healthy environments

The neighborhoods and communities in which children live have a direct influence on their health and well-being. Policy strategies that promote safe housing, affordable and healthy food, and gainful employment can improve neighborhood conditions and promote better outcomes for families and children.[6] Families can thrive when they have access to places that facilitate networks of social relationships (i.e., social capital), promote learning, connect them to resources, and provide opportunities to engage in healthy behaviors such as exercise and reading.[7]

Policy strategies to foster healthy environments:

- Invest in places that build social capital, such as schools, libraries, community centers, and parks.
- Invest in safe, affordable housing.
- Support healthy and affordable food options in high-poverty neighborhoods.
- Incentivize economic development that brings living-wage jobs into neighborhoods where lack of opportunity brings all of the problems associated with unemployment and concentrated poverty.

2. Focus on prevention

Policy strategies focused on prevention provide support for children and families in three overarching ways. First, prevention policies are aimed at strengthening the skills of parents and caregivers and providing support to them—either directly in the home through home visiting programs or in their child's early care and education setting through family engagement services and activities.[8] Second, prevention policies emphasize improved connection and access to services that promote children and families' health, well-being, and financial security.[9] Third, prevention policies aim for early detection of potential developmental delays or of family conditions that may lead to abuse and neglect.[10] When strong systems are in place to bolster family strengths, reduce barriers to resources, and identify potential problems before they lead to more severe or dangerous conditions, children and families have multiple opportunities to be supported.[11]

Policy strategies to focus on prevention:

- Direct funding to programs addressing adverse early experiences and sources of toxic stress.
- Invest in family engagement strategies that value parents as experts in their children's development.
- Promote comprehensive screening and early detection of developmental delays and link to referral, care coordination, and intervention.
- Expand access to voluntary, effective home visiting programs and services for new and expectant parents that model relationship building, engage parents in their child's learning, and refer for additional supports as needed.
- Adopt policies that support flexible work schedules for parents.
- Support paid family leave and work exemptions that foster nurturing relationships and responsive caregiving, build parental resilience, and provide security for children.

- Invest in strategies that address the behavioral and mental health of children and the adults who care for them.
- Co-locate or coordinate services.
- Reduce barriers to participation in public benefit programs (e.g., TANF, Head Start, child care subsidy, SNAP and WIC, Medicaid/CHIP, and the EITC) with universal on-line applications and aligned eligibility and enrollment policies.
- Employ navigators, centralize referral resources, and invest in hub strategies that integrate supports for parents and children in settings where families are.
- Connect education and job training opportunities for parents with access to high quality early learning for their children.
- Connect learning environments to health and family support networks.
- Coordinate income support programs to minimize "cliff effects" that occur when a small increase in wages leads to a substantial decrease in benefits.

3. Promote accountability and continuous improvement

Accountability systems across the policy areas can inform decision-making, efficient resource allocation, effective instruction and provision of preventive services, and continuous quality improvement of the programs that serve young children and their families. Accountability systems include statewide early childhood data systems that aggregate data over time and are linked to the K-12 data systems and provide information about children, the workforce, and programs as children progress from early care and education settings into elementary school.[12] Accountability systems include statewide early childhood data systems that aggregate data over time and are linked to the K-12 data systems and provide information about children, the workforce, and programs as children progress from early care and education settings into elementary school. Accountability systems can also be developed to track the process of providing screening and early intervention services.

A key task in creating and maintaining accountability systems is the identification of discrete child, family, and program indicators that define important benchmarks and can be monitored over time to understand program quality, children's health, education, and the economic status of children and their families. Once in place, accountability systems can help states allocate limited resources, identify and set goals, track progress, and hold agencies and programs accountable for progress.[13] As early childhood data systems become embedded in state policy and programs, it is critical that data users receive adequate orientation, training, and support on using and interpreting the data.

Policy strategies to promote accountability and continuous improvement:

- Develop a comprehensive, linked data system to inform planning, document progress, and ultimately improve the health, development, learning, and success of children and their parents.
- Centralize and track screening, referral, diagnosis, and treatment.
- Support training for parents, service providers, and policymakers to help them accurately interpret and use data.

HEALTH

The first eight years of life are characterized by a series of critical periods during which children's development, health, and well-being are particularly sensitive to their experiences with their surrounding environment and caregivers. The development that occurs within these sensitive periods becomes the foundation for all subsequent development. In this way, health in the first eight years of life has significant cumulative and sustained effects on child and adult outcomes.[14] For example, poor health in utero may lead to poor birth outcomes[15] that further increase risk for poor health in early childhood. Young children who experience toxic stress as a result of significant adversity are, in turn, at higher risk for serious conditions in adulthood such as depression, obesity, and cardiovascular disease[16]—many of which have negative economic and social consequences. Prolonged and elevated stress due to adverse experiences early in life, such as violence or abuse, also causes changes in neural circuitry and chemical composition in the brain, which make children less resilient over time.[17] This reduced adaptability undercuts the developmental benefits of positive experiences and puts children at risk for physical and mental illness later in life.[18]

However, as developmental science asserts, development is not predetermined or necessarily linear, but occurs through a dynamic interplay between the individual and the environments and relationships in which children engage. Health risks experienced early in life do not necessarily lead to poor health in adulthood, unless there are consistent and cumulative experiences that contribute to such a trajectory.[19] For example, Latino infants of Mexican heritage experience positive birth outcomes such as robust birthweight and low infant mortality rates despite many of these children coming from disadvantaged backgrounds (e.g., low maternal education, low household income). Nevertheless, one study found that Latino children have lower cognitive growth in early childhood compared to their white peers, even after controlling for socioeconomic differences between the groups.[20] Thus, early protective factors related to health do not necessarily predict improved outcomes across developmental domains or for all children, nor do early health risks always predict poor outcomes across domains or for all children.

However, early health and economic risks can constrain the subsequent experiences children have. Children with poor nutrition and chronic illness are more likely to miss school, and therefore miss out on important social and academic opportunities.[21] This is especially true for uninsured children, who are less likely to receive preventive care, needed services, and screenings that allow for the early identification and effective management of health concerns.[22] Moreover, low-income children stand to benefit the most from high-quality developmental opportunities available to them[23]—opportunities that are made possible largely by keeping children healthy and minimizing health risks as much as possible.

Policies that promote the health of all children—and particularly of vulnerable children—will enable these critical opportunities for development to be maximized and ensure that a strong foundation is set for future development across the lifespan.

HEALTH POLICY STRATEGIES

1. Ensure access to affordable, physical, oral, and mental health insurance coverage for children and parents.

Despite expanded coverage through Medicaid and the Children's Health Insurance Program (CHIP), millions of children remain uninsured, meaning they have limited access to crucial preventive care and screenings to promote and protect their physical and mental health.[24] Even among families with insured children, their parents do not always have coverage, which can ultimately impact the family as a whole.[25] Multiple recent examples of expanded health coverage at the state level indicate potential opportunities for protecting children's health through simplified enrollment and renewal procedures along with expanded benefits.[26]

Policy strategies to ensure access to affordable, physical, oral, and mental health insurance coverage:

- Expand outreach
- Simplify enrollment
- Eliminate barriers to retention
- Address health care shortages—both of providers who accept Medicaid/CHIP, and of providers who offer specialized care (e.g., dental care, mental health, developmental specialists).

2. Prioritize prevention strategies.

There are numerous ways in which prevention strategies can be implemented, beginning with prenatal care and early screenings at the individual level, all the way up to the population level through federal programs. With an increasingly large body of evidence on the long-term impacts of early childhood trauma and adversity, including poverty, the earlier that health care providers and community agencies can identify high-risk children and families, the greater the likelihood of timely intervention or initiation of prevention and promotion strategies.[27] While only about half of U.S. children have access to all the components of a medical home (including access to a personal physician and coordinated care), this gold standard for comprehensive child- and family-centered care can serve as powerful approach to improving children's health outcomes.[28]

Policy strategies to prioritize prevention strategies:

- Promote timely use of prenatal and pediatric health care
- Require universal newborn screening for hearing and metabolic disorders, and vision screening between ages one and five
- Screen for developmental disabilities and delays according to the schedule recommended by American Academy of Pediatrics
- Increase access to comprehensive health (medical) homes that identify and respond to the physical, social, and emotional determinants of health
- Prioritize funding for prevention programs, including those delivered outside of traditional medical settings
- Increase participation of families, child care providers, schools, and communities in federal nutrition programs

3. Improve the quality of health care.

Access to health care coverage and routine preventive care is necessary, but not sufficient for promoting positive outcomes; the quality of care matters greatly. Following the Children's Health Insurance Program Reauthorization Act of 2009, resources have been devoted to the establishment of a core set of pediatric quality measures to be used by Medicaid/CHIP and other public/private entities.[29] Under the Affordable Care Act, new opportunities exist to improve health care data tracking systems to support consistent referrals to specialists and follow-up services as well as coordination between IDEA Part B and C, primary care, and public health programs. More emphasis on maternal mental health screenings along with child behavioral health screenings would allow for more timely interventions when necessary; the pediatric setting also provides opportunities for screening for adverse childhood experiences and sources of toxic stress.[30]

Policy strategies to improve the quality of health care:

- Implement health care data systems to track and improve referral and follow-up services
- Maximize screening, diagnosis and treatment of maternal depression and early childhood behavioral health issues using new opportunities under the Affordable Care Act
- Improve coordination between IDEA Part B and C, primary care, and public health programs

FAMILY SUPPORT

As children's primary caregivers, parents[31] play perhaps the most important role in their lives, by providing food, clothing, a safe place to live, medical attention, and a secure, nurturing relationship that is critical to children's well-being.[32] Often, however, factors such as poverty, limited education, substance abuse, domestic violence, and other family stressors prohibit parents from being able to meet all of their children's physical, social-emotional, or cognitive needs.[33] In addition to supports such as steady employment, strong social networks, and community resources, many parents need access to programs and services designed to help them overcome these stressors and promote the healthy development of their young children.

Family support programs are broadly defined as programs that provide resources to enable parents (and other primary caregivers) to successfully support themselves so they can provide a stable, enriching environment for their children.[34] While the specific goals of family support programs may vary, they typically include improving parenting skills;[35] increasing parents' knowledge of child development;[36] providing work supports;[37] helping parents access health and nutrition services, job training, or treatment for substance abuse;[38] and reducing parental stress.[39] These goals are met through a variety of strategies and activities, such as parent education classes and support groups, parent-child groups and family activities, drop-in time, child care, information and referral services, crisis intervention and/or family counseling, and auxiliary support services (such as emergency food provision).[40]

Family support, in its various forms, began as part of the larger social services movement in the 1960s, with grassroots efforts advocating for the development of community-based programs to strengthen family functioning.[41] At the time, emerging research demonstrated the importance of understanding child development within the multiple contexts of their development (using an ecological framework), as well as the benefits of early intervention for children at risk for poor outcomes.[42] Programs were developed independently at the local level to provide vulnerable parents—those experiencing poverty, joblessness, poor health, or other risk factors—with education, social support, and connections to other community services.[43] Family support became the foundation of "two-generation" programs such as Head Start, which was launched in 1965 under the premise that early care and education programs that help parents achieve self-sufficiency and function more effectively will enable parents to foster healthy development and school readiness in their young children.[44] Today, family support is continually emphasized as a critical component of integrated early care and education systems that are developed to promote positive child outcomes.[45]

FAMILY SUPPORT POLICY STRATEGIES

1. Support strategies that foster responsive caregiving.

As children develop their skills and abilities through their relationships with those around them,[46] the opportunity to form secure attachments with sensitive, nurturing parents (or other primary caregivers) is critical to both their cognitive and social-emotional growth.[47] Programs can help support families, particularly those that are the most socio-economically vulnerable, in their ability to engage in stimulating and responsive interactions with their children, provide emotional support, and expose children to activities that can enrich their health, knowledge, and skills.[48]

For family support programs to be successful, they should be sensitive to the cultural and ethnic diversity of their intended participants and should build on the beliefs and strengths of each family. Research indicates that cultural beliefs influence parents' engagement in services such as parent trainings, and that culturally-relevant program practices produce stronger results.[49] In addition, there is research to suggest that programs that effectively support parents as their child's first teachers include those that are designed appropriately to fit family needs, incorporate cultural competency, use family-centered approaches, and facilitate access to social and supportive services for participating parents.[50]

Policy strategies to support strategies that foster responsive caregiving:

- Ensure programs draw upon the language and culture of families and their communities.
- Direct supports to the most vulnerable parents: teen parents, foster parents, grandparents raising grandchildren, parents who have experienced abuse and neglect, and parents of children with special needs.
- Promote family support programs that offer activities and materials while creating opportunities for modeling, peer support, and networking among parents.

2. Align policies and practices that support stable, economically secure families.

Children who experience poverty are more likely to have delayed cognitive development; poorer school performance, socio-emotional development, and physical health; and to be poor as adults.[51] Recent research on the potential effect of family

income on children's brain structure and cognitive development highlights the need for an increased focus on identifying and implementing strategies for reducing poverty and ameliorating the negative effects of poverty on children's development.[52] For families with low incomes or who are living in poverty, critical family support services such as child care subsidies, financial assistance (TANF), Supplemental Nutrition Assistance Program, and Medicaid/State Child Health Insurance Program, are vital supports that facilitate engagement in the workforce as well as access to early care and education arrangements that can promote positive development. However, even when families are eligible for these services, many do not receive them. When families do receive benefits, participation in the program may be limited by factors beyond those related to eligibility. Research documents barriers to initial receipt and retention of services that range from stigma around receipt of government assistance to administrative hurdles such as paperwork and redetermination policies.[53]

Policy strategies to align policies and practices that support stable, economically secure families:

- Change the culture of eligibility determination and case management from a focus on rule compliance, to a focus on adult-, child-, and family outcomes.
- Revise eligibility and work requirements for low-income families that disrupt continuity of care for children and work against children's developmental and educational needs.
- Invest in networks of parent navigators/promoters to build social capital and connect families to supports.
- Increase access to public benefits and tax credits that provide income or other supports to help families meet basic needs and maintain stable housing and employment.

LEARNING

Early childhood and elementary school educators have long seen the period of birth through eight as a critical span of development for physical well-being and motor development, language and literacy development, cognitive development (including early math and science skills), social-emotional development, and motivational and regulatory skills associated with school readiness and later life success. The years from infancy through early elementary school are ones in which continuity of practices and interactions and integrated support services are needed. For example, this time period encompasses a shift from mastering the mechanics of language acquisition to mastering reading comprehension. Language acquisition in terms of both comprehension and production increases dramatically and rapidly in the first four years of life, and third grade (which most children enter around age eight) is seen as a watershed for moving from "learning to read" to "reading to learn." At the same time, early math skills are found to be a stronger predictor of later school achievement than early reading skills. In addition, tremendous gains are made in physical and motor development as well as social-emotional development from early infancy through early elementary school.

Research indicates that low-income children tend to lag behind their more affluent peers on a range of developmental outcomes, including skills at school entry. The gap in skill development between advantaged and more disadvantaged children emerges as early as nine months of age and is predictive of academic trajectories through later schooling. Dual language learners and children with disabilities may also lag behind their peers on some developmental outcomes at school entry, although these disparities may be a result of inappropriate assessments or inadequate assessment procedures being applied to these special populations. Still, without early and consistent intervention and support, early disparities can persist. One-third of all U.S. fourth-graders and half of African-American and Hispanic fourth-graders nationwide are reading below basic levels.

Supporting learning for young children thus includes providing access to high-quality early care and education experiences for young children while simultaneously strengthening the infrastructure and content of preparation and professional development for the early childhood workforce. States supporting a birth through third continuum may also need to consider how to track progress toward meeting specified goals, for example, by monitoring the state's ability to ensure children have access to high-quality care, or the state's ability to support children in making gains in their development and learning from kindergarten entry through grade three. The policies addressed in this section reflect these goals.

LEARNING POLICY STRATEGIES

1. Expand access to high-quality early learning programs.

Children who have access to high-quality early care and education experiences tend to have better outcomes across developmental domains than children from similar backgrounds who do not have such experiences. Conversely, children experiencing poor–quality early care and education on average display more behavior problems, fewer language skills, and lower levels of academic skills than children in medium– or high–quality care. The benefits of high-quality early care and education are greater for vulnerable children and there is research evidence that suggests greater exposure to high-quality early care and education environments (either by starting at a younger age or receiving more hours of such care) can improve developmental outcomes for young children.

Furthermore, children who enter formal schooling with stronger school readiness skills tend to maintain their advantage over the elementary school years, while children who enter with lower school readiness skills tend to maintain their relative disadvantage over time. These findings emphasize the importance of insuring that all vulnerable children have access to high-quality early care and education experiences that enable them to reach school entry with the strongest school readiness skills possible, and the simultaneous need for elementary schools to support children so that early learning successes are sustained.

Policy strategies to expand access to high-quality early learning programs:

- Expand access to high quality child care, Early/Head Start and full day pre-K in a variety of settings (i.e., homes, centers, and schools).
- Support access to high quality full-day kindergarten and grades 1-3.
- Ensure high-quality programs are accessible for full days, during non-traditional hours, before and after school, and over the summer.

- Encourage play to help develop social, emotional, and executive function skills.
- Implement developmentally and culturally appropriate early learning standards that reflect approaches to learning, social/emotional, physical, cognitive, and language development; and build foundational skills in literacy, math, science, social studies, and the arts.
- Align curriculum, standards, and assessments starting in pre-K through grade three.

2. Build a high quality early childhood workforce, birth through grade three.

The early childhood care and education (ECCE) workforce and the elementary school teachers who teach in early grades classrooms are at the core of providing quality early experiences for children birth through eight. Decades of research document the critical role of early childhood teachers and caregivers, and elementary school teachers, in promoting the well-being of young children. The knowledge and skills of the workforce across these settings shape the quality of the curriculum and assessment practices that are used, the activities and materials in the environment, the daily routines, and the specific interactions and activities intended to promote the development of children's language, literacy, social skills, and self-regulation. Children who have a highly-qualified early childhood educator or elementary school teacher have stronger gains in their cognitive, academic, and social development.

Yet the work context for many early childhood teachers and caregivers does not provide adequate support for workforce quality. In particular, working conditions for community-based child care programs (including family child care) are often characterized by low compensation, limited benefits, and few opportunities or incentives to advance. Access to benefits such as health insurance, paid vacation and sick leave, and retirement savings is limited, though conditions may be better for teachers in prekindergarten and the early grades. Nearly one-third of child care center-based staff leave their positions each year, and 18 percent leave the field altogether. The expectations for teachers and caregivers to produce high-quality learning experiences for young children, particularly in the years before kindergarten, are not currently aligned with resources, compensation, or access to professional development available for the workforce.

ECCE and elementary school teacher preparation and professional development involve experiences that support both the acquisition of knowledge and the application of knowledge to practice. Professional development for ECCE professionals and elementary school teachers working with children from birth through age eight is challenging to provide in an effective, integrated way. Currently, the type, availability, and quality of preparation and professional development opportunities vary greatly depending on the sector and settings in which educators work. These variations reflect entry requirements, regulatory structures, funding streams, and professional development service providers that are distinct for educators in schools, pre-kindergarten programs, community-based child care centers, Head Start, early intervention programs, licensed family child care homes, and before- and after-school care programs. For example, teacher training systems certify teachers for pre-kindergarten to third grade, or pre-kindergarten to fifth grade, working in schools. These systems typically require a bachelor's degree in education or early childhood education, and they require ongoing professional development. In contrast, licensing standards for programs typically include only minimal pre-service and ongoing requirements for staff in child care settings. Additionally,

the type, quality, and availability of professional development for teachers within a public school system differ from the professional development for other community-based early childhood educators.

Policy strategies to build a high quality early childhood workforce, birth through grade three:

- Adopt training and professional development strategies that ensure the workforce is culturally and linguistically diverse and responsive to the needs of children and families being served.
- Establish research-based teacher competencies that address child development; protective factors; social, emotional, and behavior management; and cultural and linguistic appropriateness.
- Support training and coaching for teachers working with special populations including dual language learners and children with disabilities.
- Support home-based care providers in enhancing learning opportunities for children in their care.
- Establish a coordinated professional development system to reflect the principles and indicators of NAEYC's Blueprint for State Early Childhood Professional Development Systems.
- Implement strategies to improve salaries, benefits, and working conditions for early childhood educators, and support compensation parity across early learning programs (child care, Pre-K and K-3 classrooms).
- Ensure program directors and school principals have the capacity to provide instructional leadership that supports effective teaching.
- Promote transition planning from early care, to preschool, to K-12 learning environments.

3. Set goals and monitor progress.

States working to support children's learning from birth to third grade may also need to develop clearly articulated goals to guide their work and systems to monitor and track progress over time. For example, the goal of promoting access to high-quality care can be monitored through the implementation of a Quality Rating and Improvement System (QRIS). QRIS are operating in nearly all states and support the definition, measurement, and rating of quality care in early care and education and (in some states) school-age care.

While the quality improvement strategies used in QRIS vary across states, many states are exploring coaching and consultation strategies designed to include a greater focus on teacher/caregiver practices that are most likely to support children's positive development. A growing number of states have also invested in validation studies that examine the degree to which the QRIS standards and rating process are producing distinct levels of quality. Validation studies produce information that states can use to review their quality standards and engage in continuous quality improvement activities that may include redesign or refinement efforts as needed.

To measure children's progress towards meeting specified standards and benchmarks of child development, states are also developing early childhood assessment systems that may include the assessment of children in early childhood settings,

at kindergarten entry, and in the early elementary years, to inform instruction. In 2010, only seven states had developed a kindergarten entry assessment (KEA). By 2014 that number had tripled, to over 30 states exploring the use or development of a KEA. Assessments that are well designed are age appropriate in content and methodology, tailored for a specific purpose, and reliable, valid, and fair can benefit young children by informing adults and educators about individual children's strengths and areas of growth, particularly as they transition from early care and education settings to elementary school. The results from well-designed, developmentally appropriate assessment systems can also serve as an effective tool for engaging parents in their children's learning and supporting educators in collaborative goal-setting with parents.

Early warning systems are also an effective strategy for identifying children who are either at risk for school disengagement or failure, or who may need to be placed in more rigorous academic programs. The use of developmental screening instruments in early care and education settings is one way to identify children who are at risk for developmental delay and thus might benefit from early intervention services. In a school-based setting, data might be gathered to inform indicators related to school disengagement and dropout rates. This may include data on student behavior, student attendance, or parental involvement in school. For example, chronic absence in kindergarten has been linked to lower levels of achievement in math, reading, and general knowledge in first grade, which might be mitigated with timely intervention.

Policy strategies to set goals and monitor progress:

- Set goals and track outcomes in ways that engage families in their children's learning.
- Ensure child assessment tools are developmentally, culturally, and linguistically appropriate.
- Require Kindergarten entry assessments to guide instruction.
- Assess the quality of learning environments, teacher-child interaction, teaching strategies, and children's progress, and use the data for continuous improvement.
- Implement early warning systems to identify problems, such as chronic absence, to allow for timely intervention.

CONCLUSION

Research at a Glance: The Research Base for a Birth through Eight State Policy Framework — Revised[3] is a compendium to the revised Framework that outlines the research across and in each of the policy areas in the Alliance for Early Success' Birth through Eight State Policy Framework. The revised Framework focuses attention on what is critical within and across different aspects of early childhood development. It provides guidance for state-level investments that can lead to better health, family, and learning outcomes.

The findings from decades of developmental research make clear that early childhood, from birth through age eight, is a critical period for supporting children's health, their family relationships, and their opportunities for learning. The age range is important, as each experience influences the next and sustains the growth that comes before. With targeted supports, the period of time from birth through age eight can help put and keep children on a path to success. During this period, children develop patterns of relating to others, regulating their own behavior and emotions, engaging in new experiences, and learning about the world through listening, talking, and reading.

The policies described in the Framework have a strong basis in research and practice. They align with core principles of early childhood development and best practices in service delivery for young children and their families. While continued research and evaluation are necessary to help sharpen our evidence base, investments in these policies offer solid steps toward improved early childhood outcomes.

REFERENCES

CROSS-CUTTING POLICIES

1 Bronfenbrenner, U., & Evans, G. W. (2000). Developmental science in the 21st century: Emerging questions, theoretical models, research designs and empirical findings. *Social Development, 9*(1), 115-125.

Cairns, R. B., Elder, G. H., & Costello, E. J. (1996). *Developmental Science*. Cambridge, UK: Cambridge University Press. Fogel, A. (2011). Theoretical and applied dynamic systems research in developmental science. *Child Development Perspectives, 5*(4), 267-272.

Knudsen, E. I., Heckman, J.J., Cameron, J.L., & Shonkoff, J. P. (2006). Economic, neurobiological, and behavioral perspectives on building America's future workforce. *Proceedings of the National Academy of Sciences of the United States of America, 103* (27), 10155-10162. www.pnas.org/cgi/doi/10.1073/pnas.0600888103.

Sameroff, A. J, &Fiese, B. H. (2000). Transactional regulation: The developmental ecology of early intervention. In J. P, Shonkoff& S. Meisels (Eds.), *Handbook of Early Childhood Intervention, Second Edition* (pp. 135-159). New York: Cambridge University Press.

Shonkoff, J. P. (2010), Building a New Biodevelopmental Framework to Guide the Future of Early Childhood Policy. *Child Development*, *81*, 357–367.

2 Center on the Developing Child (2009). *Core Concepts in the Science of Early Childhood Development* (Brief). Retrieved from http://developingchild.harvard.edu/wp-content/uploads/2015/06/Core-Concepts-in-the-Science-of-Early-Childhood-Development.pdf

3 Shonkoff, J. P., et al. (2012). The lifelong effects of Early Childhood Adversity and toxic stress. *Pediatrics, 129*, 232-246.

4 Center on the Developing Child at Harvard University. (2010). *The Foundations of Lifelong Health Are Built in Early Childhood*. Cambridge, MA: Harvard University. Retrieved from http://www.developingchild.harvard.edu.

3 See *The Research Base for a Birth through Eight State Policy Framework*, which is an expanded version of the *Research at a Glance* overview.

5 Fixsen, D. L., Blase, K., Duda, M., Naoom, S., & Van Dyke, M. (2010). Implementation of evidence-based treatments for children and adolescents: Research findings and their implications for the future. In J. Weisz & A. Kazdin (Eds.), Implementation and Dissemination: Extending Treatments to New Populations and New Settings (2nd ed., pp. 435-450). New York: Guilford Press.

Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M., & Wallace, F. (2005). Implementation research: A synthesis of the literature. (FMHI Publication No. 231). Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, National Implementation Research Network.

Invest in places that build social capital, such as schools, libraries, community centers, and parks

Katz, L. F. (2015). Reducing inequality: Neighborhood and social interventions. *Focus*, 31(2), 12-17.

Small, M. L. (2006). Neighborhood institutions as resource brokers: Childcare centers, inter-organizational ties, and resource access among the poor. *Social Problems, 53* (2), 274-292.

Invest in safe, affordable housing

Stuhldreher, A., & O'Brien, R. (2011). *The Family Independence Initiative: A New Approach to Help Families Exit Poverty.* Washington, DC: New America Foundation. Retrieved from: www.newamerica.net

Sard, B. & Rice, D. (2014). Creating Opportunity for Children: How Housing Location Can Make a Difference. Washington, DC: Center on Budget and Policy Priorities.

Support healthy and affordable food options in high poverty neighborhoods

Morrissey, T. W., Jacknowitz, A., & Vinopal, K. (2012). Food Assistance and Children's Eating Patterns, Food Insecurity, and Overweight: The Influence of Local Food Prices. Madison, WI: Institute for Research on Poverty.

Morrissey, T. W., Jacknowitz, A., & Vinopal, K. (2013).Local food prices: Effects on child eating patterns, food insecurity, and overweight. Madison, WI: Institute for Research on Poverty.

American Dietetic Association. (2010). Position of the American Dietetic Association: Food insecurity in the United States. *Journal of American Dietetic Association, 110*, 1368-1377.

Kotch, J. B. (2005). *Maternal and Child Health: Programs, Problems, and Policy in Public Health*. Sudbury, MA: Jones and Bartlett Publishers.

Ritchie, L. D., Boyle, M., Chandran, K., Spector, P., Whaley, S. E., James, P., Samuels, S., . . . Crawford, P. (2012). Participation in the Child and Adult Care Food Program is associated with more nutritious foods and beverages in child care. *Childhood Obesity, B* (3), 224-229.

IOM (Institute of Medicine). (2011). *Child and Adult Care Food Program: Aligning Dietary Guidance for All*. Washington, DC: The National Academies Press.

Wu, C. F., & Eamon, M. K. (2010). Need for and barriers to accessing public benefits among low-income families with children. *Children and Youth Services Review,* 32(1), 58-66.

Emple, H. (2011). *Food Insecurity among Children Ages 0-3 in Baltimore City: Barriers to Access and Initiatives for Change.* Baltimore, MD: Department of Pediatrics. University of Maryland School of Medicine.

Martin, K. S., Cook, J. T., Rogers, B. L., & Joseph, H. M. (2003). Public versus private food assistance: Barriers to participation differ by age and ethnicity. *Journal of Education and Behavior, 35*(5), 249-254.

Dunifon, R. & Kowaleski-Jones, L. (2003).The influences of participation in the National School Lunch Program and food insecurity on child well-being. *Social Service Review,* 77(1), 72-92.

Incentivize economic development that brings living-wage jobs into neighborhoods where lack of opportunity brings all of the problems associated with unemployment and concentrated poverty

Stuhldreher, A., & O'Brien, R. (2011). *The Family Independence Initiative: A New Approach to Help Families Exit Poverty.* Washington, DC: New America Foundation. Retrieved from: www.newamerica.net

Direct funding to programs addressing adverse early experiences and sources of toxic stress

Oral, R., Ramirez, M., Coohey, C., Nakada, S., Walz, A., Kuntz, A., ...Peek-Asa, C. (2015). Adverse childhood experiences and trauma informed care: The future of health care. *Pediatric Research*, Accepted article 23 August 2015.

Johnson, S. B., Riley, A. W., Granger, D. A., & Riis, J. (2012). The science of early life toxic stress for pediatric practice and advocacy. *Pediatrics,* 131(2), 319-327.

Shonkoff, J. P., et al. (2012). The lifelong effects of Early Childhood Adversity and toxic stress. *Pediatrics*, 129, 232-246.

Danese, A., Moffitt, T. E., Harrington, H., Milne, B. J., Polanczyk, G., Pariante, C. M., . . . Caspi, A. (2009). Adverse childhood experiences and adult risk factors for age-related disease: Depression, inflammation, and clustering of metabolic risk markers. *Archives of Pediatric and Adolescent Medicine,* 163(12), 1135-1143.

Invest in family engagement strategies that value parents as experts in their children's development

Christenson, S. L. (2004). The family-school partnership: An opportunity to promote the learning competence of all students. *School Psychology Review, 33*, 83-104.

Cooper, C. E., & Crosnoe, R. (2007). The engagement in schooling of economically disadvantaged parents and children. *Youth & Society, 38*, 372–391.

Dempsey, I., & Keen, D. (2008). A review of processes and outcomes in family-centered services for children with a disability. *Topics in Early Childhood Special Education, 28*(1), 42-52.

González, N., Moll, L., & Amanti, C. (2005). *Funds of knowledge: Theorizing practices in households, communities, and classrooms.* Mahwah, NJ: Lawrence Erlbaum Associates.

Halgunseth, L. C., Peterson , A., Stark, D. R., & Moodie, S. (2009). *Family engagement, diverse families, and early childhood education programs: An integrated review of the literature.*

Ingoldsby, E. M. (2010). Review of Interventions to Improve Family Engagement and Retention in Parent and Child Mental Health Programs. *Journal of Child Family Studies, 19*, 629–645.

Powell, D. S., Batsche, C.J., Ferro, J., Fox, L., Dunlap, G. (1997). A strength-based approach in support of multi-risk families: Principles and issues. *Topics in Early Childhood Special Education, 17,* 1-26.

Weiss, H., Caspe, M., & Lopez, E. (2006). *Family involvement makes a difference research brief no. 1.*

U.S. Department of Health and Human Services, Administration for Children and Families Office of Head Start. (2011). *The Head Start Parent, Family, and Community Engagement Framework: Promoting Family Engagement and School Readiness from Prenatal to age 8.* Washington, DC: The National Center on Parent, Family, and Community Engagement.

Heinicke, C. M., Goorsky, M., Moscov, S., Dudley, K., Gordon, J., Schneider, C., & Guthrie, D. (2000). Relationship-based intervention with at-risk mothers: Factors affecting variations in outcome. *Infant Mental Health Journal, 21*(3), 133-155.

Roggman, L. A., Boyce, L. K., & Cook, G. A. (2009). Keeping kids on track: Impacts of a parenting-focused Early Head Start program on attachment security and cognitive development. *Early Education and Development, 20*(6), 920-941.

Sheridan, S. M., Knoche, L. L., Edwards, C. P., Bovaird, J. A., & Kupzyk, K. A. (2010). Parent engagement and school readiness: Effects of the Being Ready Intervention on preschool children's social-emotional competencies. *Early Education and Development, 21*(1), 125-156

Forry, N., Moodie, S., Simkin, S. & Rothenberg, L. (2011). *Family-provider relationships: A multidisciplinary review of high quality practices and associations with family, child, and provider outcomes.* OPRE Issue Brief # 2011-26a. Washington, DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Promote comprehensive screening and early detection of developmental delays linked to referral, care coordination, and intervention

American Academy of Pediatrics, Committee on Children with Disabilities (2001). Developmental surveillance and screening of infants and young children. *Pediatrics, 108*(1), 192-196.

Center on the Developing Child at Harvard University (2007). A science-based framework for early childhood policy: Using evidence to improve outcomes in learning, behavior, and health for vulnerable children. http://developingchild.harvard.edu

Florida Partnership for School Readiness (2004). Birth to three screening and assessment resource guide. Jacksonville, FL: University of North Florida.

Johnson-Staub, C. (2012). Charting progress for babies in child care project. Promote access to early, regular, and comprehensive screening. Washington, DC: The Center for Law and Social Policy.

Marshall, J., & Mendez, L. (2014). Following up on community-based developmental screening: Do young children get the services they need? *Infants and Young Children,* 27(4), 276-291.

Pinto-Martin JA, Dunkle M, Earls M, Fliedner D, Landes C. (2005). Developmental stages of developmental screening: steps to implementation of a successful program. *American Journal of Public Health,* 95(11), 1928–1932.

Rosenberg SA, Zhang D, Robinson CC. (2008). Prevalence of developmental delays and participation in early intervention services for young children. *Pediatrics*, 121(6), 1503-1509.

Moodie, S., Daneri, P., Goldhagen, S., Halle, T., Green, K., & LaMonte, L. (2014). Early childhood developmental screening: A compendium of measures for children ages birth to five (OPRE Report 2014 11). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Thompson, D. C., McPhillips, H., Davis, R. L., Lieu, T. A., Homer, C. J., & Helfand, M. (2001). Universal newborn hearing screening summary of evidence. *The Journal of the American Medical Association, 286*(16).

U.S. Preventive Services Task Force. Screening for visual impairment in children younger than 5 years: Recommendation statement. *Annals of Family Medicine, 2*, 264–266.

Sices, L. (2007). *Developmental screening in primary care: the effectiveness of current practice and recommendations for improvement.* New York, NY: Commonwealth Fund.

Mackrides, P. S. & Pyherd, S. J. (2011). Screening for Developmental Delay. *American Family Physician*, 84(5), 544-549.

The Division for Early Childhood. (2013). Recommended Practices. Los Angeles, CA: The Division for Early Childhood, The Council for Exceptional Children.

Council on Children With Disabilities, Section on Developmental Behavioral Pediatrics, Bright Futures Steering Committee, Medical Home Initiatives for Children With Special Needs Project Advisory Committee. (2006). Identifying Infants and Young Children with Developmental Disorders in the Medical Home: An Algorithm for Developmental Surveillance and Screening. *Pediatrics*, 118, 405-420.

American Academy of Pediatrics, Council on Children with Disabilities. (2005). Care coordination in the medical home: integrating health and related systems of care for children with special health care needs. *Pediatrics,* 116, 1238-1244.

Clements, K. M., Barfield, W. D., Kotelchuck, M., & Wilber, N. (2008). Maternal socio-economic and race/ethnic characteristics associated with early intervention participation. *Maternal and child health journal, 12*(6), 708-717.

Roberts, G., Howard, K., Spittle, A. J., Brown, N. C., Anderson, P. J., & Doyle, L. W. (2008). Rates of early intervention services in very preterm children with developmental disabilities at age 2 years. *Journal of pediatrics and child health, 44*(5), 276-280.

Rosenberg, S. A., Zhang, D., & Robinson, C. C. (2008). Prevalence of developmental delays and participation in early intervention services for young children. *Pediatrics, 121*(6), e1503-e1509.

Tang, B. G., Feldman, H. M., Huffman, L. C., Kagawa, K. J., & Gould, J. B. (2012). Missed opportunities in the referral of high-risk infants to early intervention. *Pediatrics, 129*(6), 1027-1034.

Expand access to voluntary, effective home visiting programs and services for new and expectant parents that model relationship building, engage parents in their child's learning, and refer for additional supports as needed

Axford, N., Lehtonen, M., Kaoukji, D., Tobin, K., & Berry, V. (2012). Engaging parents in parenting programs: Lessons from research and practice. *Children and Youth Services Review, 34*(10), 2061-2071.

Drotar, D., Robinson, J., Jeavons, L., & Lester Kirchner, H. (2009). A randomized, controlled evaluation of early intervention: The Born to Learn curriculum. *Child: Care, Health & Development, 35*(5), 643–649.

Eisner, M., & Meidert, U. (2011). Stages of parental engagement in a universal parent training program. The journal of primary prevention, 32(2), 83-93.

Korfmacher, J., Laszewski, A., Sparr, M., & Hammel, J. (2012). *Assessing home visiting program quality.* Washington, DC: Pew Center on the States. Retrieved October 30, 2013.

Pew Home Visiting Campaign. (n.d.). *Expanding home visiting research: New measures of success.* Philadelphia: Pew Charitable Trusts. Retrieved July 22, 2014,

Pew Home Visiting Campaign. (2011). *States and the new federal home visiting initiative: An assessment from the starting line.* Washington, DC: Pew Center on the States. Retrieved October 31, 2013,

Pinquart, M. & Teubert, D. (2010). Effects of parenting education with expectant and new parents: A meta-analysis. *Journal of Family Psychology, 24* (3), 316-327.

United States. Administration for Children and Families. Office of Planning, Research and Evaluation. (2014). *Home visiting programs: Reviewing evidence of effectiveness.* (OPRE Report No. 2014-13). Washington, DC: U.S. Administration for Children and Families, Office of Planning, Research and Evaluation. Retrieved May 7, 2014, from http://homvee.acf.hhs.gov/HomVEE-Brief2014-13.pdf.

Wagner, M., Spiker, D., Gerlach-Downie, S., & Hernandez, F. (2000). *Parental engagement in home visiting programs--findings from the Parents as Teachers multisite evaluation.* Menlo Park, CA: SRI International.

Woolfolk, T. N., & Unger, D. G. (2009). Relationships between low income African American mothers and their home visitors: A Parents as Teachers program. *Family Relations, 58*(2), 188-200.

Zigler, E., Pfannenstiel, J. C., & Seitz, V. (2008). The Parents as Teachers program and school success: A replication and extension. *Journal of Primary Prevention, 29*(2), 103-120.

Field, T., Widmayer, S., Greenberg, M. A., & Stoller, S. (1982). Effects of parent training on teenage mothers and their infants. *Pediatrics, 69*(6), 703-707.

National Commission to Prevent Infant Mortality. (1989). Home visiting: Opening doors for America's pregnant women and children. Washington, DC: National Commission to Prevent Infant Mortality

Olds, D. L., Henderson, C. R., Tatelbaum, R., & Chamberlain, R. (1986). Improving the delivery of prenatal care and outcomes of pregnancy: A randomized trial of nurse home visitation. *Pediatrics, 77*(1), 16-28.

Roberts R. N., & Wasik B. H. (1990). Home visiting programs for families with children birth to three: Results of a national survey. *Journal of Early Intervention, 14*(3): 272-84.

Siegel, E., Bauman, K. E., & Scheafer, E. S. (1980). Hospital and home support during infancy: Impact on maternal attachment, child abuse and neglect, and health care utilization. *Pediatrics, 66*(2), 191-197.

Byrd, M. E. (1995). The home visiting process in the contexts of the voluntary vs. required visit: Examples from fieldwork. *Public Health Nursing, 12*(3), 196-202.

Pfannenstiel, J. C., & Zigler, E. (2007). *Prekindergarten experiences, school readiness and early elementary achievement*. Unpublished report prepared for Parents as Teachers National Center.

Pfannenstiel, J., & Seltzer, D. (1989). New Parents as Teachers: Evaluation of an Early Parent Education Program. *Early Childhood Research Quarterly, 4*(1), 1-18.

Weiss, H., & Klein, L. G. (2006). Changing the conversation about home visiting: Scaling up with quality. Cambridge, MA: Harvard Family Research Project.

Home Visiting Vision Statement. (2008). *Joint statement of five leading national home visiting programs*: Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Nurse-Family Partnership, Parents as Teachers, and Parent-Child Home Program. www.parentsasteachers.org.

Daro, D. *Home visitation: Assessing progress, managing expectations.* Chicago, IL: The Ounce of Prevention Fund and Chapin Hall Center for Children.

National Conference of State Legislatures. (n.d.). *Maternal, Infant, and Early Childhood Home Visiting Programs*. Washington, DC.

Pew Center on the States. (2011). *States and the new federal home visiting initiative: An assessment from the starting line*. Washington, DC.

Adopt policies that support flexible work schedules for parents

National Advisory Council on the Employment of Women (UNKNOWN). Flexible Work Arrangements Literature Review. Retrieved from: www.nacew.govt.nz

National Women's Law Center (2015). Employment Fact Sheet: Recently Introduced and Enacted State and Local Fair Scheduling Legislation. Washington, D.C. Retrieved from: www.nwlc.org

National Women's Law Center (2015). Employment Fact Sheet: Part-Time Workers Are Paid Less, Have Less Access to Benefits- and Two-Thirds Are Women. Washington, D.C. Retrieved from: www.nwlc.org

Kelly, E. L., & Kalev, A.(2006). Managing flexible work arrangements in US organizations: Formalized discretion or a 'right to ask'. *Socio-Economic Review, 4*(3), 379-416.

Support paid family leave and work exemptions that foster nurturing relationships and responsive caregiving, build parental resilience, and provide security for children

National Women's Law Center (2015). Employment Fact Sheet: Recently Introduced and Enacted State and Local Fair Scheduling Legislation. Washington, D.C. Retrieved from: www.nwlc.org

National Women's Law Center (2015). Employment Fact Sheet: Part-Time Workers Are Paid Less, Have Less Access to Benefits- and Two-Thirds Are Women. Washington, D.C. Retrieved from: www.nwlc.org

National Women's Law Center (2013). Employment Fact Sheet: Paid Leave is Crucial for Women and Families. Washington, D.C. Retrieved from: www.nwlc.org

Invest in strategies that address the behavioral and mental health of children and the adults who care for them

Hanson, L., Deere, D., Lee, C., Lewin, A., and Seval, C. (2001). Key principles in providing integrated behavioral health services for young children and their families: The starting early starting smart experience. Washington, DC: Casey Family Programs and the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

Mckelvey, L., Schiffman, R. F., Brophy-Herb, H. E., Bocknek, E. L., Fitzgerald, H. E., Reischl, T. M., Hawver, S. and Cunningham Deluca, M. (2015). Examining long-term effects of an infant mental health home-based early head start program on family strengths and resilience. *Infant Mental Health Journal.*, 36: 353–365. doi: 10.1002/imhj.21518

Ocasio, K., Alst, D., Koivunen, J., Huang, C., & Allegra, C. (2015). Promoting preschool mental health: Results of a 3 year primary prevention strategy. *Journal of Child and Family Studies, 24*(6), 1800-1808.

Perry, D. F. (2013). *Healthy Futures: Year three evaluation of early childhood mental health consultation.* Washington, DC: District of Columbia, Department of Mental Health. Retrieved February 4, 2015, from http://dbh.dc.gov/sites/default/files/dc/sites/dmh/publication/attachments/HealthyFuturesThreeYearEvaluationReport.pdf.

Danese, A., Moffitt, T. E., Harrington, H., Milne, B. J., Polanczyk, G., Pariante, C. M., . . . Caspi, A. (2009). Adverse childhood experiences and adult risk factors for age-related disease: Depression, inflammation, and clustering of metabolic risk markers. *Archives of Pediatric and Adolescent Medicine, 163*(12), 1135-1143.

Shonkoff, J. P., et al. (2012). The lifelong effects of Early Childhood Adversity and toxic stress. *Pediatrics,* 129, 232-246.

Horton, C. (2003). *Protective factors literature review: Early care and education programs and the prevention of child abuse and neglect*. Washington, DC: Center for the Study of Social Policy.

Reynolds, A. J. & Dylan L. R. (2003). School-Based Early Intervention and Later Child Maltreatment in the Chicago Longitudinal Study. *Child Development, 74*(1), 3–26.

De Graaf, I., Speetjens, P., Smit, F., De Wolff, M., & Tavecchio, L. (2008). Effectiveness of the Triple P Positive Parenting Program on behavioral problems in children: A meta-analysis. *Behavior Modification*, 32, 714-735.

Avellar, S., Paulsell, D., Sama Miller, E., & Del Grosso, P. (2012). *Home Visiting Evidence of Effectiveness Review: Executive Summary.* Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Washington, DC.

Kaufman, J., & Charney, D. (2001). Effects of early stress on brain structure and function: Implications for understanding the relationship between child maltreatment and depression. *Development and Psychopathology, 13*(3), 451-471.

Lieberman, A. F. (2004). Traumatic stress and quality of attachment: Reality and internalization in disorders of infant mental health. Infant Mental Health Journal, 25(4), 336-351.

Currie, J. & Stabile, M. B. (2004). Child mental health and human capital accumulation: The case of ADHD. On-line working paper series. Los Angeles, CA: California Center for Population Research.

Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005a). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the national comorbidity survey replication. Archives of General Psychiatry, 62, 593–602.

National Scientific Council on the Developing Child.(2008/2012). Establishing a Level Foundation for Life: Mental Health Begins in Early Childhood: Working Paper 6. Cambridge, MA: National Scientific Council on the Developing Child.

Shonkoff, J. P., Boyce, W. T., & McEwen, B. S. (2009). Neuroscience, molecular biology, and the childhood roots of health disparities. JAMA: the journal of the American Medical Association, 301(21), 2252-2259.

Burns, B. J., Phillips, S. D., Wagner, H. R., Barth, R. P., Kolko, D. J., Campbell, Y., & Landsverk, J. (2004). Mental health need and access to mental health services by youths involved with child welfare: A national survey. Journal of the American Academy of Child & Adolescent Psychiatry, 43(8), 960-970.

Cooper, J. L., Banghart, P., &Aratani, Y. (2010). Addressing the mental health needs of young children in the child welfare system: What every policymaker should know. New York, NY: National Center for Children in Poverty.

Burns, B. J., Phillips, S. D., Wagner, H. R., Barth, R. P., Kolko, D. J., Campbell, Y., & Landsverk, J. (2004). Mental health need and access to mental health services by youths involved with child welfare: A national survey. Journal of the American Academy of Child & Adolescent Psychiatry, 43(8), 960-970.

Kaye, N. & Rosenthal, J. (2008). Improving the delivery of health care that supports young children's healthy mental development: Update on accomplishments and lessons from a five–state consortium. Washington, DC: National Academy for State Health Policy; Johnson and Rosenthal (2009).

Spark Policy Institute. (2013). Early Childhood Health Integration Evaluation Brief Report #4: Screening and Referral Systems. Denver, CO: Spark Policy Institute.

Co-locate or coordinate services

Goodson, B. D., Mackrain, M., Perry, D. F., O'Brien, K., & Gwaltney, M. K. (2013). Enhancing home visiting with mental health consultation. Pediatrics,132(Supplement 2), S180-S190.

Perry, D. F., Allen, M. D., Brennan, E. M., & Bradley, J. R. (2010). The evidence base for mental health consultation in early childhood settings: A research synthesis addressing children's behavioral outcomes. Early Education and Development, 21(6), 795-824. http://www.tandfonline.com/doi/abs/10.1080/10409280903475444#.Viau936rSUk

Osofsky, J. D., & Lieberman, A. F. (2011). A call for integrating a mental health perspective into systems of care for abused and neglected infants and young children. American Psychologist, 66(2), 120. http://psycnet.apa.org/journals/amp/66/2/120/

Holmes, C., Levy, M., Smith, A., Pinne, S., & Neese, P. (2014). A Model for Creating a Supportive Trauma-Informed Culture for Children in Preschool Settings. Journal of child and family studies, 24(6), 1650-1659.

Rushton, F. E., & Kraft, C. (2013). Family support in the family-centered medical home: an opportunity for preventing toxic stress and its impact in young children: child health care providers offer valuable support and connections for families. Child abuse & neglect, 37, 41-50. http://www.sciencedirect.com/science/article/pii/S0145213413003347

Lee, S. Y., Benson, S. M., Klein, S. M., & Franke, T. M. (2015). Accessing quality early care and education for children in child welfare: Stakeholders' perspectives on barriers and opportunities for interagency collaboration. Children and Youth Services Review, 55, 170-181. http://www.sciencedirect.com/science/article/pii/S019074091500184X

Martin, K. S., Wolff, M., Lonczak, M., Chambers, M., Cooke, C., & Whitney, G. (2014). Formative Research to Examine Collaboration Between Special Supplemental Nutrition Program for Woman, Infants, and Children and Head Start Programs. Maternal and child health journal, 18(1), 326-332. http://link.springer.com/article/10.1007/s10995-013-1237-6

Reduce barriers to participation in public benefit programs (e.g. TANF, Head Start, child care subsidy, SNAP and WIC, Medicaid/CHIP, and the EITC) with universal on-line applications and aligned eligibility and enrollment policies

Cohen, R. (2010). Connecting Residents of Subsidized Housing with Mainstream Supportive Services: Challenges and Recommendations. Center for Housing Policy.

Dorn, A., Minton, S., & Huber, E. (2014). Examples of Promising Practices for Integrating and Coordinating Eligibility, Enrollment and Retention: Human Services and Health Programs Under the Affordable Care Act. Prepared for the Office of the Assistant Secretary for Planning and Evaluation, DHHS. Washington, DC: Urban Institute.

Hanlon, C. (2010). Improving the Lives of Young Children: Opportunities for Care Coordination and Case management for Children Receiving Services for Developmental Delay. Washington, DC: Urban Institute.

Employ navigators, centralize referral resources, and invest in hub strategies that integrate supports for parents and children in settings where families are

NataleÐPereira, A., Enard, K. R., Nevarez, L., & Jones, L. A. (2011). The role of patient navigators in eliminating health disparities. Cancer, 117(S15), 3541-3550. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4121958/

Woods, E. R., Bhaumik, U., Sommer, S. J., Ziniel, S. I., Kessler, A. J., Chan, E., ... & Nethersole, S. (2012). Community asthma initiative: evaluation of a quality improvement program for comprehensive asthma care. Pediatrics,129(3), 465-472.

Connect education and job training opportunities for parents with access to high quality early learning for their children

The Annie E. Casey Foundation. (2014). Creating Opportunities for Families: A Two Generation Approach. Baltimore, MD. Retrieved from www.aecf.org.

Johnson-Staub, C., Matthews, H., & Adams, C. G. (2015). Job Hours and Schedules: Implications for State Child Care and Development Fund Policies. CLASP and Urban Institute.

Adams, G., Heller, C. (2015). The Child Care Development Fund and workforce development for low-income parents: Opportunities and challenges with reauthorization. Urban Institute.

Adams, G., Heller, C., Spaulding, S., Derrick-Mills, T. (2014). Child Care Assistance for Parents in Education and Training: A Look at State CCDF Policy and Participation Data. Urban Institute.

Ascend at the Aspen Institute. (2013). Two Generations, One Future: Moving Parents and Children Beyond Poverty. The Aspen Institute. http://www.aspeninstitute.org/sites/default/files/content/docs/ascend/Ascend-Report-022012.pdf.

Stephanie Schmit, Hannah Matthews, and Olivia Golden. (2014). Thriving Children, Successful Parents: A Two-Generation Approach to Policy . CLASP

Connect learning environments to health and family support networks

Gruendel, J.M. (2014). Two (or more) generation frameworks: A look across and within. https://www.cga.ct.gov/coc/PDFs/two-gen/report_gruendel.pdf

Lombardi, J., Mosle, A., Patel, N., Schumacher, R., & Stedron, J. (2014). Gateways to two generations: The potential for early childhood programs and partnerships to support children and parents together. Washington, DC: Ascend at the Aspen Institute. http://b.3cdn.net/ascend/d3336cff8a154af047_07m6bttk2.pdf

Keyl, P. M., Hurtado, M. P., Barber, M. M., & Borton, J. (1996). School-based health centers: students' access, knowledge, and use of services. Archives of Pediatric and Adolescent Medicine, 150, 175-180.

Kaplan, D. W., Brindic, C. D., Phibbs, S. L., Melinkovich, P., Naylor, K., & Ahlstrand, K. (1999). A comparison study of an elementary school-based health center. Archives of Pediatric and Adolescent Medicine, 153, 235-243.

King, J. C., Stoddard, J. J., Gaglani, M. J., Moore, K. A., Magder, L., McClure, E., . . . Neuzil, K. (2006). Effectiveness of school-based influenza vaccination. New England Journal of Medicine, 355(24), 2523-2533.

Rones, M. & Hoagwood, K. (2000). School-based mental health services: A research review. Clinical Child and Family Psychology Review, 3(4), 223-242.

Egger, H. L., & Angold, A. (2006). Common emotional and behavioral disorders in preschool children: presentation, nosology, and epidemiology. Journal of Child Psychology and Psychiatry, 47(3/4), 313-337.

Kotch, J. B. (2005). Maternal and Child Health: Programs, Problems, and Policy in Public Health. Sudbury, MA: Jones and Bartlett Publishers.

Coordinate income support programs to minimize "cliff effects" that occur when a small increase in wages leads to a substantial decrease in benefits.

Blau, D. (2003). Child Care Subsidy Programs. In R. A. Moffitt (Eds.), Means-Tested Transfer Programs in the United States. (443-516). Chicago, IL: University of Chicago Press.

Romich, J., Simmelink, J., & Holt, S., (2007). When working harder does not pay: Low-income working families, tax liabilities, and benefit reductions. Families in Society, 88 (3), 418-426. http://familiesinsocietyjournal.org/doi/pdf/10.1606/1044-3894.3651

Develop a comprehensive, linked data system to inform planning, document progress, and ultimately improve the health, development, learning and success of children and their parents

Smith, S., Staub, D., & Myslewicz, M. (2007). Linking Education and Social Services Data to Improve Child Welfare. Washington, DC: Data Quality Campaign.

Cochenour, M., Chatis, C., Sellers, J., and Taylor, R. (2014). SLDS Early Childhood Integrated Data System Guide. U.S. Department of Education. Washington, DC: National Center for Education Statistics.

Early Childhood Data Collaborative. (2010). Building and using coordinated state early care and education data systems: A framework for state policymakers. Washington, DC: Early Childhood Data Collaborative.

Centralize and track screening, referral, diagnosis, and treatment

National Research Council and Institute of Medicine. (2004). Children's Health, the Nation's Wealth: Assessing and Improving Child Health. Committee on Evaluation of Children's Health. Board on Children, Youth, and Families, Division of Behavioral and Social Sciences and Education. Washington, DC: The National Academies Press.

Health Resources and Services Administration (2014). MIECHV Issue Brief on Centralized Intake Systems. Maternal, Infant, and Early Childhood Home Visiting Technical Assistance Coordinating Center.

Support training for parents, service providers, and policymakers to accurately interpret and use data

Harvard Family Research Project (2013).TIPS for Administrators, Teacher, and Families: How to Share Data Effectively. Cambridge, MA: Harvard Family Research Project.

National Center on Parent, Family, and Community Engagement. (UNKNOWN). Measuring what Matters: Using Data to Support Family Progress Overview.

Prepared for the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start.

Derrick-Mills, T., Winkler, M. K., Healy, O., & Greenberg, E. (2015). A Resource Guide for Head Start Programs: Moving Beyond a Culture of Compliance to a Culture of Continuous Improvement. Submitted to the Office of Planning, Research and Evaluation Administration for Children and Families and Administration for Children and Families U.S. Department of Health and Human Services. Washington, DC: Urban Institute.

Bornfreund, L., Severns, M., & Early Education Initiative. (2010). Many Missing Pieces: The Difficult Task of Linking Early Childhood Data and School-Based Data Systems. Issue Brief. Washington, DC: New America Foundation. Data Quality Campaign. Early Care and Education Data Landscape. Washington, DC: Data Quality Campaign.

6 Sard, B. & Rice, D. (2014). Creating Opportunity for Children: How Housing Location Can Make a Difference. Washington, DC: Center on Budget and Policy Priorities.

7 Small, M. L. (2006). Neighborhood institutions as resource brokers: Childcare centers, interorganizational ties, and resource access among the poor. Social Problems, 53 (2), 274-292.

8 Avellar, S., Paulsell, D., Sama Miller, E., & Del Grosso, P. (2012). Home Visiting Evidence of Effectiveness Review: Executive Summary. Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Washington, DC.

Langford, J. (2009). The role of family support in an integrated early childhood system: Helping families get what they need to support their children's development. Washington, DC: Center for the Study of Social Policy.

9 Forry, N., Daneri, P., Howarth, G. (2013). Child Care Subsidy Literature Review. Prepared for OPRE Brief 2013-60. Retrieved from http://www.acf.hhs.gov/sites/default/files/opre/subsidy_literature_review.pdf.

10 Garner, A. S., Shonkoff, J. P., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., ... & Wood, D. L. (2012). Early childhood adversity, toxic stress, and the role of the pediatrician: translating developmental science into lifelong health. Pediatrics, 129(1), e224-e231.

11 Lombardi, J., Mosle, A., Patel, N., Schumacher, R. & Stedron, J. (2014). Gateways to Two Generations: The Potential for Early Childhood Programs and Partnerships to Support Children and Parents Together. Washington DC: Ascend, Aspen Institute

Love, J., Kisker, E., Ross, C., Raikes, H., Constantine, J., . . . Boller, K. (2005). The effectiveness of Early Head Start for 3-year-old children and their parents: Lessons for policy and programs. Developmental Psychology, 41(6), 885-901.

12 Early Childhood Data Collaborative. (2010). Building and using coordinated state early care and education data systems: A framework for state policymakers. Washington, DC: Early Childhood Data Collaborative.

13 Brown, B., & Corbett, T. (1997). Social Indicators and Public Policy in the Age of Devolution. Washington, DC: Pew Charitable Trusts.

Lippman, L. (2007). Indicators and indices of child well-being: A brief American history. Social Indicators Research, 83, 39-53.

Moore, K. A., Brown, B., & Scarupa, J. (2003). The uses (and misues) of social indicators: Implications for public policy. Washington, DC: Child Trends.

Murphey, D. (2010). Early childhood indicators: Making the most of measurement. Early Childhood Highlights. Washington DC: Child Trends.

HEALTH

14 DiPrete, T.A.,,&Eirich, G.M. (2006). Cumulative advantage as a mechanisms for inequality: A review of theoretical and empirical developments. Annual Review of Sociology, 32, 271-297.

Hayward, M.D., & Gorman, B.K. (2004). The long arm of childhood: The influence of early-life social conditions on men's mortality. Demography, 41(1), 87-107.

Willson, A.E., Shuey, K.M., & Elder, G.H., Jr. (2007). Cumulative advantage processes as mechanisms of inequality in life course health. American Journal of Sociology, 112(6), 1886-1924.

15 O'Scholl, T., & Johnson, W.G. (2000). Folic acid: influence on the outcome of pregnancy. American Journal of Clinical Nutrition, 71, 1295S-1303S.

Barker, D.J.P. (2006).Adult consequences of fetal growth restriction.Clinical Obstetrics and Gynecology, 49(2), 270-283.

16 Center on the Developing Child at Harvard University. (2010). The Foundations of Lifelong Health Are Built in Early Childhood. Cambridge, MA: Harvard University. Retrieved from http://www.developingchild.harvard.edu.

Dong, M., Giles, W. H., Felitti, V. J., Dube, S. R., Williams, J. E., Chapman, D. P., & Anda, R. F. (2004). Insights into causal pathways for ischemic heart disease adverse childhood experiences study. Circulation, 110(13), 1761-1766.

Leunissen, R.W.J., Kerkhof, G.F., Stijnen, T., &Hokken-Koelega, A. (2009). Timing and tempo of first-year rapid growth in relation to cardiovascular and metabolic risk profile in early adulthood. Journal of American Medical Association, 301(21), 2234-2242.

Painter, B.C., de Rooij, S.R., Bossuyt, P.M., Simmers, T.A., Osmond, C., Barker, D.J., . . .&Roseboom, T.J. (2006). Early onset of coronary artery disease after prenatal exposure to the Dutch famine. American Journal of Clinical Nutrition, 84, 322-327.

Foltz, J.L., May, A.L., Belay, B., Nihiser, A.J., Dooyema, C.A., &Blanck, H.M. (2012). Population-level intervention strategies and examples for obesity prevention in children. Annual Review of Nutrition, 32, 391-415.

17 Johnson, S.B., Riley, A.W., Granger, D.A., & Riis, J. (2012).The science of early life toxic stress for pediatric practice and advocacy. Pediatrics, 131(2), 319-327.

Shonkoff, J.P., Boyce, W.T., McEwen, B.S. (2009). Neuroscience, molecular biology, and the childhood roots of health disparities: Building a new framework for health promotion and disease prevention. Journal of American Medical Association, 301(21), 2252-2259.

18 Danese, A., Moffitt, T.E., Harrington, H., Milne, B.J., Polanczyk, G., Pariante, C.M., . . .&Caspi, A. (2009). Adverse childhood experiences and adult risk factors for age-related disease: Depression, inflammation, and clustering of metabolic risk markers. Archives of Pediatric and Adolescent Medicine, 163(12), 1135-1143.

Dong, M., Giles, W. H., Felitti, V. J., Dube, S. R., Williams, J. E., Chapman, D. P., & Anda, R. F. (2004). Insights into causal pathways for ischemic heart disease adverse childhood experiences study. Circulation, 110(13), 1761-1766.

Chapman, Daniel P., et al. "Adverse childhood experiences and the risk of depressive disorders in adulthood." Journal of affective disorders 82.2 (2004): 217-225.

Shonkoff, J.P., et al. (2012). The lifelong effects of Early Childhood Adversity and toxic stress. Pediatrics, 129, 232-246.

19 Shonkoff, J.P., Boyce, W.T., McEwen, B.S. (2009). Neuroscience, molecular biology, and the childhood roots of health disparities: Building a new framework for health promotion and disease prevention. Journal of American Medical Association, 301(21), 2252-2259.

20 Fuller, B., Bridges, M., Bein, E., Jang, H., Jung S., Rabe-Hesketh, S., Halfon, N., &Kuo, A. (2009). The health and cognitive growth of Latino toddlers: At risk or immigrant paradox? Maternal and Child Health Journal, 13, 755–768.

21 Jyoti, D. F., Frongillo, E. A., & Jones, S. J. (2005). Food insecurity affects school children's academic performance, weight gain, and social skills. The Journal of nutrition, 135(12), 2831-2839

Center for Disease Control. (2013). The Case for Coordinated School Health. Atlanta, GA: CDC. Retrieved from http://www.cdc.gov/ healthyyouth/cshp/case.htm

22 Families USA. (2006).Why health insurance matters for children. Washington, DC: Campaign for Children's Health Care. Retrieved from http://www.childrenshealthcampaign.org/assets/pdf/Kids-Why-Insurance-Matters.pdf

Devoe, J.E., Tillotson, C.J., Wallace, L.S., Lesko, S.E., & Angier, H. (2012). The effects of health insurance and a usual source of care on a child's receipt of health care. Journal of Pediatric Health Care, 26(5), e25-35.

Eisert, S. &Gabow, P. (2002). Effect of child health insurance plan enrollment on the utilization of health care services by children using a public safety net system. Pediatrics, 110, 940-945.

Newacheck, P.W., Stoddard, J.J., Hughes, D.C., & Pearl, M. (1998). Health insurance and access to primary care for children. The New England Journal of Medicine, 338(8), 513-519.

23 Shonkoff, J.P., Boyce, W.T., &McEwen, B.S. (2009). Neuroscience, molecular biology, and the childhood roots of health disparities: Building a new framework for health promotion and disease prevention. Journal of American Medical Association, 301(21), 2252-2259.

Knudsen, E.I., Heckman, J.J., Cameron, J.L., &Shonkoff, J.P. (2006). Economic, neurobiological, and behavioral perspectives on building America's future workforce. Proceedings of the National Academy of Sciences U S A,103, 10155-10162.

24 Flores, G., & Lesley, B. (2014). Children and US Federal Policy on Health and Health Care: Seen but Not Heard. JAMA pediatrics, 168(12), 1155-1163.

25 DeVoe, J. E., Tillotson, C. J., Marino, M., O'Malley, J., Angier, H., Wallace, L. S., & Gold, R. (2015). Trends in Type of Health Insurance Coverage for US Children and Their Parents, 1998–2011. Academic pediatrics.

26 Hill, I., Benatar, S., Howell, E., Courtot, B., Wilkinson, M., Hoag, S. D., ... & Peebles, V. (2015). CHIP and Medicaid: Evolving to Meet the Needs of Children. Academic pediatrics, 15(3), S19-S27.

Expand outreach

DeVoe, J. E., Tillotson, C. J., Marino, M., O'Malley, J., Angier, H., Wallace, L. S., & Gold, R. (2015). Trends in Type of Health Insurance Coverage for US Children and Their Parents, 1998–2011. Academic pediatrics.

DeVoe, J. E., Marino, M., Angier, H., O'Malley, J. P., Crawford, C., Nelson, C., ... & Gold, R. (2015). Effect of Expanding Medicaid for Parents on Children's Health Insurance Coverage: Lessons From the Oregon Experiment. JAMA pediatrics, 169(1),

David J. Becker, Justin Blackburn, Michael A. Morrisey, Bisakha Sen, Meredith L. Kilgore, Cathy Caldwell, Chris Sellers, Nir Menachemi, Enrollment, Expenditures, and Utilization After CHIP Expansion: Evidence From Alabama, Academic Pediatrics, Volume 15, Issue 3, May–June 2015, Pages 258-266.

Haggins, A., Patrick, S., Demonner, S., & Davis, M. M. (2013). When Coverage Expands: Children's Health Insurance Program as a Natural Experiment in Use of Health Care Services. Academic Emergency Medicine, 20(10), 1026-1032.

Goldstein, I. M., Kostova, D., Foltz, J. L., & Kenney, G. M. (2014). The Impact Of Recent CHIP Eligibility Expansions On Children's Insurance Coverage, 2008–12. Health Affairs, 10-1377.

Simplify enrollment

Blavin, F., Kenney, G. M., & Huntress, M. (2014). The effects of express lane eligibility on Medicaid and CHIP enrollment among children. Health services research, 49(4), 1268-1289.

Trenholm, C., Harrington, M., & Dye, C. (2015). Enrollment and disenrollment experiences of families covered by CHIP. Academic pediatrics, 15(3), S44-S49.

Hudson, J. L., & Abdus, S. (2015). Coverage And Care Consequences For Families In Which Children Have Mixed Eligibility For Public Insurance. Health Affairs, 34(8), 1340-1348.

Hill, I., Benatar, S., Howell, E., Courtot, B., Wilkinson, M., Hoag, S. D., ... & Peebles, V. (2015). CHIP and Medicaid: Evolving to Meet the Needs of Children. Academic pediatrics, 15(3), S19-S27.

Eliminate barriers to retention

Simon, A. E., Driscoll, A., Gorina, Y., Parker, J. D., & Schoendorf, K. C. (2013). A longitudinal view of child enrollment in Medicaid. Pediatrics, 132(4), 656-662.

Fairbrother, G., Madhavan, G., Goudie, A., Watring, J., Sebastian, R. A., Ranbom, L., & Simpson, L. A. (2011). Reporting on continuity of coverage for children in Medicaid and CHIP: what states can learn from monitoring continuity and duration of coverage. Academic pediatrics, 11(4), 318-325.

Sommers, B. D. (2006). Insuring children or insuring families: Do parental and sibling coverage lead to improved retention of children in Medicaid and CHIP?. Journal of health economics, 25(6), 1154-1169.

Address health care shortages-both of providers who accept Medicaid/CHIP, and of providers who offer specialized care

Devoe, J. E., Tillotson, C. J., Wallace, L. S., Lesko, S. E., & Angier, H. (2012). The effects of health insurance and a usual source of care on a child's receipt of health care. Journal of Pediatric Health Care, 26(5), e25-35.

Hakim, R. B., Babish, J. D., & Davis, A. C. (2012). State of dental care among Medicaid-enrolled children in the United States. Pediatrics, peds-2011.

Pourat, N., & Finocchio, L. (2010). Racial and ethnic disparities in dental care for publicly insured children. Health Affairs, 29(7), 1356-1363.

Children's Dental Health Project. (2012). Dental Visits for Medicaid Children: Analysis and Policy Recommendations. Issue Brief. https://www.cdhp.org/resources/173-dental-visits-for-medicaid-children-analysis-policy-recommendations

QUALIS Health. (2012). Oral Health Integration in the Patient Centered Medical Home.

Effective Partnerships Guide: Improving Oral Health for Migrant Seasonal Head Start Children and their Families. http://eclkc.ohs.acf.hhs.gov/hslc/states/collaboration/docs/effective-partnerships-guide-oral-health-mshs-v3.pdf

Koppelman, J. (2004, October). The provider system for children's mental health: workforce capacity and effective treatment. Washington, DC: National Health Policy Forum.

Thomas, C. R., & Holzer, C. E. (2006). The continuing shortage of child and adolescent psychiatrists. Journal of the American Academy of Child & Adolescent Psychiatry, 45(9), 1023-1031.

Winitzer, R. F., Bisgaier, J., Grogan, C., & Rhodes, K. (2012). "He only takes those type of patients on certain days": Specialty care access for children with special health care needs. Disability and health journal, 5(1), 26-33.

Kuhlthau, K., Ferris, T. G., Beal, A. C., Gortmaker, S. L., & Perrin, J. M. (2001). Who cares for Medicaid-enrolled children with chronic conditions? Pediatrics, 108(4), 906-912.

Zuckerman, K. E., Mattox, K. M., Sinche, B. K., Blaschke, G. S., & Bethell, C. (2014). Racial, Ethnic, and Language Disparities in Early Childhood Developmental/Behavioral Evaluations. A Narrative Review. Clinical pediatrics,53(7), 619-631.

27 Garner, A. S., Shonkoff, J. P., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., ... & Wood, D. L. (2012). Early childhood adversity, toxic stress, and the role of the pediatrician: translating developmental science into lifelong health. Pediatrics, 129(1), e224-e231.

28 Strickland, B. B., Jones, J. R., Ghandour, R. M., Kogan, M. D., & Newacheck, P. W. (2011). The medical home: health care access and impact for children and youth in the United States. Pediatrics, 127(4), 604-611.

Promote timely use of prenatal and pediatric health care

Partridge, S., Balayla, J., Holcroft, C. A., & Abenhaim, H. A. (2012). Inadequate prenatal care utilization and risks of infant mortality and poor birth outcome: a retrospective analysis of 28,729,765 US deliveries over 8 years. American journal of perinatology, 29(10), 787.

Tilden, E. L., Hersh, S. R., Emeis, C. L., Weinstein, S. R., & Caughey, A. B. (2014). Group Prenatal Care: Review of Outcomes and Recommendations for Model Implementation. Obstetrical & gynecological survey, 69(1), 46-55. http://journals.lww.com/obgynsurvey/Abstract/2014/01000/Group_Prenatal_Care___Review_of_Outcomes_and.17.aspx

Garner, A. S., Shonkoff, J. P., Siegel, B. S., Dobbins, M. I., Earls, M. F., McGuinn, L., ... & Wood, D. L. (2012). Early childhood adversity, toxic stress, and the role of the pediatrician: translating developmental science into lifelong health. Pediatrics, 129(1), e224-e231. http://pediatrics.aappublications.org/content/129/1/e224.full.pdf+html

U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. Women's Health USA 2009. Rockville, Maryland: U.S. Department of Health and Human Services, 2009.

Alexander, G.R., & Kotelchuck, M. (2001). Assessing the role and effectiveness of prenatal care: History, challenges, and directions for future research. Public Health Reports, 116, 306-317.

Buck, G.M., Cookfair, D.L., Michalek, A.M., Nasca, P.C., Standfast S.J., & Sever, L.E. (1990). Timing of prenatal care and risk of sudden infant death syndrome. International Journal of Epidemiology, 19(4), 991-996.

Centers for Disease Control and Prevention. (1992). Recommendations for the use of folic acid to reduce the number of cases of spina bifida and other neural tube defects. Morbidity and Mortality Weekly Report, 44, 903.

Center on the Developing Child at Harvard University. (2010). The Foundations of Lifelong Health Are Built in Early Childhood. Cambridge, MA: Harvard University. Retrieved from http://www.developingchild.harvard.edu.

Evans, W.N., & Lien, D.S. (2005). The benefits of prenatal care: evidence from the PAT bus strike. Journal of Econometrics, 125, 207-239.

Shonkoff, J.P., et al. (2012). The lifelong effects of Early Childhood Adversity and toxic stress. Pediatrics, 129, 232-246.

Danese, A., Moffitt, T.E., Harrington, H., Milne, B.J., Polanczyk, G., Pariante, C.M., Poulton, R., &Caspi, A. (2009). Adverse childhood experiences and adult risk factors for age-related disease: Depression, inflammation, and clustering of metabolic risk markers. Archives of Pediatric and Adolescent Medicine, 163(12), 1135-1143.

Kotch, J. B. (2005). Maternal and child health: Programs, problems, and policy in public health. Sudbury, MA: Jones and Bartlett Publishers.

American Academy of Pediatrics/Bright Futures, Committee on Practice and Ambulatory Medicine. Recommendations for Preventive Pediatric Health Care (RE9939). Elk Grove Village, IL: American Academy of Pediatrics, 2000.

Central Intelligence Agency. (2013). World Factbook. Langley, VA: CIA. https://www.cia.gov/library/publications/download/download-2013/

Scholl, T. O., & Johnson, W. G. (2000). Folic acid: Influence on the outcome of pregnancy. American Journal of Clinical Nutrition, 71(suppl), 1295-1303.

UN Interagency Group for Child Mortality Estimation. (2012). Levels and Trends in Child Mortality, Report 2012. New York, New York: United Nations Children's Fund.

Barker, D. J. (2004). The developmental origins of adult disease. Journal of the American College of Nutrition, 23, 588S-595S. As cited in: Center on the Developing Child at Harvard University (2010). The Foundations of Lifelong Health Are Built in Early Childhood.

Require universal newborn screening for hearing and metabolic disorders, and vision screening between ages one and five

Boyle, C. A., Bocchini, J. A., & Kelly, J. (2014). Reflections on 50 years of newborn screening. Pediatrics, 133(6), 961-963.

Winston, R., & Ditty, K. M. (2013). Newborn hearing screening. A Resource Guide for Early Hearing Detection and Intervention. Logan, UT: Utah State University, 1-14.

Bennett, M. J. (2014). Newborn screening for metabolic diseases: Saving children's lives and improving outcomes. Clinical biochemistry, 47(9), 693-694.

Longmuir, S. Q., Boese, E. A., Pfeifer, W., Zimmerman, B., Short, L., & Scott, W. E. (2013). Practical community photo screening in very young children. Pediatrics, 131(3), e764-e769.

American Academy of Pediatrics Section on Ophthalmology and. (2012). Instrument-based pediatric vision screening policy statement. Pediatrics, 130(5), 983-986.

U.S. Preventive Services Task Force. Screening for visual impairment in children younger than 5 years: Recommendation statement. Annals of Family Medicine, 2, 264–266.

Sices, L. (2007). Developmental screening in primary care: the effectiveness of current practice and recommendations for improvement. New York, NY: Commonwealth Fund.

Mackrides, P. S. & Pyherd, S. J. (2011). Screening for Developmental Delay. American Family Physician, 84(5), 544-549.

The Division for Early Childhood. (2013). Recommended Practices. Los Angeles, CA: The Division for Early Childhood, The Council for Exceptional Children.

Council on Children With Disabilities, Section on Developmental Behavioral Pediatrics, Bright Futures Steering Committee, Medical Home Initiatives for Children With Special Needs Project Advisory Committee. (2006). Identifying Infants and Young Children With Developmental Disorders in the Medical Home: An Algorithm for Developmental Surveillance and Screening. Pediatrics, 118, 405-420.

American Academy of Pediatrics, Council on Children With Disabilities. (2005). Care coordination in the medical home: integrating health and related systems of care for children with special health care needs. Pediatrics, 116, 1238-1244.

Clements, K. M., Barfield, W. D., Kotelchuck, M., & Wilber, N. (2008). Maternal socio-economic and race/ethnic characteristics associated with early intervention participation. Maternal and child health journal, 12(6), 708-717.

Roberts, G., Howard, K., Spittle, A. J., Brown, N. C., Anderson, P. J., & Doyle, L. W. (2008). Rates of early intervention services in very preterm children with developmental disabilities at age 2 years. Journal of pediatrics and child health, 44(5), 276-280.

Rosenberg, S. A., Zhang, D., & Robinson, C. C. (2008). Prevalence of developmental delays and participation in early intervention services for young children. Pediatrics, 121(6), e1503-e1509.

Tang, B. G., Feldman, H. M., Huffman, L. C., Kagawa, K. J., & Gould, J. B. (2012). Missed opportunities in the referral of high-risk infants to early intervention. Pediatrics, 129(6), 1027-1034.

Screen for developmental disabilities and delays according to the schedule recommended by American Academy of Pediatrics

Radecki, L., Sand-Loud, N., O'Connor, K. G., Sharp, S., & Olson, L. M. (2011). Trends in the use of standardized tools for developmental screening in early childhood: 2002–2009. Pediatrics, 128(1), 14-19.

Macy, M. (2012). The evidence behind developmental screening instruments. Infants & Young Children, 25(1), 19-61.

King, T. M., Tandon, S. D., Macias, M. M., Healy, J. A., Duncan, P. M., Swigonski, N. L., ... & Lipkin, P. H. (2010). Implementing developmental screening and referrals: lessons learned from a national project. Pediatrics,125(2), 350-360.

Bright Futures Steering Committee, & Medical Home Initiatives for Children With Special Needs Project Advisory Committee. (2006). Identifying infants and young children with developmental disorders in the medical home: An algorithm for developmental surveillance and screening. Pediatrics, 118(1), 405-420.

Roberts, G., Howard, K., Spittle, A. J., Brown, N. C., Anderson, P. J., & Doyle, L. W. (2008). Rates of early intervention services in very preterm children with developmental disabilities at age 2 years. Journal of pediatrics and child health, 44(5), 276-280.

Rosenberg, S. A., Zhang, D., & Robinson, C. C. (2008). Prevalence of developmental delays and participation in early intervention services for young children. Pediatrics, 121(6), e1503-e1509.

Tang, B. G., Feldman, H. M., Huffman, L. C., Kagawa, K. J., & Gould, J. B. (2012). Missed opportunities in the referral of high-risk infants to early intervention. Pediatrics, 129(6), 1027-1034.

Increase access to comprehensive health (medical) homes that identify and respond to the physical, social, and emotional determinants of health

Strickland, B. B., Jones, J. R., Ghandour, R. M., Kogan, M. D., & Newacheck, P. W. (2011). The medical home: health care access and impact for children and youth in the United States. Pediatrics, 127(4), 604-611.

Raphael, J. L., Cooley, W. C., Vega, A., Kowalkowski, M. A., Tran, X., Treadwell, J., ... & Giordano, T. P. (2015). Outcomes for Children with Chronic Conditions Associated with Parent- and Provider-reported Measures of the Medical Home. Journal of health care for the poor and underserved, 26(2), 358-376.

Hadland, S. E., & Long, W. E. (2014). A systematic review of the medical home for children without special health care needs. Maternal and child health journal, 18(4), 891-898.

Romaire, M. A., Bell, J. F., & Grossman, D. C. (2012). Health care use and expenditures associated with access to the medical home for children and youth. Medical care, 50(3), 262-269.

Miller, J. E., Nugent, C. N., Gaboda, D., & Russell, L. B. (2013). Reasons for unmet need for child and family health services among children with special health care needs with and without medical homes.

Tschudy, M. M., Toomey, S. L., & Cheng, T. L. (2013). Merging systems: integrating home visitation and the family-centered medical home. Pediatrics, 132(Supplement 2), S74-S81.

QUALIS Health. (2012). Oral Health Integration in the Patient Centered Medical Home. http://www.qualishealth.org/sites/default/files/white-paper-oral-health-integration-pcmh.pdf

Prioritize funding for prevention programs, including those delivered outside of traditional medical settings

Wachs, T. D., Georgieff, M., Cusick, S., & McEwen, B. S. (2014). Issues in the timing of integrated early interventions: contributions from nutrition, neuroscience, and psychological research. Annals of the New York Academy of Sciences, 1308(1), 89-106.

Campbell, F., Conti, G., Heckman, J. J., Moon, S. H., Pinto, R., Pungello, E., & Pan, Y. (2014). Early childhood investments substantially boost adult health. Science, 343(6178), 1478-1485.

Conti, G., Heckman, J. J., & Pinto, R. (2015). The Effects of Two Influential Early Childhood Interventions on Health and Healthy Behaviors (No. w21454). National Bureau of Economic Research.

Paulsell, D., Del Grosso, P., & Supplee, L. (2014). Supporting replication and scale-up of evidence-based home visiting programs: Assessing the implementation knowledge base. American journal of public health, 104(9), 1624-1632.

Kitzman, H. J., Olds, D. L., Cole, R. E., Hanks, C. A., Anson, E. A., Arcoleo, K. J., ... & Holmberg, J. R. (2010). Enduring effects of prenatal and infancy home visiting by nurses on children: follow-up of a randomized trial among children at age 12 years. Archives of pediatrics & adolescent medicine, 164(5), 412-418.

Avellar, S., Paulsell, D., Sama-Miller, E., Del Grosso, P., Akers, L., and Kleinman, R. (2015). Home Visiting Evidence of Effectiveness Review: Executive Summary. Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Washington, DC.

U.S. Department of Health and Human Services, Administration for Children and Families (January 2010). Head Start Impact Study. Final Report. Washington, DC.

Bartik, T. J. (2014). From Preschool to Prosperity: The Economic Payoff to Early Childhood Education.

Love, J. M., Kisker, E. E., Ross, C., Raikes, H., Constantine, J., Boller, K., ... & Vogel, C. (2005). The effectiveness of early head start for 3-year-old children and their parents: lessons for policy and programs. Developmental psychology,41(6), 885.

Love, J. M., Chazan-Cohen, R., Raikes, H., & Brooks-Gunn, J. (2013). What makes a difference: Early Head Start evaluation findings in a developmental context. Monographs of the Society for Research in Child Development, 78(1), vii-viii.

Increase participation of families, child care providers, schools, and communities in federal nutrition programs

Coleman-Jensen, A., Nord, M., & Singh, A. (2013). Household Food Security in the United States in 2012.

Jyoti, D. F., Frongillo, E. A., & Jones, S. J. (2005). Food insecurity affects school children's academic performance, weight gain, and social skills. The Journal of nutrition, 135(12), 2831-2839.

Schultz, D. J., Shanks, C. B., & Houghtaling, B. (2015). The Impact of the 2009 Special Supplemental Nutrition Program for Women, Infants, and Children Food Package Revisions on Participants: A Systematic Review. Journal of the Academy of Nutrition and Dietetics.

Gai, Y., & Feng, L. (2012). Effects of federal nutrition program on birth outcomes. Atlantic Economic Journal, 40(1), 61-83.

Whitaker, R. C., Phillips, S. M., & Orzol, S. M. (2006). Food insecurity and the risks of depression and anxiety in mothers and behavior problems in their preschool-aged children. Pediatrics, 118(3), e859-e868.

Rose-Jacobs, R., Black, M. M., Casey, P. H., Cook, J. T., Cutts, D. B., Chilton, M., ... & Frank, D. A. (2008). Household food insecurity: associations with at-risk infant and toddler development. Pediatrics, 121(1), 65-72

Mabli, J., & Ohls, J. (2015). Supplemental Nutrition Assistance Program Participation Is Associated with an Increase in Household Food Security in a National Evaluation. The Journal of nutrition, 145(2), 344-351.

Black, M. M., Quigg, A. M., Cook, J., Casey, P. H., Cutts, D. B., Chilton, M., ... & Frank, D. A. (2012). WIC participation and attenuation of stress-related child health risks of household food insecurity and caregiver depressive symptoms. Archives of pediatrics & adolescent medicine, 166(5), 444-451.

Jackson, M. I. (2015). Early childhood WIC participation, cognitive development and academic achievement. Social Science & Medicine, 126, 145-153.

Ritchie, L. D., Boyle, M., Chandran, K., Spector, P., Whaley, S. E., James, P., Samuels, S., . . . Crawford, P. (2012). Participation in the Child and Adult Care Food Program is associated with more nutritious foods and beverages in child care. Childhood Obesity, B(3), 224-229.

29 Mistry, K. B., Chesley, F., LLanos, K., & Dougherty, D. (2014). Advancing Children's Health Care and Outcomes Through the Pediatric Quality Measures Program. Academic pediatrics, 14(5), S19-S26.

IOM (Institute of Medicine). 2011. Child and Adolescent Health and Health Care Quality: Measuring What Matters. Washington, DC: The National Academies Press.

30 Oral, R., et al. (2015). "Adverse Childhood Experiences and Trauma Informed Care: The Future of Health Care." Pediatr Res.

Implement health care data systems to track and improve referral and follow-up services

Esquivel, A., Sittig, D. F., Murphy, D. R., & Singh, H. (2012). Improving the effectiveness of electronic health record-based referral processes. BMC medical informatics and decision making, 12(1), 107.

Zuckerman, K. E., Perrin, J. M., Hobrecker, K., & Donelan, K. (2013). Barriers to specialty care and specialty referral completion in the community health center setting. The Journal of pediatrics, 162(2), 409-414.

Feuchtbaum, L., Dowray, S., & Lorey, F. (2010). The context and approach for the California newborn screening short-and long-term follow-up data system: preliminary findings. Genetics in Medicine, 12, S242-S250.

Hinton, C. F., Mai, C. T., Nabukera, S. K., Botto, L. D., Feuchtbaum, L., Romitti, P. A., ... & Olney, R. S. (2013). Developing a public health-tracking system for follow-up of newborn screening metabolic conditions: a four-state pilot project structure and initial findings. Genetics in Medicine, 16(6), 484-490.

Hartmann, E. E., Block, S. S., & Wallace, D. K. (2015). Vision and Eye Health in Children 36 to< 72 Months: Proposed Data System. Optometry and Vision Science, 92(1), 24.

Maximize screening, diagnosis and treatment of maternal depression and early childhood behavioral health issues using new opportunities under the Affordable Care Act

Howell, E., Golden, O., & Beardslee, W. (2013). Emerging opportunities for addressing maternal depression under Medicaid. Washington, DC: The Urban Institute.

ftp://datatools.urban.org/pubs_prod/2013/pdf/batch2/412758-Emerging-Opportunities-for-Addressing-Maternal-Depression-under-Medicaid.pdf

Horowitz, J. A., Murphy, C. A., Gregory, K., Wojcik, J., Pulcini, J., & Solon, L. (2013). Nurse home visits improve maternal/infant interaction and decrease severity of postpartum depression. Journal of Obstetric, Gynecologic, & Neonatal Nursing, 42(3), 287-300.

Avellar, S. A., & Supplee, L. H. (2013). Effectiveness of home visiting in improving child health and reducing child maltreatment. Pediatrics,132(Supplement 2), S90-S99.

Tandon, S. D., Leis, J. A., Mendelson, T., Perry, D. F., & Kemp, K. (2014). Six-month outcomes from a randomized controlled trial to prevent perinatal depression in low-income home visiting clients. Maternal and child health journal, 18(4), 873-881.

Fraser, M. E., & Lanier, P. (2015). Child Mental Health Policy. Social policy for children and families: A risk and resilience perspective, 125.

Improve coordination between IDEA Part B and C, primary care, and public health programs

Adams, R. C., Tapia, C., Murphy, N. A., Norwood, K. W., Burke, R. T., Friedman, S. L., ... & Wiley, S. E. (2013). Early intervention, IDEA part C services, and the medical home: Collaboration for best practice and best outcomes. Pediatrics, 132(4), e1073-e1088.

Macy, M., Marks, K., & Towle, A. (2014). Missed, Misused, or Mismanaged Improving Early Detection Systems to Optimize Child Outcomes. Topics in Early Childhood Special Education, 34(2), 94-105.

Edwards, N. M., Gallagher, P. A., & Green, K. B. (2013). Existing and proposed child find initiatives in one state's part C program. Rural Special Education Quarterly, 32(1), 11.

Corr, C., Santos, R. M., & Fowler, S. A. (2015). The Components of Early Intervention Services for Families Living in Poverty A Review of the Literature. Topics in Early Childhood Special Education, 0271121415595551.

Overson, K., & McConnell, S. (2015). Part C Services and Homeless/Highly Mobile Children and Families. http://www.cehd.umn.edu/cEED/projects/PartCandHHMChildren2.6.15.pdf

Behar, Lenore B. "Mental Health Management." Handbook of Mental Health Administration and Management (2013): 149.

FAMILY SUPPORT

31 The term "parent" is used to denote those responsible for the daily care and well-being of children, though children's primary caregiver(s) are sometimes not their biological parent(s

32 Langford, J. (2009). The role of family support in an integrated early childhood system: Helping families get what they need to support their children's development. Washington, DC: Center for the Study of Social Policy.

Cox, M. J. & Harter, K. S. M. (2003). Parent-Child Relationship. In Bornstein, M. et al. (Eds.), Well-Being: Positive Development Across the Life Course (pp. 191-204). Mahwah, N.J.: Lawrence Erlbaum Associates, Inc.

33 Coie, J. D. (1996). Prevention of violence and antisocial behavior. In R. D. Peters & R. J. McMahon (Eds.), Preventing childhood disorders, substance abuse, and delinquency (pp. 1-18). Thousand Oaks, CA: Sage.

Loeber, R., & Farrington, D. P. (1998). Never too early, never too late: Risk factors and successful interventions for serious and violent juvenile offenders. Studies on Crime and Crime Prevention, 7(1), 7-30.

Zaslow, M. J., Dion, M. R., Hair, E., Sargent, J. & Ahluwalia, S. (2001). Maternal depressive symptoms and low literacy as potential barriers to employment in a sample of families receiving welfare: Are there two generational implications? Women and Health, 32, 211-251.

34 Langford, J. (2009). The role of family support in an integrated early childhood system: Helping families get what they need to support their children's development. Washington, DC: Center for the Study of Social Policy.

35 Roggman, L. A., Boyce, L. K., & Cook, G. A. (2009). Keeping kids on track: Impacts of a parenting-focused Early Head Start program on attachment security and cognitive development. Early Education and Development, 20(6), 920-941.

36 Marcynyszyn, L. A., Maher, E. J., & Corwin, T. W. (2011). Getting with the (evidencebased) program: An evaluation of the Incredible Years parenting training program in child welfare. Children and Youth Services Review, 33, 747-757.

37 Bromer, J., & Henly, J. R., (2004). Child care as family support: Caregiving practices across child care providers. Children and Youth Services Review, 26, 941-964.

38 Love, J., Kisker, E., Ross, C., Raikes, H., Constantine, J., & Boller, K., (2005). The effectiveness of Early Head Start for 3-year-old children and their parents: Lessons for policy and programs. Developmental Psychology, 41(6), 885-901.

39 Sanders, M. R., Turner, K. M., & Markie-Dadds, C. (2002). The development and dissemination of the Triple P-Positive Parenting Program: A multilevel, evidence-based system of parenting and family support. Prevention Science, 3(3), 173-189.

40 Langford, J. (2009). The role of family support in an integrated early childhood system: Helping families get what they need to support their children's development. Washington, DC: Center for the Study of Social Policy.

41 Dunst, C. J., Johanson, C., Trivette, C. M., & Hamby, D. (1991). Familyoriented early intervention policies and practices: Family-centered or not? Exceptional children.

Weissbourd, B., & Kagan, S. L. (1989). Family support programs: Catalysts for change. American Journal of Orthopsychiatry, 59(1), 20.

42 Kagan, S. & Weissbourd, B. (1994) Putting families first: America's family support movement and the challenge of change. San Francisco: Jossey Bass, 1994.

Kagan, S., Powell, D., Weissbourd, B. & Edward F., eds. Zigler, E. (1987). America's family support programs. New Haven CT: Yale University Press, 1987.

43 Langford, J. (2009). The role of family support in an integrated early childhood system: Helping families get what they need to support their children's development. Washington, DC: Center for the Study of Social Policy.

44 Lombardi, J., Mosle, A., Patel, N., Schumacher, R., & Stedron, J. (2014). Gateways to two generations: The potential for early childhood programs and partnerships to support children and parents together. Washington, DC: Ascend at the Aspen Institute.

45 Dunst, C. J. (2002). Family-centered practices: Birth through high school. Journal of Special Education, 36(3), 139-147.

Allen, R., & Petr, C. (1996). Toward developing standards and measurements for family-centered-practice in family support programs. In G. H. S. Singer, L. E. Powers & A. L. Olson (Eds.), Redefining family support: Innovations in public-private partnerships (pp. 57-85). Baltimore: Paul H. Brooks Publishing.

Chase-Lansdale, P. L., & Brooks-Gunn, J. (2014). Two-Generation Programs in the Twenty-First Century. Future of Children, 24, 13-40.

Forry, Nicole, Juliet Bromer, Alison Chrisler, Laura Rothenberg, Shana Simkin, and Paula Daneri (2012). Family-provider relationship quality: Review of conceptual and empirical literature of family-provider relationships, OPRE Report #2012-46, Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

46 Shonkoff, J. P., & Phillips, D. A. (2000). From neurons to neighborhoods: The science of early childhood development. Washington, DC: National Academy Press Committee on Integrating the Science of Early Childhood Development.

47 Ainsworth, M. (1979). Infant-mother attachment. American Psychologist, 34, 932-937.

Bowlby, J. (1969). Attachment and loss: Vol. 1. London: The Hogarth Press and the Institute of Psycho-Analysis. Dykas, M. J., & Cassidy, J. (2011). Attachment and the processing of social information across the life span: Theory and evidence. Psychological Bulletin, 137, 19-46.

48 Zaslow, M. J., Dion, M. R., Hair, E. Sargent, J. & Ahluwalia, S. (2001). Maternal depressive symptoms and low literacy as potential barriers to employment in a sample of families receiving welfare: Are there two generational implications? Women and Health, 32, 211-251.

49 Griner, D., & Smith, T. B. (2006). Culturally adapted mental health intervention: A meta-analytic review. Psychotherapy: Theory, research, practice, training, 43(4), 531.

Barrera, M., & Castro, F.G. (2006). A heuristic framework for the cultural adaptation of interventions. Clinical Psychology: Science and Practice, 13, 311 – 316.

Lau, A.S. (2006). Making the case for selective and directed cultural adaptation of evidence-based treatments: Examples from parent training. Clinical Psychology: science and Practice, 13, 295 – 310

50 Zigler, E., Pfannenstiel, J., & Seitz, V. (2008). The Parents as Teachers Program and school success: A replication and extension. Journal of Primary Prevention, 29, 103-120.

Weiss, H., & Klein, L. G. (2006). Changing the conversation about home visiting: Scaling up with quality. Cambridge, MA: Harvard Family Research Project.

Ensure programs draw upon the language and culture of families and their communities

McCurdy, K. & Daro, D. (2004). Parent involvement in family support programs: An integrated theory. Family Relations, 50 (2), 113-121.

Forehand, R. & Kotchick, B. A. (1996). Cultural diversity: A wake-up call for parent training. Behavior Therapy, 27(2), 187-206.

Green, B. L., McAllister, C. L., & Tarte, J. M. (2004). The strengths-based practices inventory: A tool for measuring strengths-based service delivery in early childhood and family support programs. Families in Society: The Journal of Contemporary Social Services, 85 (3), 326-334.

Reid, J. M., Webster-Stratton, C., & Beauchaine, T. P. (2001). Parent training in Head Start: A comparison of program response among African American, Asian American, Caucasian, and Hispanic Mothers. Prevention Science, 2(4), 209-227.

Direct supports to the most vulnerable parents: teen parents, foster parents, grandparents raising grandchildren, parents who have experienced abuse and neglect, and parents of children with special needs

Horton, C. (2003). Protective factors literature review: Early care and education programs and the prevention of child abuse and neglect. Washington, DC: Center for the Study of Social Policy.

De Graaf, I., Speetjens, P., Smit, F., De Wolff, M., & Tavecchio, L. (2008). Effectiveness of the Triple P Positive Parenting Program on behavioral problems in children: A meta-analysis. Behavior Modification, 32, 714-735.

Avellar, S., Paulsell, D., Sama Miller, E., & Del Grosso, P. (2012). Home Visiting Evidence of Effectiveness Review: Executive Summary. Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Washington, DC.

Scarcella, C. A., Ehrle, J., & Geen, R. (2003). Identifying and addressing the needs of children in grandparent care. Washington, DC: The Urban Institute.

U.S. Census Bureau, 2010 American Community Survey. Table B10056.

Dressel, P. L., & Barnhill, S. K. (1994). Reframing gerontological thought and practice: The care of grandmothers with daughters in prison. The Gerontologist, 34, 685-691.

Fuller-Thomson, E., Minkler, M., & Driver, D. (1997). A profile of grandparents raising grandchildren in the United States. The Gerontologist.37, 406-411.

Fields, J. (2003). Children's living arrangements and characteristics: March 2002. Current Population Reports, P20-547, U.S. Census Bureau.

Gomby, D. S., & Deal, L. W. (n.d.). Grandparents raising grandchildren. Baltimore, MD: Annie E. Casey Foundation.

Generations United (2002). Grandparents and other relatives raising children: Support in the workplace.

Promote family support programs that offer activities and materials while creating opportunities for modeling, peer support, and networking among parents

Sanders, M. R., Markie-Dadds, C., & Turner, K. M. (2003). Theoretical, scientific and clinical foundations of the Triple P-Positive Parenting Program: A population approach to the promotion of parenting competence. Parenting and Family Support Centre, The University of Queensland.

Sanders, M. R., Turner, K. M., & Markie-Dadds, C. (2002). The development and dissemination of the Triple P--Positive Parenting Program: A multilevel, evidence-based system of parenting and family support. Prevention Science, 3 (3), 173-189.

Dunst, C. (1995). Key characteristics and features of community-based family support programs. Family resource coalition best practices project commissioned paper II. Family Resource Coalition: Chicago, IL.

McCurdy, K. & Daro, D. (2004). Parent involvement in family support programs: An integrated theory. Family Relations, 50 (2), 113-121.

Delgado-Gaitan, C. (1991). Involving parents in the schools: A process of empowerment. American Journal of Education, 100(1), 20-46.

51 Bradley, R.H. & Corwyn, R.F. (2002).Socioeconomic status and child development. Annual Review of Psychology,53, 371-99.

Dahl, G. & Lochner, L. (2005). The impact of family income on child achievement. Institute for Research on Poverty. Discussion Paper no. 1305-05.

Ratcliffe, C., & McKernan, S-M. (2012). Child poverty and its lasting consequence. The Urban Institute.

Hauser, R. M. & Sweeney, M. M. (1997). Does poverty in adolescence affect the life chances of high school graduates? in Duncan, G.J. & Brooks-Gunn, J. (eds.), Consequences of Growing Up Poor. New York: Russell Sage Foundation.

52 Noble, K. G., Houston, S. M., Brito, N. H., Bartsch, H., Kan, E., Kuperman, J. M., ... & Sowell, E. R. (2015). Family income, parental education and brain structure in children and adolescents. Nature neuroscience, 18(5), 773-778.

53 Adams, G., Snyder, K., & Sandfort, J. (2002). Getting and retaining child care assistance: How policy and practice influence parents' experiences. Assessing the new Federalism Occasional Paper #55. Washington, DC: The Urban Institute.

Change the culture of eligibility determination and case management from a focus on rule compliance, to a focus on adult-, child-, and family outcomes

Adams, G. & Matthews, H. (2013) Confronting the child care eligibility maze: Simplifying and aligning with other work supports. Work Support Strategies: Streamlining Access, Strengthening Families.

Revise eligibility and work requirements for low-income families that disrupt continuity of care for children and work against children's developmental and educational needs

Forry, N., Daneri, P., Howarth, G. (2013). Child Care Subsidy Literature Review. Prepared for OPRE Brief 2013-60. Retrieved from http://www.acf.hhs.gov/sites/default/files/opre/subsidy_literature_review.pdf.

Meyers, M. K., Peck, L., Davis, E. E., Collins, A., Kreader, J. L., Georges, A., . . . Olson, J. A. (2002). The dynamics of child care subsidy use: A collaborative study of five states. Report. New York: Columbia University, Mailman School of Public Health, National Center for Children in Poverty.

Ha, Y. (2009). Stability of child care subsidy use and earnings of low-income families. Social Service Review, 83(4), 495-523.

Ryan, R., Johnson, A., Rigby, E., & Brooks-Gunn, J. (2011). The impact of child care subsidy use on child care quality. Early Childhood Research Quarterly, 26(3), 320-331.

Forry, N. D., & Hofferth, S. L. (2011). Maintaining Work: The Influence of Child Care Subsidies on Child Care-Related Work Disruptions. Journal of Family Issues, 32(3), 346-368.

Crosby, D. A., Gennetian, L., & Huston, A. C. (2005). Child Care Assistance Policies can affect the use of center-based care for children in low-income families. Applied Developmental Science, 9(2), 86-106.

Michalopoulos, C., Lundquist, E., & Castells, N. (2010). The effects of child care subsidies for moderate-income families in Cook County, Illinois. New York, New York: MDRC.

Adams, G., Snyder, K., & Sandfort, J. (2002). Getting and retaining child care assistance: How policy and practice influence parents' experiences. Assessing the new Federalism Occasional Paper #55. Washington, DC: The Urban Institute.

Anderson, P. & Levine, P. (1999). Child Care and Mothers' Employment Decisions.

Baum, C. (2002).A Dynamic Analysis of the Effect of Child Care Costs on the Work Decisions of Low-Income Mothers with Infants. Demography, 39(1), 139-164.

Kimmel, J. (1998). Child Care Costs as a Barrier to Employment for Single and Married Mothers. The Review of Economics and Statistics, 80(2).

Press, J., Fagan, J., & Laughlin, L. (2003). The Effect of Child Care Subsidies on Mothers' Work Schedules. Presented at Seventh Annual International Women's Policy Research Conference, Women Working to Make a Difference.

Davis, E., Krafft, C., Blasberg, A., Carlin, C., Forry, N., Isner, T., & Tout, K. (2013). Minnesota child care choices: Continuity of care and participation in the child care assistance program. Washington, DC: Child Trends, Minneapolis, MN: The University of Minnesota and the Amherst H. Wilder Foundation.

Howes, C., & Hamilton, C. E. (1992). Children's relationships with caregivers: Mothers and child care teachers. Child Development, 63(4), 859–66.

Weber, R. B. (2005). Measurement of Child Care Arrangement Stability: A Review and Case Study Using Oregon Child Care Subsidy Data. Ph.D. Dissertation, Oregon State University.

NICHD Early Child Care Research Network (2003). Does amount of time spent in child care predict socioemotional adjustment during the transition to kindergarten? Child Development, 74(4), 976–1005.

Huston, A. C., Young E. C, and Gennetian, L. (2002). Family and individual predictors of child care use by low-income families in difference policy contexts. The Next Generation Working Paper 9. New York: MDRC.

Loeb, S., Fuller, B., Kagan, S. L., Bidemi, C., Carroll, J., & McCarthy, J. (2003). Child care in poor communities: Early learning effects of type, quality, and stability. Working Paper 9954. Cambridge, MA: National Bureau of Economic Research.

Tran, H., & Weinraub, M. (2006). Child care effects in context: Stability, and multiplicity in nonmaternal child care arrangements during the first 15 months of life. American Psychological Association, 42(3), 566–82.

DeSchipper, J., Clasien, L. W. C., Tavecchio, M. H,. Van IJzendoorn, & Linting, M. (2003). The relation of flexible child care to quality of center day care and children's socio-emotional functioning: A survey and observational study. Infant Behavior and Development, 26(3), 300–25.

Howes, C. (1988). Relations between child care and schooling. Developmental Psychology, 24(1), 53–57.

Invest in networks of parent navigators/promoters to build social capital and connect families to supports

Small, M. L. (2006). Neighborhood institutions as resource brokers: Childcare centers, interorganizational ties, and resource access among the poor. Social Problems, 53 (2), 274-292.

Increase access to public benefits and tax credits that provide income or other supports to help families meet basic needs and maintain stable housing and employment

EITC and Child Tax Credit Promote Work, Reduce Poverty, and Support Children's Development, Research Finds. (n.d.). Retrieved from http://www.cbpp.org/sites/default/files/atoms/files/6-26-12tax.pdf.

Forry, N., Anderson, E. (2006). The Child and Dependent Care Tax Credit: A Policy Analysis. Marriage & Family Review, 39(1-2), 159-176.

Herbst, C. (2009). The labor supply effects of child care costs and wages in the presence of subsidies and the earned income tax credit. Review of Economics of the Household, 8 (2), 199-230.

LEARNING

Expand access to high quality child care, Early/Head Start and full day pre-K in a variety of settings (i.e., homes, centers, and schools)

Yoshikawa, H., Weiland, C., Brooks-Gunn, J., Burchinal, M., Espinosa, L., ... & Zaslow, M. J. (2013). Investing in our future: The evidence base on preschool education (Vol. 9). Society for Research in Child Development and Foundation for Child Development.

Vortruba-Drzal, E., Coley, R. L., & Chase-Lansdale, P. L. (2004). Child care and low-income children's development: Direct and moderated effects. Child Development, 75, 296-312.

Zaslow, M., Anderson, R., Redd, Z., Wessel, J., Tarullo, L., & Burchinal, M. (2010). Quality Dosage, Thresholds, and Features in Early Childhood Settings: A Review of the Literature, OPRE 2011-5. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Votruba-Drzal, E., Coley, R. L., Koury, A. S., & Millier, P. (2013). Center-based child care and cognitive skills development: Importance of timing and household resources. Journal of Educational Psychology, 105(3), 821-838.

Puma, M., Bell, S., Cook, R., Heid, C., Broene, P., Jenkins, F., . . . Downer, J. (2012). Third Grade Follow-up to the Head Start Impact Study Final Report, OPRE Report # 2012-45. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Burchinal, M., Xue, Y., Sideris, J., & Tien, H. (2013). Child care quality thresholds: Evidence from several studies. Presentation at the biennial meeting of the Society for Research in Child Development. Seattle, WA.

Capizzano, J., Tout, K., & Adams, G. (2000). Child care patterns of school-age children with employed mothers. Occasional Paper #41. Washington, DC: The Urban Institute.

Little, P. M. (2007). The quality of school-age care in after-school settings. Research-to-Policy Connections No. 7. New York, NY: Child Care and Early Education Research Connections.

Love, J., Kisker, E., Ross, C., Raikes, H., Constantine, J., . . . Boller, K. (2005). The effectiveness of Early Head Start for 3-year-old children and their parents: Lessons for policy and programs. Developmental Psychology, 41(6), 885-901.

Martin, A., Gardner, M., Brooks-Gunn, J., & Hill, J. (2008). Early Head Start Impacts Over Time and by Levelof Participation. Mathematica Policy Research, MPR Reference No. 6260-520.See 'Demonstrating Results' at educareschools.org

Gormley, W. T. & Phillips, D. (2005). The effects of universal pre-K in Oklahoma: Research highlights and policy implications. Policy Studies Journal, 33, 65.

Herry, Y., Maltais, C., & Thompson, K. (2007). Effects of a full-day preschool program on 4-year-old children, Early Childhood Research & Practice, 9(2).

Landry, S. H., Swank, P. R., Smith, K. E., Assel, M. A., & Gunnewig, S. B. (2006). Enhancing early literacy skills for preschool children: Bringing a professional development model to scale. Journal of Learning Disabilities, 39, 306-324.

Leben, C. (1987). Prekindergarten: Full day vs. half day. Austin Independent School District, 1986-1987.

Cannon, J. S., Jacknowitz, A., & Painter, G. (2000). Is full better than half? Examining the longitudinal effects of full-day kindergarten attendance. Journal of Policy Analysis and Management, 25, 299–321.

Reynolds, A. J. & Temple, J. A. (2008). Cost-effective early childhood development programs from preschool to third grade. The Annual Review of Clinical Psychology, 4, 109-139.

Support access to high quality full-day kindergarten and grades 1-3

Ritchie, S., & Gutmann, L. (Eds.). (2013). First School: Transforming PreK--3rd Grade for African American, Latino, and Low-Income Children. Teachers College Press.

Little, P. M. (2007). The quality of school-age care in after-school settings. Research-to-Policy Connections No. 7. New York, NY: Child Care and Early Education Research Connections.

Hamre, B. K., & Pianta, R. C. (2001). Early teacher–child relationships and the trajectory of children's school outcomes through eighth grade. Child development, 72(2), 625-638.

Baskett, R., Bryant, K., White, W., & Rhoads, K. (2007). Half-day to full-day kindergarten: An analysis of educational change scores and demonstration of an educational research collaboration. Early Child Development and Care, 175(5), 419-430.

Kaurez, K. (2013). The path to lifelong success begins with P-3. National Association of Elementary School Principals. Principal March/April 2013: Transitions. Available at: http://www.naesp.org/sites/default/files/Kauerz_MA13.pdf

Arthur Reynolds (2011). Latest findings from Chicago Longitudinal Study, Science Magazine

Takanishi, R., & Bogard, K. L. (2007). Effective educational programs for young children: What we need to know. Child Development Perspectives, 1(1), 40-45.

Foundation for Child Development (2008). America's vanishing potential: The case for pre-K-3rd education. Foundation for Child Development. http://fcd-us.org/sites/default/files/2008AmericasVanishingPotentialFINAL.pdf

Russakoff, D. (2011). PreK-3rd: Raising the educational performance of English Language Learners (ELLs). PreK-3rd Policy to Action Brief. Foundation for Child Development, (6).

Kauerz, K. (2010). Prek-3rd: Putting full-day kindergarten in the middle. New York, NY: Foundation for Child Development.

Lee, V. E., Brukam, D. T., Ready, D. D., Honigman, J., & Meisels, S. J. (2006). Full-day versus half-day

kindergarten: In which program do children learn more? American Journal of Education, 112, 163-208.

Gormley, W. T. & Phillips, D. (2005). The effects of universal pre-K in Oklahoma: Research highlights and policy implications. Policy Studies Journal, 33, 65.

Cooper, H., Allen, A. B., Patall, E. A., & Dent, A. L. (2010). Effects of full-day kindergarten on academic achievement and social development. Review of Educational Research, 80, 34-70.

Saam, J. & Nowak, J. A. (2005).The effects of full-day versus half-day kindergarten on the achievement status of students with low/moderate income status. Journal of Research in Childhood Education, 20, 27-35.

Reynolds, A. J. & Temple, J. A. (2008). Cost-effective early childhood development programs from preschool to third grade. The Annual Review of Clinical Psychology, 4, 109-139.

Votruba-Drzal, E., Li-Grining, C. P., & Maldonado-Carreno, C. (2008). A developmental perspective on full versus part-day kindergarten and children's academic trajectories through fifth grade. Child Development, 79, 957-978.

Zvoch, K. (2009). A longitudinal examination of the academic year and summer learning rates of full- and half-day kindergartners. Journal of Education for Students Placed at Risk, 14, 311-333.

Ensure high quality programs are accessible full day, during non-traditional hours, before and after school, and over summer

Vortruba-Drzal, E., Coley, R. L., & Chase-Lansdale, P. L. (2004). Child care and low-income children's development: Direct and moderated effects. Child Development, 75, 296-312.

NICHD Early Child Care Research Network. (1998). Early child care and self-control, compliance, and problem behaviors at twenty-four and thirty-six months. Child Development, 69(4), 11451170.

Votruba-Drzal, E., Coley, R. L., Koury, A. S., & Millier, P. (2013). Center-based child care and cognitive skills development: Importance of timing and household resources. Journal of Educational Psychology, 105(3), 821-838.

Puma, M., Bell, S., Cook, R., Heid, C., Broene, P., Jenkins, F., . . . Downer, J. (2012). Third Grade Follow-up to the Head Start Impact Study Final Report, OPRE Report # 2012-45. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Burchinal, M., Xue, Y., Sideris, J., & Tien, H. (2013). Child care quality thresholds: Evidence from several studies. Presentation at the biennial meeting of the Society for Research in Child Development. Seattle, WA.

Zaslow, M., Anderson, R., Redd, Z., Wessel, J., Tarullo, L., & Burchinal, M. (2010). Quality Dosage, Thresholds, and Features in Early Childhood Settings: A Review of the Literature, OPRE 2011-5. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Capizzano, J., Tout, K., & Adams, G. (2000). Child care patterns of school-age children with employed mothers. Occasional Paper #41. Washington, DC: The Urban Institute.

Little, P. M. (2007). The quality of school-age child care in after-school settings. Research-to-Policy Connections No. 7. New York, NY: Child Care and Early Education Research Connections.

Love, J., Kisker, E., Ross, C., Raikes, H., Constantine, J., . . . Boller, K. (2005). The effectiveness of Early Head Start for 3-year-old children and their parents: Lessons for policy and programs. Developmental Psychology, 41(6), 885-901.

Martin, A., Gardner, M., Brooks-Gunn, J., & Hill, J. (2008). Early Head Start Impacts Over Time and by Level of Participation. Mathematica Policy Research, MPR Reference No. 6260-520.

See 'Demonstrating Results' at educareschools.org

Baskett, R., Bryant, K., White, W., & Rhoads, K. (2007). Half-day to full-day kindergarten: An analysis of educational change scores and demonstration of an educational research collaboration. Early Child Development and Care, 175(5), 419-430.

Lee, V. E., Brukam, D. T., Ready, D. D., Honigman, J., & Meisels, S. J. (2006). Full-day versus half-day kindergarten: In which program do children learn more? American Journal of Education, 112, 163-208.

Gormley, W. T. & Phillips, D. (2005). The effects of universal pre-K in Oklahoma: Research highlights and policy implications. Policy Studies Journal, 33, 65.

Herry, Y., Maltais, C., & Thompson, K. (2007). Effects of a full-day preschool program on 4-year-old children, Early Childhood Research & Practice, 9(2).

Landry, S. H., Swank, P. R., Smith, K. E., Assel, M. A., & Gunnewig, S. B. (2006). Enhancing early literacy skills for preschool children: Bringing a professional development model to scale. Journal of Learning Disabilities, 39, 306-324.

Leben, C. (1987). Prekindergarten: Full day vs. half day. Austin Independent School District, 1986-1987.

Cannon, J. S., Jacknowitz, A., & Painter, G. (2000). Is full better than half? Examining the longitudinal effects of full-day kindergarten attendance. Journal of Policy Analysis and Management, 25, 299–321.

Cooper, H., Allen, A. B., Patall, E. A., & Dent, A. L. (2010). Effects of full-day kindergarten on academic achievement and social development. Review of Educational Research, 80, 34-70.

Saam, J. & Nowak, J. A. (2005).The effects of full-day versus half-day kindergarten on the achievement status of students with low/moderate income status. Journal of Research in Childhood Education, 20, 27-35.

Reynolds, A. J. & Temple, J. A. (2008). Cost-effective early childhood development programs from preschool to third grade. The Annual Review of Clinical Psychology, 4, 109-139.

Votruba-Drzal, E., Li-Grining, C. P., & Maldonado-Carreno, C. (2008). A developmental perspective on full-versus part-day kindergarten and children's academic trajectories through fifth grade. Child Development, 79, 957-978.

Zvoch, K. (2009). A longitudinal examination of the academic year and summer learning rates of full- and half-day kindergartners. Journal of Education for Students Placed at Risk, 14, 311-333.

Encourage play to help develop social, emotional, and executive function skills

Weisberg, D., Hirsh-Pasek. K. & Golinkoff, R.M. (in press) Guided play: Where curricular goals meet a playful pedagogy. Mind, Brain and Education.

Hirsh-Pasek, K., & Golinkoff, R.M. (in press) The great balancing act: Optimizing core curricula through playful learning. In E. Zigler, S. Barnett, & W. Gilliam (Eds.) The preschool education debates. 110-116.

Hirsh-Pasek, K. & Golinkoff, R.M. (in press) By definition: Reframing the discussion on how play might be related to attention and classroom learning. New York Academy of Sciences Issue on Playful Learning. June 2012.

Singer, D. G., Golinkoff, R. M., & Hirsh-Pasek, K. (2006). Play= Learning: How play motivates and enhances children's cognitive and social-emotional growth. Oxford University Press.

See the National Association for the Education of Young Children's position statement on Developmentally Appropriate Practice for Kindergarteners, Ages 5-6: http://www.naeyc.org/dap/kindergarteners

Gronlund, G. (2010). Developmentally appropriate play: Guiding young children to a higher level. Redleaf Press.

Diamond, J., Grob, B., & Reitzes, F. (Eds.). Teaching Kindergarten: Learner-Centered Classrooms for the 21st Century. Teachers College Press.

Kagan, S.L, Scott-Little, C., & Frelow V.S. (2009). Linking play to early learning and Development guidelines: Possibility or problematic? Zero to Three, 30(1), 18-24.

Implement developmentally and culturally appropriate early learning standards that reflect approaches to learning, social/emotional, physical, cognitive, and language development; and foundational skills in literacy, math, science, social studies, and the arts

Burchinal, M. (2000). Children's social and cognitive development and child care quality: Testing for differential associations related to poverty, gender, or ethnicity. Applied Developmental Science, 4(3), 149–165.

Burchinal, M., Kain, Z. & Cai, Y. (2011). How well do our measures of quality predict child outcomes? A meta-analysis and coordinated analysis of data from large-scale studies of early childhood settings. In M. Zaslow, I. Martinez-Beck, K. Tout, & T. Halle (Eds.), Quality measurement in early childhood settings (pp. 11-31). Baltimore, MD: Brookes Publishing Co.

See 'Demonstrating Results' at educareschools.org

Tout, K., Starr, R., Soli, M., Moodie, S., Kirby, G., & Boller, K. (2010). Compendium of Quality Rating Systems and Evaluations (OPRE Report). Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research and Evaluation.

Zaslow, M., & Martinez-Beck, I. (2005). Critical issues in early childhood professional development. Baltimore, MD: Brookes Publishing Company.

Good Start, Grow Smart Interagency Workgroup. (2006). Good Start, Grow Smart: A guide to Good Start, Grow Smart and other federal early learning initiatives. Washington, DC: U.S. Department of Education.

Scott-Little, C., Kagan, S. L., &Frelow, V. S. (2006). Conceptualization of readiness and the content of early learning standards: The intersection of policy and research? Early Childhood Research Quarterly, 21, 153-173.

Kauerz, K. (2006). Ladders of Learning. New America Foundation (January 2006).

Reynolds, A. J., Magnuson, K. A., & Ou, S. (2010). Preschool-to-third grade programs and practices: A review of research. Children and Youth Services Review, 32, 1121–1131.

Align curriculum, standards, and assessments starting in preK through grade three

Graves, B. (2006). PK-3: What is it and how do we know it works? New York, NY: Foundation for Child Development.

Daily, S., Burkhauser, M., & Halle, T. (2010). A review of school readiness practices in the states: Early learning guidelines and assessments. Early Childhood Highlights, 1, 1-12.

Reynolds, A. J., Magnuson, K. A., & Ou, S. (2010). Preschool-to-third grade programs and practices: A review of research. Children and Youth Services Review, 32, 1121–1131.

Reynolds, A. J., Magnuson, K. A., & Ou, S. (2010). Preschool-to-third grade programs and practices: A review of research. Children and Youth Services Review, 32, 1121–1131.

Kauerz, K. (2013). The path to lifelong success begins with P-3. National Association for Elementary School Principals. Principal, March/April issue. Available at: https://www.naesp.org/sites/default/files/Kauerz_MA13.pdf

Bogard, K. and Takanishi, R. (2005). PK-3: An aligned and coordinated approach to education for children 3 to 8 years old. Society for Research in Child Development, Social Policy Report. 19, 3.

Kauerz, K. (2006). Ladders to learning: Fighting fadeout by advancing PK-3 alignment. Washington, DC: New America Foundation, Early Education Initiative. Available at: http://www.newamerica.net/files/archive/Doc_File_2826_1.pdf

Traylor, F., (2012). Brining Early Childhood into the Education System: Pre-K to 3rd. In Kagan, S. L., & Kauerz, K. (Eds.). Early childhood systems: Transforming early learning. Teachers College Press.

Adopt training and professional development strategies that ensure the workforce is culturally and linguistically diverse and responsive to the needs of children and families being served

Espinosa, L. M. (2006). Young English language learners in the U.S. Parents as Teacher News.

Espinosa, L. M. (2010). Getting it right for young children from diverse backgrounds: Applying research to improve practice. New Jersey: Prentice Hall and Washington, DC: National Association for the Education of Young Children.

Tabors, P.O. (2008). One child, two languages: a guide for early childhood educators of children learning English as a second language. Baltimore, MD: Brookes.

Whitebook, M., & Ryan, S. (2011). Degrees in context: Asking the right questions about preparing skilled and effective teachers of young children. Preschool Policy Brief, 22. Berkeley, CA: Center for the Study of Child Care Employment and the National Institute for Early Education Research.

Hollins, E., & Guzman, M.T. (2005). Research on preparing teachers for diverse populations. In M. Cochran- Smith & K.M. Zeichner (Eds.), Studying teacher education: The report of the AERA Panel on Research and Teacher Education (pp. 477–548). Mahwah, NJ: Lawrence Erlbaum.

Lim, C. I., & Able-Boone, H. (2005). Diversity competencies within early childhood teacher preparation: Innovative practices and future directions. Journal of Early Childhood Teacher Education, 26, 225–238.

Howes, C. (2010). Culture and child development in early childhood programs. New York: Teachers College Press.

Wishard, A. G, Shivers, E. M., Howes, C., & Ritchie, S. (2003). Child care program and teacher practices: Associations with quality and children's experiences. Early Childhood Research Quarterly, 18, 65–103.

Ramsey, P. (2006). Early childhood multicultural education. In B. Spodek & O.N. Saracho (Eds.), Handbook of research on the education of young children (pp. 279–301). Mahwah, NJ: Lawrence Erlbaum.

Cohen, E. G., & Lotan, R. A. (1995). Producing equal-status interaction in the heterogeneous classroom. American Educational Research Journal 32, 99–120.

De Marquez, T.M. (2002). Stories from a multicultural classroom. Multicultural Education, 9, 19–20.

Swadener, E. B. (1988). Implementation of education that is multicultural in early childhood settings: A case study of two day care programs. Urban Review, 20, 8–27.

Castro, D. C., Espinosa, L., & Páez, P. (2011). Defining and Measuring Quality in Early Childhood Practices that Promote Dual Language Learners' Development and Learning. In M. Zaslow, I. Martinez-Beck, K. Tout, & T. Halle (Eds.), Measuring Quality in Early Childhood Settings (pp. 257-280). Baltimore, MD: Brookes Publishing.

Establish research-based teacher competencies that address child development; protective factors; social, emotional, and behavior management; and cultural and linguistic appropriateness

IOM (Institute of Medicine) and NRC (National Research Council). (2012). The early childhood care and education workforce: Challenges and opportunities: A workshop report. Washington, DC: The National Academies Press.

Smith, S., Robbins, T. A., Stagman, S. M., & Kreader, J. L. (2012). Practices for Promoting Young Children's Learning in QRIS Standards. New York, NY: National Center for Children in Poverty.

Support training and coaching for teachers working with special populations including dual language learners and children with disabilities

Espinosa, L. M. (2006). Young English language learners in the U.S. Parents as Teacher News.

Espinosa, L. M. (2010). Getting it right for young children from diverse backgrounds: Applying research to improve practice. New Jersey: Prentice Hall and Washington, DC: National Association for the Education of Young Children.

Tabors, P.O. (2008). One child, two languages: a guide for early childhood educators of children learning English as a second language. Baltimore, MD: Brookes.

Espinosa, L. M. (2010). Getting it right for young children from diverse backgrounds: Applying research to improve practice. Upper Saddle River, NJ: Pearson Education, Inc.

Peña, E. D., & Halle, T. G. (2011). Assessing preschool English learners: Traveling a multi-forked road. Child Development Perspectives, 5(1), 28-32.

Spiker, D., Hebbeler, K. M., & Barton, L. R. (2011). Measuring quality in ECE programs for children with disabilities. In M. Zaslow, I. Martinez-Beck, K. Tout, & T. Halle (Eds.), Measuring Quality in Early Childhood Settings (pp. 229-256). Baltimore, MD: Brookes Publishing.

Ray, A., Bowman, B., & Robbins, J. (2006). Preparing early childhood teachers to successfully educate all children: The contribution of four-year undergraduate teacher preparation programs. Report to the Foundation for Child Development. Chicago, IL: Erikson Institute.

Whitebook, M., Gomby, D., Bellm, D., Sakai, L., & Kipnis, F. (2009). Effective teacher preparation in early care and education: Toward a comprehensive research agenda. Part II of Preparing teachers of young children: The current state of knowledge, and a blueprint for the future. Berkeley, CA: Center for the Study of Child Care Employment, University of California, Berkeley.

Whitebook, M., & Ryan, S. (2011). Degrees in context: Asking the right questions about preparing skilled and effective teachers of young children. Preschool Policy Brief, 22. Berkeley, CA: Center for the Study of Child Care Employment and the National Institute for Early Education Research.

Hollins, E., & Guzman, M.T. (2005). Research on preparing teachers for diverse populations. In M. Cochran- Smith & K.M. Zeichner (Eds.), Studying teacher education: The report of the AERA Panel on Research and Teacher Education (pp. 477–548). Mahwah, NJ: Lawrence Erlbaum.

Lim, C. I., & Able-Boone, H. (2005). Diversity competencies within early childhood teacher preparation: Innovative practices and future directions. Journal of Early Childhood Teacher Education, 26, 225–238.

Howes, C. (2010). Culture and child development in early childhood programs. New York: Teachers College Press.

Wishard, A. G, Shivers, E. M., Howes, C., & Ritchie, S. (2003). Child care program and teacher practices: Associations with quality and children's experiences. Early Childhood Research Quarterly, 18, 65–103.

Ramsey, P. (2006). Early childhood multicultural education. In B. Spodek & O.N. Saracho (Eds.), Handbook of research on the education of young children (pp. 279–301). Mahwah, NJ: Lawrence Erlbaum.

Cohen, E. G., & Lotan, R. A. (1995). Producing equal-status interaction in the heterogeneous classroom. American Educational Research Journal 32, 99–120.

De Marquez, T.M. (2002). Stories from a multicultural classroom. Multicultural Education, 9, 19–20.

Swadener, E. B. (1988). Implementation of education that is multicultural in early childhood settings: A case study of two day care programs. Urban Review, 20, 8–27.

Castro, D. C., Espinosa, L., & Páez, P. (2011). Defining and Measuring Quality in Early Childhood Practices that Promote Dual Language Learners' Development and Learning. In M. Zaslow, I. Martinez-Beck, K. Tout, & T. Halle (Eds.), Measuring Quality in Early Childhood Settings (pp. 257-280). Baltimore, MD: Brookes Publishing.

Support home-based care providers in enhancing learning opportunities when children are in their care

Forry, N., Anderson, R., Banghart, P., Zaslow, M., Kreader, J.L., & Chrisler, A. (2011). Linking Home-Based Child Care and State-Funded Preschool: The Community Connections Preschool Program (Illinois Action for Children). Evaluation Phase 1– Implementation Study. Prepared for Illinois Action for Children, Chicago, IL.

Establish a coordinated professional development system to reflect the principles and indicators of NAEYC's Blueprint for State Early Childhood Professional Development Systems

Fukkink, R. G., & Lont, A. (2007). Does training matter? A meta-analysis and review of caregiver training studies. Early Childhood Research Quarterly, 22(3), 294–311.

IOM (Institute of Medicine) and NRC (National Research Council). (2012). The early childhood care and education workforce: Challenges and opportunities: A workshop report. Washington, DC: The National Academies Press.

Whitebook, M., Gomby, D., Bellm, D., Sakai, L., & Kipnis, F. (2009). Teacher preparation and professional development in grades K-12 and in early care and education: Differences and similarities, and implications for research. Part I of Preparing teachers of young children: The current state of knowledge, and a blueprint for the future. Berkeley, CA: Center for the Study of Child Care Employment, University of California, Berkeley.

Zaslow, M., Anderson, R., Redd, Z., Wessel, J., Tarullo, L., & Burchinal, M. (2010). Quality Dosage, Thresholds, and Features in Early Childhood Settings: A Review of the Literature, OPRE 2011-5. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Allen, J. P., Pianta, R. C., Gregory, A., Mikami, A. Y., & Lun, J. (2011). An interaction-based approach to enhancing secondary-school instruction and student achievement. Science, 33(6045), 1034-1037.

Weber, R. & Trauten, M. (2008). A Review of the Research Literature: Effective Investments in Child Care and Early Education Profession. Oregon State University, Family Policy Program, Oregon Childcare Research Partnership.

Zalsow, M., Tout, K., Halle, T., Whittaker, J.V., & Lavelle, B. (2010). Toward the Identification of Features of Effective Professional Development for Early Childhood Educators: Literature Review. Washington, DC: U.S. Department of Education, Office of Planning, Evaluation and Policy Development, Policy and Program Studies Service.

Whitebook, M. & Ryan, S. (2011). Degrees in context: Asking the right questions about preparing skilled and effective teachers of young children. Preschool Policy Brief, 22. Berkeley, CA: Center for the Study of Child Care Employment and the National Institute for Early Education Research.

NRC (National Research Council) and IOM (Institute of Medicine). (2000). From Neurons to Neighborhoods: The Science of Early Childhood Development. Committee on Integrating the Science of Early Childhood Development. In J. P. Shonkoff & D. A. Phillips (Eds.), Board on Children, Youth, and Families, Commission on Behavioral and Social Sciences and Education. Washington, D.C.: National Academy Press.

Bridges, M., Fuller, B., Huang, D. S., & Hamre, B. (2011). Strengthening the early childhood workforce: How wage incentives may boost training and job stability. Early Education and Development, 22(6), 1009-1029.

Kipnis, F., Whitebook, M., Almaraz, M., Sakai, L. & Austin, L. J. E. (2012). Learning together: A study of six B.A. completion cohort programs in early care and education: Year 4. Berkeley, CA: Center for the Study of Child Care Employment, University of California, Berkeley.

Implement strategies to improve salaries, benefits, and working conditions for early childhood educators, and support compensation parity across early learning programs

Institute of Medicine (IOM) and National Research Council (NRC). (2012). The early childhood care and education workforce: Challenges and opportunities: A workshop report. Washington, DC: The National Academies Press.

Institute of Medicine (IOM) and National Research Council (NRC). (2015). Transforming the workforce for children birth through age 8: A unifying foundation. Washington, DC: The National Academies Press.

Whitebook, M. (1999). Child care workers: High demand, low wages. The annals of the American academy of political and social science, 563(1), 146-161.

Whitebook, M. (2014). Building a Skilled Teacher Workforce Shared and Divergent Challenges in Early Care and Education and in Grades K-12. Prepared for the Bill and Melinda Gates Foundation. Available at: http://www.researchgate.net/profile/Marcy_Whitebook/publication/267326509_Building_a_skilled_teacher_workforce_Shared_and_divergent_challenges_in_early_care_and_education_and_in_grades_K-12/links/544a761f0cf2d6347f400ddf.pdf

Austin, L. J., Whitebook, M., Connors, M., & Darrah, R. (2011). Staff Preparation, Reward, and Support: Are Quality Rating and Improvement Systems Addressing All of the Key Ingredients Necessary for Change? Policy Report. Center for the Study of Child Care Employment, University of California at Berkeley.

Ensure program directors and school principals have the capacity to provide instructional leadership that supports effective teaching

Tout, K., Epstein, D., Soli, M. & Lowe, C. (2015). A Blueprint for Early Care and Education Quality Improvement Initiatives. Publication #2015-07. Bethesda, MD: Child Trends.

Bloom, P. J., Jackson, S., Talan, T. N., & Kelton, R. (2013). Taking Charge of Change: A 20-Year review of empowering early childhood administrators through leadership training. Wheeling, IL: McCormick Center for Early Childhood Leadership.

Horng, E., & Loeb, S. (2010). New thinking about instructional leadership. Kappan, 92(3) 66-69. Retrieved from https://cepa.stanford.edu/ sites/default/files/Kappan_leadership.pdf

Louis, K. S., Leithwood, K., Wahlstrom, K., & Anderson, S. (2010). Learning from Leadership Project: Investigating the Links to Improved Student Learning. Prepared for the Wallace Foundation. Minneapolis, MN: The Center for Applied Research and Educational Improvement and the University of Minnesota, The Ontario Institute for Studies in Education at the University of Toronto. Retrieved from: http://www. wallacefoundation.org/knowledge-center/school-leadership/key-research/Documents/Investigating-the-Links-to-Improved-StudentLearning.pdf

Szekely, A. (2013). Leading for early success: Building school principals' capacity to lead high-quality early education. Washington DC: National Governors Association Center for Best Practices. Available at: http://www.nga.org/files/live/sites/NGA/files/pdf/2013/1306LeadingForEarlySuccessPaper.pdf

Promote transition planning from early care, to preschool, to K-12 learning environments

Ladd, G. W., & Kochenderfer, B. J. (1996). Linkages between friendship and adjustment during early school transitions. In W. M. Bukowski, A. F. Newcomb & W.W. Hartup (Eds.) The company they keep: Friendship in childhood and adolescence. Cambridge studies in social and emotional development (pp. 322-345). New York, NY, U.S.: Cambridge University Press.

Pianta, R. C., Cox, M. J., & Snow, K. L. (2007). School readiness and the transition to kindergarten in the era of accountability. Baltimore, MD: Brookes.

Doucet, F., & Tudge, J. (2005). Co-constructing the transition to school: reframing the novice versus expert roles of children, parents, and teachers from a cultural perspective. In Pianta, R., Cox, M. J., & Snow, K. (Eds.), School Readiness and the Transition to Kindergarten in the Era of Accountability (pp. 307-329). Baltimore, MD: Brooks.

Bohan Baker, M., & Little, P. (2002). The Transition to Kindergarten: A Review of Current Research and Promising Practices to Involve Families. Cambridge, MA: Harvard Family Research Project.

Mantzicopoulos, P. (2004). The effects of participation in a Head Start–public school transition program on kindergarten children's social competence. Perspectives in Education, 22(2), 51–66.

Fogel, A. (2011). Theoretical and applied dynamic systems research in developmental science. Child Development Perspectives, 5(4), 267-272.

Reynolds, A. J., Magnuson, K. A., & Ou, S. (2010). Preschool-to-third grade programs and practices: A review of research. Children and Youth Services Review, 32, 1121–1131.

Schulting, A. B., Malone, P. S., & Dodge, K. A. (2005). The effect of school-based kindergarten transition policies and practices on child academic outcomes. Developmental Psychology, 41(6), 860–871.

Set goals and track outcomes in ways that engage families in their children's learning

Carlisle, E., Stanley, L., & Kemple, K.M. (2005). Opening doors: understanding school and family influences on family involvement. Early Childhood Educational Journal, 33(3), 155-162.

Christenson, S.L. (2000). Families and schools: rights, responsibilities, resources, and relationships. In R.C. Pianta and M.J. Cox (Eds.) The transition to kindergarten. Baltimore, MD: Paul H. Brookes.

Halgunseth, L., Peterson, A., Moodie, S., & Stark, D. (2009). Family engagement, diverse families, and early childhood education programs: An integrated review of the literature. Washington, DC: National Association for the Education of Young Children and Pre-K Now.

McWayne, C., Hampton, V., Fantuzzo, J., Cohen, H.L., & Sekino, Y. (2004). A multivariate examination of parent involvement and the social and academic competencies of urban kindergarten children. Psychology in the Schools, 41(3), 363-377.

Weiss, H.B., Bouffard, S.M., Bridglall, B.L., & Gordon, E.W. (2009). Reframing family involvement in education: supporting families to support educational equity. Equity Matters: Research Review, No. 5, The Campaign for Educational Equity, Teachers College, Columbia University.

Weiss, H. B., Caspe, M., & Lopez, M. E. (2006). Family involvement in early childhood education. Cambridge, MA: Harvard Family Research Project.

Ensure child assessment tools are developmentally, culturally, and linguistically appropriate

Shepard, L. A., Kagan, S. L., & Wurtz, E. (Eds.). (1998). Principles and recommendations for early childhood assessments. Washington, DC: National Goals Panel.

National Research Council. (2008). Early childhood assessment: Why, what, and how. Committee on Developmental Outcomes and assessments for Young Children. In C. E. Snow & S. B. Van Hemel (Eds.), Board on Children, Youth, and Families, Board on Testing and Assessment, Division of Behavioral and Social Sciences and Education. Washington, DC: The National Academies Press.

Espinosa, L. M. (2010). Getting it right for young children from diverse backgrounds: Applying research to improve practice. Upper Saddle River, NJ: Pearson Education, Inc.

Peña, E. D., & Halle, T. G. (2011). Assessing preschool English learners: Traveling a multi-forked road. Child Development Perspectives, 5(1), 28-32.

Castro, D. C., García, E. E.,& Markos, A. M. (2013). Dual language learners: Research informing policy. Chapel Hill, NC: The University of North Carolina, Frank Porter Graham Child Development Institute.

Fuller, B., Bridges, M., Bein, E., Jang, H., Jung S., Rabe-Hesketh, S., . . . Kuo, A. (2009). The health and cognitive growth of Latino toddlers: At risk or immigrant paradox? Maternal and Child Health Journal, 13, 755–768.

Spiker, D., Hebbeler, K. M., & Barton, L. R. (2011). Measuring quality in ECE programs for children with disabilities. In M. Zaslow, I. Martinez-Beck, K. Tout, & T. Halle (Eds.), Measuring Quality in Early Childhood Settings (pp. 229-256). Baltimore, MD: Brookes Publishing.

Require Kindergarten entry assessments to guide instruction

Halle, T., Forry, N., Hair, E., Perper, K., Wandner, L., & Wessel, J. (2009). Disparities in early learning and development: Lessons from the Early Childhood Longitudinal Study-Birth Cohort (ECLS-B) (Executive summary). Washington, DC: Child Trends.

Lee, V. L., & Burkam, D. T. (2002). Inequality at the starting gate: Social background differences in achievement as children begin school. Washington, DC: Economic Policy Institute.

Scott-Little, C., Lesko, J., Martella, J., & Milburn, P. (2007). Early learning standards: Results from a national survey to document trends in state-level policies and practices. Early Childhood Research and Practice, 9.

Daily, S., Burkhauser, M., & Halle, T. (2010). A review of school readiness practices in the states: early learning guidelines and assessments. Child Trends: Early Childhood Highlights, 1(2).

Council of Chief State School Officers. (2010). State early childhood standards and assessments: Five years of development. Report of 2008 Survey by the Early Childhood State Collaborative on Assessment and Student Standards. Washington, DC: Council of Chief State School Officers.

Council of Chief State School Officers (2011). Moving forward with kindergarten readiness assessment efforts: A position paper of the Early Childhood Education State Collaborative on Assessment and Student Standards. Washington, DC: Council of Chief State School Officers.

Espinosa, L. M. (2010). Getting it right for young children from diverse backgrounds: Applying research to improve practice. Upper Saddle River, NJ: Pearson Education, Inc.

Shepard, L. A., Kagan, S. L., & Wurtz, E. (Eds.). (1998). Principles and recommendations for early childhood assessments. Washington, DC: National Goals Panel.

National Research Council. (2008). Early childhood assessment: Why, what, and how. Committee on Developmental Outcomes and assessments for Young Children. In C. E. Snow & S. B. Van Hemel (Eds.), Board on Children, Youth, and Families, Board on Testing and Assessment, Division of Behavioral and Social Sciences and Education. Washington, DC: The National Academies Press.

National Association for the Education of Young Children and National Association of Early Childhood Specialists in State Departments of Education. (2003). Early childhood curriculum, assessment and program evaluation: Building an effective accountability system in programs for children birth through age 8. Washington, DC: National Association for the Education of Young Children.

National Association of Early Childhood Specialists in State Departments of Education. (2000). STILL unacceptable trends in kindergarten entry and placement. A position statement developed by the NAECS/ SDE. Washington, DC: National Association of Early Childhood Specialists in State Departments of Education.

Assess the quality of learning environments, teacher-child interaction, teaching strategies, and children's progress, and use the data for continuous improvement

Birch, S. H., & Ladd, G. W. (1997). The teacher-child relationship and children's early school adjustment. Journal of School Psychology, 35(1), 61-79. doi: 10.1016/S0022-4405(96)00029-5

Bryant, D. M., Burchinal, M., Lau, L. B., & Sparling, J. J. (1994). Family and classroom correlates of Head Start children's developmental outcomes. Early Childhood Research Quarterly, 9(3), 289-309. doi: 10.1016/0885-2006(94)90011-6

Burchinal, M. (2000). Children's social and cognitive development and child care quality: Testing for differential associations related to poverty, gender, or ethnicity. Applied Developmental Science, 4(3), 149–165.

Elicker, J., & Thornburg, K. (2011). Evaluation of quality rating and improvement systems in early childhood programs and school age care: measuring children's development, research to policy, research to practice brief OPRE 2011-11c. Washington, DC: Department of Health and Human Services, Administration of Children and Families, Office of Planning, Research, and Evaluation.

Howes, C., Burchinal, M., Bryant, D., Early, D. Clifford, D., et al. (2008). Ready to learn? Children's pre-academic achievement in pre-kindergarten programs. Early Childhood Research Quarterly, 23, 27-52. doi: 10.1016/j.ecresq.2007.05.002

Howes, C., & Hamilton, C. E. (1992). Children's relationships with child care teachers: Stability and concordance with parental attachments. Child Development, 63, 67-78. doi: 10.1111/j.1467-8624.1992.tb01667

Isner, T., Tout, K., Zaslow, M., Soli, M., Quinn, K., Rothenberg, L., & Burkhauser, M. (2011). Coaching in early care and education programs and quality rating and improvement systems (QRIS): Identifying promising features. Washington, DC: Child Trends.

Lahti, M., Sabol, T., Starr, R., Langill, C. & Tout, K. (2013). Validation of Quality Rating and Improvement Systems: Examples from Four States. Research to Policy, Research to Practice Brief, OPRE 2013-XX.

Washington, DC: Office of Planning , Research and Evaluation, Administration for Children and Families, U.S. Department of Human Services.

Lugo-Gil, J., Sattar, S., Boss, C., Boller, K., Tout, K., & Kirby, G. (2011). The Quality Rating and Improvement System (QRIS)

Evaluation Toolkit. OPRE Report #2011-31. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation.

Mashburn, A. J., Pianta, R. C., Hamre, B. K., Downer, J. T., Barbarin, O. A., Bryant, D., & Burchinal, M., et al. (2008). Measures of classroom quality in prekindergarten and children's development of academic, language, and social skills. Child Development, 79, 732-749. doi: 10.1111/j.1467-8624.2008.01154

Mitchell, Anne W. (2005). Stair steps to quality: A guide for states and communities developing quality rating systems for early care and education Alexandria, VA: United Way of America, Success by 6.

Pianta, R. C., Howes, C., Burchinal, M., Clifford, R., Early, D., & Barbarin, O. (2005). Features of pre-kindergarten programs, classrooms, and teachers: Do they predict observed classroom quality and child-teacher interactions? Applied Developmental Science, 9, 144-159.

Scarr, S., Eisenberg, M., & Deater-Deckard, K. (1994). Measurement of quality in child care centers. Early Childhood Research Quarterly, 9, 131-151.

Smith, S., Robbins, T. A., Schneider, W. J., Kreader, J. L., & Ong, C. (2012). Coaching and quality assistance in quality rating improvement systems: Approaches used by TA providers to improve quality in early care and education programs and home-based settings. New York, NY: National Center for Children in Poverty.

Smith, S., Robbins, T. A., Stagman, S. M., & Kreader, J. L. (2012). Practices for Promoting Young Children's Learning in QRIS Standards. New York, NY: National Center for Children in Poverty.

Tout, K., Starr, R., Soli, M., Moodie, S., Kirby, G., & Boller, K. (2010). Compendium of Quality Rating Systems and Evaluations. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research and Evaluation.

Tout, K., Starr, R., Soli, M., Moodie, S., Kirby, G., & Boller, K. (2010). Compendium of Quality Rating Systems and Evaluations. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research and Evaluation.

Tout, K., Isner, T., & Zaslow, M. (February 2011). Coaching for quality improvement: Lessons learned from Quality Rating and Improvement Systems (QRIS). Research Brief. Washington, DC: Child Trends.

Tout, K & Starr, R. (2013). Key Elements of a QRIS Validation Plan: Guidance and Planning Template. OPRE

2013-11. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Zaslow, M., Tout, K., Halle, T., & Forry, N. (2009). Multiple Purposes for Measuring Quality in Early Childhood Settings: Implications for Collecting and Communicating Information on Quality. Washington, DC: Child Trends.

Zellman, G. L. & Fiene, R. (2012). Validation of Quality Rating and Improvement Systems for Early Care and Education and School-Age Care, Research-to-Policy, Research-to-Practice Brief OPRE 2012-29. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Zellman, G.L., Brandon, R.N., Boller, K., & Kreader, J.L. (2011). Effective evaluation of quality rating and improvement systems for early care and education and school-age care, Research-to-Policy, Research-to- Practice Brief OPRE 2011-11a. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Zellman, G. L., & Karoly, L.A. (2012). Incorporating Child Assessments into State Early Childhood Quality Improvement Initiatives. Santa Monica, CA: RAND Corporation.

Zellman, G.L., & Karoly, L.A. (2012). Moving to Outcomes: Approaches to Incorporating Child Assessments into State Early Childhood Quality Rating and Improvement Systems. Santa Monica, CA: RAND Corporation, OP-364-PF.

Implement early warning systems to identify problems, such as chronic absence, to allow for timely intervention

Data Quality Campaign. (2013). Using early warning data to keep students on track toward college and careers: A primer for state policymakers. Washington, DC: Data Quality Campaign.

Jimerson, S., Egeland, B., Sroufe, A., & Carlson, B. (2000). A prospective longitudinal study of high school dropouts examining multiple predictors across development. Journal of School Psychology, 38(6), 525-549.

Kokko, K., Tremblay, R. E., Lacourse, E., Nagin, D. S., & Vitaro, F. (2006). Trajectories of prosocial behavior and physical aggression in middle childhood: Links to adolescent school dropout and physical violence. Journal of Research on Adolescence, 16(3), 403-428.

Duchesne, S., Vitaro, F., Larose, S., & Tremblay, R. E. (2008). Trajectories of anxiety during elementary-school years and the prediction of high school noncompletion. Journal of Youth & Adolescence, 37, 1134-1146.

Vitaro, F., Brendgen, M., Larose, S., & Tremblay, R. E. (2005). Kindergarten disruptive behaviors, protective factors, and educational achievement by early adulthood. Journal of Educational & Psychology, 97(4), 617-629.

Randolph, K. A., Rose, R. A., Fraser, M. W., & Orthner, D. K. (2004). Promoting school success among at risk youth. Journal of Poverty, 8(1), 1-22.

Chang, H. N., & Romero, M. (2008). Present, engaged, and accounted for: The critical importance of addressing chronic absence in the early grades. New York, NY: National Center for Children in Poverty.

Cook, B. A., Schaller, K., & Krischer, J. P. (1985). School absence among children with chronic illness. Journal of School Health, 55, 265-267.

Fowler, M. G., Johnson, M. P., & Atkinson, S. S. (1985). School achievement and absence in children with chronic health conditions. The Journal of Pediatrics, 106(4), 683-687.

Barnard, W. M. (2004). Parent involvement in elementary school and educational attainment. Children and Youth Services Review, 26, 39-62.

0–8 Birth Through Eight **State Policy Framework**

Alliance *for* Early Success

CROSS-CUTTING POLICIES

AT THE INTERSECTION OF HEALTH, FAMILY SUPPORT, AND LEARNING

Outcome: Children thrive in families and communities that support their healthy development.

HEALTH

Outcome: Children are born healthy, stay healthy, and are surrounded by healthy adults.

FAMILY SUPPORT

Outcome: Families help their children explore, learn, and grow in safe and nurturing places.

LEARNING

Outcome: Children arrive at Kindergarten with the skills and abilities to meet developmental milestones, read on grade level, and reach achievement goals.

OUR PRINCIPLES:

THE BEST OUTCOMES RESULT FROM STARTING EARLY • VULNERABLE POPULATIONS HAVE THE MOST TO GAIN • EVIDENCE AND BEST PRACTICES INFORM THE POLICY CHOICES • IMPLEMENTING THE POLICY CHOICES REQUIRES SMART FUNDING • CONTINUOUS IMPROVEMENT AND ACCOUNTABILITY FOR RESULTS LEAD TO BETTER OUTCOMES

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