Nurture for Their Future

The Importance of Strengthening Young Children's Relationships with Parents & Caregivers

VOICES FOR ILLINOIS CHILDREN

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About Voices for Illinois Children

Voices for Illinois Children is a statewide group of caring and concerned men and women who believe Illinois can and must do better in meeting the needs of all children. Voices believes all children should grow up healthy, loved, safe and well-educated. Voices is a non-profit, non-partisan, privately funded organization that raises awareness of the issues facing Illinois children and their families and works to find solutions through policy analysis, public education and outreach.

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Voices for Illinois Children welcomes the dissemination of this report. Please feel free to make multiple copies. If you would like to learn more about early childhood care and education, please contact Sean Noble at 312-516-5566 or snoble@voices4kids.org.

Table of Contents

It's About Time—Time Spent with Young Children 3

Nurture to Build Upon Nature 4

Policy Recommendations for Strengthening Caregivers' Relationships with Young Children 6

- Help parents spend more time with their young children 6
- Extend home-visiting services and related educational supports 7
- Identify and help more children with special needs 8
- Support the healthy social and emotional development of young children 8
- Make state-assisted child care more affordable and available 9
- Improve caregivers' quality and availability through better reimbursement support 10
- Improve caregivers' quality and availability through better training and compensation 11
- Offer better support to family, friend and neighbor caregivers 12
- Improve and expand the federal Early Head Start program 13
- Increase federal support for child care 14
- Build and improve more child care facilities 14

Advocacy Recommendations for Strengthening Caregivers' Relationships with Young Children 16

Endnotes 18

Acknowledgments ..... inside back cover

Nurture for Their Future:

The Importance of Strengthening Young Children's Relationships with Parents & Caregivers

It's About Time— Time Spent with Young Children

Her hours-long ordeal finally over, Heather lays back on her pillow, exhausted. "Do you want to hold him?" the doctor asks. "Yes!" she replies, cutting the question short and shifting in the hospital bed.

Heather's eyes are wide as she takes the squirming, squealing baby boy in her arms. His own eyes are shut tight until he hears his mother's voice, softly singing the words she had sung nightly for months while gently rubbing her growing belly.

When the red, red robin comes bob, bob, bobbin' along
There'll be no more sobbin' when he starts throbbin' his own ... sweet ... song

The baby grows quiet and slowly opens his large eyes, peering up at the face that bends close to his. His vision is not yet developed enough to clearly discern images. But he recognizes this sound and responds to this embrace and instinctively understands what they signify: *Protector. Caregiver. Mother.*

This positive interaction is far more than a touching vignette. It's the beginning of one of the most important relationships this young child will ever know, one that will sustain him during his impressionable infancy and toddler years, throughout his childhood and beyond. Such interactive relationships with adults are critical in providing young children with the stimulation they need to develop their hearts and minds as well as their bodies. These relationships can significantly strengthen the physical, mental, emotional and spiritual growth of a child—and lack of such interactions substantially weaken his or her development. As children's first teachers, parents play the biggest part in ensuring that a baby grows up loved and well-supported.

Still, many other adults have regular contact with young children as well. That's especially true these days, when so many parents work and children seem more likely than ever to have regular caregivers who are not their parents. In fact, the majority of Illinois' more than 1 million children from birth to age 5 spend at least some portion of the week in the care of someone other than their parents: 573,000 of them with other family, friends and neighbors; 348,000 of them in center-based care or Early Head Start settings; and 170,000 in "family child care" homes. (These groupings are not mutually exclusive.)[1]

Strengthening children's relationships with adults—making these interactions positive, nurturing, stable and educational—is among the most important things we can do to ensure children's healthiest possible development. And the need for such efforts is great. Consider that one out of every three children entering kindergarten is unprepared for school,[2] and almost half have "moderate to serious cognitive and social problems."[3] It requires no great leap of logic to understand that, years down the road, these bleak figures often translate into poor test scores, troubling high school dropout numbers and high juvenile crime rates. Yet Illinois traditionally has spent only

about 2 percent to 3 percent of its education budget on young children's learning.

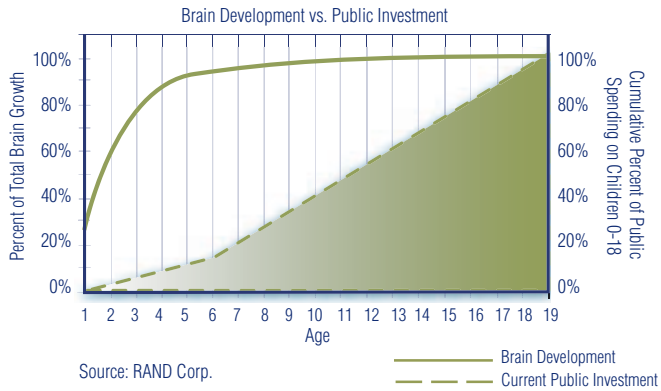
Thankfully, years of cataloging young children's learning needs—as well as studies illustrating the countless benefits of early learning programs—have begun to make a difference. As a society, we now are making progress toward better preparation of our young children for success in school and throughout their lives. One of the strongest examples: Illinois has made it a goal to ensure "universal" preschool access for all 3- to 5-year-old children whose parents choose it. We've begun working toward that goal by expanding and improving preschool programs.

But we cannot forget children's very first years of life, the period from birth to age 3, when a substantial foundation is laid for all future learning and development. To make that foundation as solid as possible, we must begin by bolstering the relationships that form such powerful cement.

Mismatch in Priorities

Although the vast majority of brain develop takes place in children's first few years of life, less than 10 percent of public spending on children takes place during that period.

Current Priorities in Public Spending Do Not Match Research Evidence



Source: RAND Corp.

Nurture to Build Upon Nature

Illinois is home to more than half a million children under age 3.[4] Every day, another 500 babies are born in our state, experiencing the most amazing period of growth they'll ever know—physically, mentally and emotionally. A responsive environment is critical to the early development of young children. Exploring and interacting with adults—like playing "peek-a-boo" and repeating words—are simple activities that help children develop a variety of skills and learn about their world. This interactive process is a back-and-forth exchange between children and their surroundings, in which children are active participants.

Studies have shown that the spark plugs for children's early development are nerve tissue cells called "neurons." At birth, approximately 100 billion neurons fill a baby's brain, and the brain will produce relatively few more through the remainder of his or her life. Very tentative linkages connect these neurons at first. But a baby's experiences will shape these links into "hardwiring" for the brain, whose core structure will be 85 percent complete by the time the child turns 3. "Hardwiring connections are responsible for all of a child's major cognitive and emotional functioning, including vision, hearing, language, emotions and movement," say experts at one clearinghouse of early childhood research.[5]

Positive interactions with adults are key to the success of this hardwiring, they add: "Brain research has shown nurturing is crucial for emotional, social and intellectual development. In particular, children develop their sense of trust and attachment very early in life, as well as beginning to develop their cognitive and pre-literacy skills." Still other experts state even more clearly in a "Future of Children" report: "Many influences that shape development are determined by the infant's caregivers—the parents and others who

are responsible for the child's routine care and overall well-being. In (one researcher's) words, 'the irreducible core of the environment of early development is people.' Caregivers provide food and physical safety; they nurture and reassure the infant; they provoke and respond to the toddler's overtures; they offer playthings and challenges; and they surround the child with language."[6]

The nurturing of young children takes many forms. It includes breastfeeding and attending to their physical nourishment, talking with children, sharing stories and manageable activities with them ... creating daily routines that help youngsters to remember and anticipate events, such as mealtime preparations... overtly recognizing and applauding children's achievements, such as the completion of a jigsaw puzzle.[7] Nurturers take many forms, too. Parents are certainly children's first and best teachers. Grandparents increasingly are taking primary roles in the raising of young children. And surveys show that, in Illinois, about 60 percent of children under age 3 spend time in the regular, "informal" care of relatives, friends and neighbors. Meanwhile, more than one in 10 infants spend time in "family child care" homes or in either center-based child care or Early Head Start programs. For children between the ages of 1 and 2, those rates double to two out of 10 children. (These categories are not mutually exclusive.)[8]

"The more that young children are able to do for themselves, the greater their self-esteem."
–Family home child care provider Iris Kaitschuck, Glenview

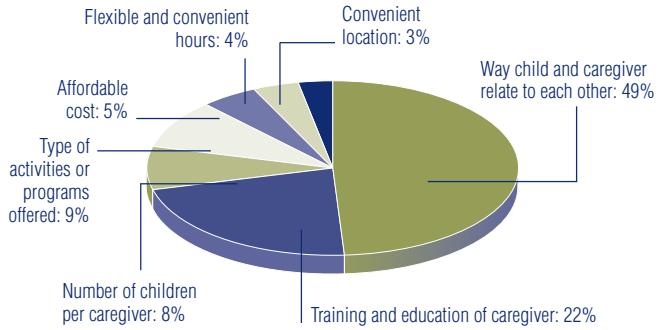
These figures reflect many things. In some case, parents' choices of caregivers are limited by geography, affordability or other restrictions on availability. But in many cases, parents have very deliberate and positive reasons for choosing the caregivers they do—and these decisions should be respected and supported. It's important to add to the number and quality of choices available to families. U.S. Census evidence shows a growing number of parents are trying to stay home with their young children when they can manage it. The number of kids with stay-at-home moms increased by 13 percent between 1994 and 2002, while those with stay-at-home dads climbed 18 percent.[9] Yet such arrangements can be very difficult to obtain or maintain. One survey found that 16 percent of kids with stay-at-home moms live in poverty, quadruple the rate of poverty among those with working mothers.[10]

Among other parents are those who feel more comfortable leaving their youngsters in the care of people they know well, such as a family member. Some desperately

Relationships Matter

Parents consider a caregiver's personal approach and training as the top characteristics they consider in choosing a child care setting.

Percent of parents (of children birth to age 5) who rank each caregiver's characteristic as most important:



Source: Illinois Child Care Survey, Social and Economic Survey Research Center at Washington State University

need the convenience of a caregiver who lives nearby, such as a neighbor. Still others seek center-based programs they believe might give their toddler a more structured learning experience. Above all, parents want a caregiver who will interact well with their child. Asked to rank the characteristics they found most important in child care, about half of surveyed parents checked "the way child and caregiver relate to each other"—the No. 1 answer in Illinois. In second place came "training and education of caregiver."[11]

Policy Recommendations for Strengthening Caregivers' Relationship with Young Children

In order to help build the healthiest possible relationships between young children and their caregivers in whatever settings parents choose, Illinois should pursue several important policy changes for children birth to age 3. The following policy agenda details several of these. Some would provide a direct benefit to parents' relationships with infants and toddlers, others would primarily boost young children's interactions with non-parental caregivers, while many overlap and would accomplish both. All are meant to better support the healthy social, emotional and educational development of young children. And all represent possibilities for the work of the new Illinois Early Learning Council, appointed by the governor and legislative leaders to help guide the improvement, expansion and coordination of early learning services for children birth to age 5.

Help parents spend more time with their young children

Expand upon the Family and Medical Leave Act (FMLA) to cover more Illinois parents and offer them paid leave from their work.

For 10 years, the federal FMLA has required that many employers offer their workers unpaid time off work, for up to 12 weeks, to attend to a newborn or adopted child's needs, a close relative's sickness or one's own illness or pregnancy. However, this law applies only to employers with 50 or more workers, and only to employees who have worked at the business for at least one year. Only California has developed a paid family-leave model, funded through insurance accounts into which employees gradually pay as they work.

Illinois policymakers should enact a similar paid-leave policy and ease the FMLA's restrictions on the size of employers covered and the length of time that employees must have worked in order to qualify. In addition to allowing more parents to spend more time with their young children, such changes would be good for the business community by ensuring happier and more productive employees. Indeed, 84 percent of covered employers reported that FMLA compliance cost them nothing—or resulted in cost savings.[12]

Struggling for the Family

The Family Medical Leave Act's limitations hamper its ability to help parents spend more time with their newborn or ill children:

- 78 percent of employees who needed leave but did not take it said they couldn't afford to take unpaid time off work.[1]
- 89 percent of the nation's private-sector work sites and 53.5 percent of private-sector employees are not covered by the law.[2]
- 45 percent of employees are ineligible for leave because they haven't worked for their current employer the required amount of time.[3]

But most people agree with the need to overcome these limitations:

- 82 percent of women and 75 percent of men support "extending state unemployment or disability insurance programs to cover unpaid family and medical leave."[4]
- Half of all Americans—including two-thirds of those under age 45—expect to need family or medical leave within the next 10 years.[5]

Sources:

1 Cantor, D., Waldfogel, J., Kerwin, J. et al. Balancing the needs of families and employers: Family and Medical Leave surveys, 2000 update. Rockville, MD: Westate, 2001.

2 Shonkoff, Jack P. and Phillips, Debora A., editors; and the Committee on Integrating the Science of Early Childhood Development (National Research Council and Institute of Medicine's Board on Children, Youth and Families). *From Neurons to Neighborhoods: The Science of Early Childhood Development.* Washington, DC: National Academy Press, 2000.

3 Cantor, D., Waldfogel, J., Kerwin, J. et al. Balancing the needs of families and employers: Family and Medical Leave surveys, 2000 update. Rockville, MD: Westate, 2001.

4 National Partnership for Women & Families. *Family Matters: A national survey of women and men.* Washington, DC: National Partnership for Women & Families, 1998.

5 Commission on Family and Medical Leave. *A workable Balance: Report to Congress on family and medical leave policies.* Washington, DC: U.S. Department of Labor, 1996.

Extend home-visiting services and related educational supports to more parents

Build upon Healthy Families Illinois/Parents Too Soon efforts, as well as Parental Training and Prevention Initiatives.

The Healthy Families Illinois and Parents Too Soon programs help more than 4,500 families of young, at-risk children statewide through voluntary home visits. Trained visitors offer parents tips on how to foster the best possible relationships with their infants and toddlers. Visitors help families connect with medical services and other important community resources. State officials have credited Healthy Families Illinois with helping to curb the incidence of child abuse. Through $11 million in state funding, Healthy Families reaches communities in 40 counties throughout Illinois and Parents Too Soon operates in 22 community-based agencies statewide—and yet both fall far short of meeting actual needs.

Home visits similarly play a key part in Prevention Initiatives, which provide intensive services to the families of 7,200 at-risk infants and toddlers statewide. Family service plans are developed to guide decisions about appropriate resources for each household, such as help for parents obtaining a high school diploma. Parental Training services are less intensive and less dependent upon home visiting. They include resource centers and phone lines to provide moms and dads answers to their questions about children's healthy growth and development. These programs serve about 33,000 families of infants and toddlers, as well as 22,000 families of 4- and 5-year-old children. Downstate Illinois alone spent about $20.2 million on Parental Training and Prevention Initiatives during fiscal year 2003, but even this amount is too little.

Parental Training and Prevention Initiatives are funded through an 11 percent set-aside in the Illinois State Board of Education's Early Childhood Block Grant (a funding stream that primarily supports preKindergarten for at-risk 3- to 5-year-olds). Governor Rod Blagojevich in fiscal year 2004 launched a plan to increase the grant by $90 million—or nearly 50 percent—over a three-year period. Illinois should not only carry out the governor's initiative but should accelerate it and continue to grow the grant beyond fiscal year 2006, paying close attention to program quality as well as reach. Similarly, policymakers should expand Healthy Families and Parents Too Soon programs to reach more families of young children in new and needy areas of the state.

Identify and help more children with special needs

Increase developmental screenings for Early Intervention services and ensure all eligible children are served.

The state's Early Intervention system provides a wide range of therapies and services for children from birth to age 3 who have disabilities or developmental delays, or risks of such delays. Overall, the program serves about 12,000 youngsters. Yet typically these cases represent only about 2 percent of infants and toddlers, far short of the 10 percent to 15 percent of youngsters who are likely eligible for services, according to national experts. Plus, Illinois ranks 48th among the states when measuring success in identifying children under age 1 for Early Intervention help.[13] About two-thirds of surveyed physicians fail to use commercially developed screening tools that could help to improve these statistics.[14]

In order to best support the most basic needs of our youngest children—their physical, cognitive, communication, social, emotional and adaptive needs—policymakers must vastly improve and expand developmental screenings for infants and toddlers. We must pay particular attention to social and emotional screenings and make sure that all eligible children receive the services they need.

Support the healthy social and emotional development of young children

Make more mental health services available to children—and vulnerable parents—who need them.

While attending to children's physical and academic growth, we traditionally have overlooked their social and emotional health. The Children's Mental Health Act of 2003 is a new law that calls for more attention to this important area of development in a variety ways that would help infants and toddlers as well as older children. Illinois should build stronger, community-oriented mental health systems that promote the prevention of mental health problems among children and the treatment of such problems. Screenings play an important role in this work, including screenings and follow-up services for new moms, who are at risk of maternal depression.

It also is important that policymakers ensure professionals trained in mental health prevention and treatment are available to child care programs to help provide young children with the social and emotional supports they need. A new Children's Mental Health Partnership—appointed by the governor—should help to guide all this work.

Make state-assisted child care more affordable and available to struggling parents

Reduce parents' co-payment fees and continue to improve income-eligibility guidelines.

After years of failing to do so, Illinois in fiscal year 2004 updated its income eligibility guidelines for state child care assistance. This will help more working, low-income families to obtain assistance and keep it for longer periods of time. In the past, a single mother with two children lost her state child care help if she earned more than $24,243 annually. This mom could go from spending 12 percent of her earnings on child care to spending as much as 50 percent in trying to cover the full cost of care. The new guidelines allow this mom to retain her assistance until she earns $27,934. Furthermore, the guidelines will be updated annually to reflect changes in state median income, upon which calculations for assistance are based. This change will cost $20 million in fiscal year 2004, a worthwhile investment to ensure that families—including those of infants and toddlers—have access to affordable, reliable child care. Policymakers must continue to ensure that eligibility rules treat families fairly.

> One in 10 Illinois children suffers from a mental illness severe enough to cause some level of impairment. Only one in five of those children receives mental health services.
>
> —Illinois Children's Mental Health Task Force

In the same vein, Illinois' policy leaders should re-examine the co-payment fees that our state charges families who receive child care assistance. Illinois' co-pays claim as much as 13 percent of a family's income and are higher than those of neighboring Midwestern states. A family at the federal poverty level pays $65 a month if they have one child in care and $95 a month for two children. We should study ways of lowering co-pays, particularly for Illinois' most impoverished families. And just as we have indexed eligibility guidelines for assistance to reflect annual changes in families' income, our state should index their co-pays to account for cost-of-living increases.

A single mother of two children, earning $22,000 a year, would pay $2,808—or 12.7 percent of her gross salary—in co-payment fees for state child care assistance during FY2004.

Improve caregivers' quality and availability through better reimbursement support

Raise reimbursement rates for child care providers who serve low-income families; create a "tiered" reimbursement structure for increasing program quality.

Child care providers who serve children dependent upon state assistance often struggle mightily to cover the full cost of providing care. Families' co-payments and state reimbursements do not typically cover the full cost. As a result, many providers choose not to accept children who need state subsidies. Others can afford to set aside only a limited number of their "slots" for such youngsters, while providers who do accept many state-assisted children must cover their losses as best they can—from holding fundraisers to keeping their employees' pay painfully low. Both quality and availability of child care for low-income families suffers, with poor state reimbursement rates as a major culprit.

Federal policymakers expect states to establish child care reimbursement rates at the 75th percentile of local markets' rates so that subsidized families can purchase care from at least three-quarters of settings in their local markets. Yet Illinois' reimbursement rates, particularly in the state's most populous areas, don't approach that standard. The current daily reimbursement rate for children under $2^{1/2}$ years of age attending child care centers full-time in the Chicago area (Cook, Lake, McHenry, Kane, DuPage

and Kendall counties) is $33.77, which allows parents dependent upon child care assistance to choose from only about 40 percent of the slots available in that area.[15] To reach the 75th percentile target, the rate would have to be raised to $39.87 a day.

Special rate incentives—known as "tiered" rates—can help improve the quality of child care. Illinois should develop tiered rates that, for example, encourage child care providers to hire better-trained professionals in exchange for increased reimbursement. In a similar vein, Illinois already has a limited, infant/toddler rate "add-on" of 10 percent that makes extra reimbursement available to child care centers serving a high proportion of very young children. The add-on pushes reimbursement up to $37.20 for centers in the Chicago area. Yet even that enhanced rate does not quite reach the 60th percentile.[16] The infant/toddler incentive is an effective tool for rewarding centers that make a special effort to serve the youngest children; 90 child care centers qualified for this incentive in fiscal year 2002, compared with 66 the previous year.[17] But it clearly cannot represent the only step we take to guarantee availability of care for children birth to age 3.

Improve caregivers' quality and availability through better training and compensation

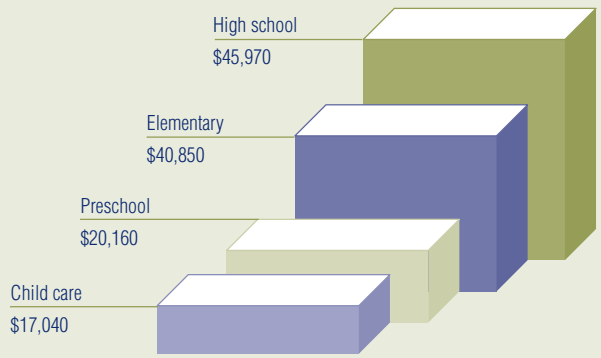
Build better training programs through work with the higher education community; strengthen such supports as the Great START and TEACH programs.

Well-trained teachers who can establish a stable and educational learning environment are the most essential ingredient of high-quality, non-parental care for young children. Yet the teacher crisis that plagues grade K-12 classrooms is far more pronounced at the early-learning level: There are not enough professionals to fill pressing needs, they are not well-enough trained and their turnover rates are incredibly high. These problems form some of the biggest and most challenging barriers to improving the care of young children.

Low Pay, High Turnover

Low teacher salaries fuel turnover rates that are terribly disruptive for young children's education and development

Figures do not include special or vocational education



Source: 2000 Occupational Employment Statistics Survey

There simply are not enough training programs to go around, and Illinois must establish more. Indeed, if the state were to require bachelor's degrees of all early learning instructors, we also would have to increase by 76 percent the teaching staffs of the colleges and universities that prepare them for work, according to one national survey.[18] Secondly, course "articulation" must improve so that more classes from one institution will count toward teaching degrees at another, such as when students transfer from a two-year college to a four-year institution. This will help teachers-in-training to avoid frustrating and costly setbacks in their education.

Thirdly, we must establish a career "lattice"—a career ladder that runs horizontally as well as vertically, and whose rungs represent jobs and their requisite credentials. This is a tool that early learning professionals need to help them more easily plan their training and careers across the spectrum of early childhood programs. Finally, the process for issuing early childhood professionals' certification should be more streamlined, with the state signing off on all certifications to give them greater weight.

Similarly, policymakers should increase early childhood professionals' pay to ensure programs can hire well-qualified people who will stay on the job for longer periods of time, building more stable relationships with young children. Sadly, annual turnover rates can run as high as 40 percent for teachers in early childhood programs and 75 percent for assistant teachers.[19] The TEACH (Teacher Education and Compensation Helps) program represents one piece of the puzzle in solving such dilemmas, helping qualified professionals to cover the costs of their ongoing training. Great START (Strategies to Attract and Retain Teachers) is another essential effort, providing twice-a-year stipends to early learning instructors who've attained certain levels of education and who remain with the same center or program. More than 5,000 professionals in almost every Illinois county have received help through Great START. However, the program expires in July 2004 unless policymakers act. Great START should be reauthorized permanently, and it and TEACH—which together cost about $10 million—should be expanded to meet needs.

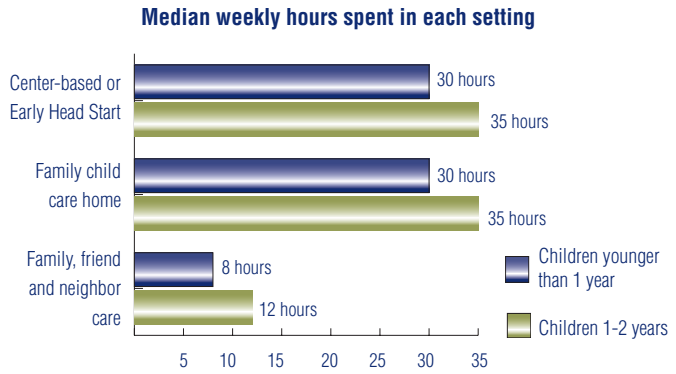
Offer better support to family, friend and neighbor caregivers

Connect license-exempt, home-based caregivers with more resources for stabilization and improvement.

Under Illinois law, home child care providers need not be licensed by the state if they care for three or fewer children, including their own, or if all children in their care come from the same household. For a variety of reasons, ranging from affordability to parents' level of comfort with caregivers, license-exempt home providers serve the largest single share of Illinois children in non-parental care settings—more than 100,000 of the children who receive state assistance for care.[20] Yet these caregivers face some of child care's biggest problems, too. They are generally less well-trained than their licensed counterparts. They certainly are more poorly paid, receiving state reimbursements of only $9.48 daily for providing up to 12 hours of care, less than one-third the rate paid to child care centers in the Chicago area for infant and toddler care. Furthermore, they are less sup-

Time Spent in Child Care

Although there are more children in license-exempt "family, friends and neighbor" care than in any state-licensed child care setting, young children generally spend less time in it.



Source: Illinois Child Care Survey, Social and Economic Survey Research Center at Washington State University

ported in many other ways and generally disconnected from other caregivers and from resources that could boost the quality of the care they're able to provide. These are problems policymakers can no longer afford to ignore if we are to foster the healthiest possible relationships between infants and toddlers and the adults who care for them.

To help ensure high-quality environments for children in family, friend and neighbor care, Illinois policymakers should raise reimbursement rates for license-exempt home caregivers. We also should establish greater incentives—as well as opportunities—for these providers to become better trained and to partner with other providers for shared activities and events that could enhance the educational experience of children in their care. Finally, policy leaders should increase other quality-boosting resources available to license-exempt caregivers. One avenue is fostering the creation of more information-sharing networks and support groups among providers.

Improve and expand the federal Early Head Start program

Increase funding and adjust eligibility guidelines to help this important effort reach more young children and their families with a range of services.

While the federal Head Start program helps low-income children aged 3 to 5 prepare for school, the much newer Early Head Start initiative aims to serve even younger children from needy families. From center-based services to home visits, this program aids children from birth to age 3 in a variety of ways. Nationwide, more than 80 percent of participants received medical screenings in 2002; about 23 percent of these children were diagnosed as needing further medical services and, of those, 93 percent received follow-up treatment for such conditions as asthma, anemia, hearing and vision problems.[21] Early Head Start also provides comprehensive services to its children's families—from parenting education to job training to housing services to English as Second Language classes—with the aim of helping parents to become more self-sufficient. Finally, Early Head Start also maintains an array of health and other support services for expectant mothers, who comprise 11 percent of the program's population.

However, like Head Start, the Early Head Start program's resources and reach remain far too limited. Last year, about $14.6 million in federal funding supported services for just more than 2,000 Illinois children and pregnant women, a fraction of those eligible. In order to reach more babies, toddlers and expectant moms, policymakers should raise funding significantly and expand eligibility. The federal poverty guidelines that form the program's main yardstick for eligibility are unrealistically low, classifying a family of three as "in poverty" only if their annual income is $18,400 or less.

Early Head Start Services

These are the important services that families participating in Early Head Start most often receive:

- Parenting education: 59 percent
- Health education: 52 percent
- Adult education, English as a Second Language classes and job training: 31 percent
- Emergency/crisis intervention: 22 percent
- Transportation assistance: 22 percent
- Housing assistance: 17 percent
- Mental health services: 14 percent

Source: *Serving America's Youngest: A Snapshot of Early Head Start Children, Families, Teachers and Programs in 2002.* Center for Law and Social Policy, June 2003.

Increase federal support for child care

Expand Child Care Development Block Grant funding to help still more working parents and parents in school or training programs to obtain child care assistance.

Two federal block grants provide a significant source of funding for Illinois' child care assistance program: the Child Care Development Block Grant, which has grown substantially since fiscal year 1997, and Temporary Assistance to Needy Families, whose dollars may be used to support child care for low-income, working parents. These federal resources are greatly responsible for Illinois' expansion of child care funding—from $263 million in fiscal year 1997 spending to an appropriation of $665.3 million for fiscal year 2004, and from a total caseload of 92,000 children to about 200,000 over that time.

Both of these federal programs were in the process of reauthorization by Congress at the time of this report's writing. It is essential that such funding sources be significantly expanded further to better support the child care needs of working parents and parents pursuing education and training.

Build and improve more child care facilities, particularly in high-need areas

Help to foster construction planning and projects that best support young children's safety and learning.

Too many areas of the state—from urban to suburban to rural—face a shortage of child care facilities. Such problems seem to hit particular socio-demographic groups especially hard. An Illinois Facilities Fund survey found in 1998 that of the 20 highest-need community areas in Chicago, a dozen had predominantly Latino populations and four others had large and growing Latino populations.[22] And although the demand for infant and toddler child care space is less pressing than that for children 3 to 5 years of age, it is no less important a need to fill. In fact, among parental requests for child care that were handled by Illinois' Child Care Research and Referral Agencies in 2002, more than half involved children younger than age 3.[23] Yet nearly one out of every five parents requesting care—parents of children of all ages—reported they could find no openings in their local child care settings.[24] When working parents want or need care for their young children, they should be able to find it.

Understandably, maintaining appropriate physical space for infants and toddlers is more expensive than it is for older children in child care programs. While licensing guidelines allow a teacher and assistant to care for up to 20 older children in one room, the rules allow only eight babies per two adults per room. Still, Illinois policymakers must take a proactive approach to surveying the space needs for learning programs serving young children and long-range planning to meet those needs through renovations and new construction. In addition, we should establish a capital program to help providers ensure their facilities furnish infants and toddlers with the safest, most appropriate surroundings for their learning.

Advocacy Recommendations for Strengthening Caregivers' Relationships with Young Children

It's not enough to have a list of policy ideas for improving young children's learning and development. Nor are good intentions enough. Only ***action*** can truly make a difference in supporting the relationships that matter most to infants and toddlers' healthy growth. This action does not require any particular expertise or great knowledge, only an honest commitment to helping children.

Here is a list of several simple things you can do:

- **Stay informed**. Pay attention to news coverage of early learning issues. Subscribe to newsletters, including that of Voices for Illinois Children (call 312-456-0600 for details). Sign up for Voices' e-mail "Action Alerts" for regular updates on policy and advocacy for children (call 312-456-0600 or visit www.voices4kids.org to sign up). Check web sites that regularly post news and updates on young children's issues, including these:

  Illinois resources:
  - Voices for Illinois Children, www.voices4kids.org (Click on "links" to connect with still more advocates and information)
  - Early Learning Illinois, www.earlylearningillinois.org
  - Ounce of Prevention Fund, www.ounceofprevention.org
  - Day Care Action Council of Illinois, www.daycareaction.org

  National resources:
  - Better Baby Care campaign, www.betterbabycare.org
  - Zero to Three, www.zerotothree.org
  - Voices for America's Children, www.childadvocacy.org
  - National Institute for Early Education Research, www.nieer.org
  - The Trust for Early Education, www.trustforearlyed.org

- **Join or form a local early childhood network**. Communities such as Rockford and Oak Park have established their own circles of parents and professionals who are interested in furthering young children's learning and development. These offer a good way of tracking what's happening locally in early learning, as well as ways of supporting the improvement and expansion of such work.

- **Organize a community meeting**. It's easier than it might seem to arrange a meeting to discuss the developmental needs of young children in your town or neighborhood. Meetings can be as large or as small, as formal or informal as you'd like. Settings can range from a local school gym or community building to your own living room. For suggestions and/or assistance, contact the Early Learning Illinois campaign at 312-516-5575.

- **Get your local news media involved**. Call the newsroom of your local newspaper, radio or TV station to pass along story ideas about a good early learning program, or to draw attention to the lack of resources for young children's developmental needs. Reporters are interested in stories that are of relevance to their readers, listeners and viewers. Taking the time to explain your interest in young children's well-being, and why it's important to your local community, is the best way of drawing the news media's interest, too. Or spread the word even more directly by writing a letter to the editor of your local paper.

- **Contact your policymakers**. You elect them; it's their job to serve you. And talking with your state representative, state senator or congressional representative might be the single most effective way to support young children's programs and policies. To find the telephone numbers and street addresses of your policymakers, check www.voices4kids.org and click on the "write your legislators" button. Or visit the Illinois State Board of Elections web site at www.elections.state.il.us and click on "find districts/officials." Or call Project VoteSmart at 1-888-868-3762.

- **Talk with family and friends**. As simple as it sounds, this is a significant avenue for furthering policy changes that are good for kids and families. Let your family and friends know how important you think it is to bolster healthy relationships with young children. Get them interested and involved, too—and help them to understand that every voice counts in speaking out for children's needs. Share this report with them.

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