

CHAPTER 15

Back to Basics: Building an Early Care and Education System

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As states expand both their interest and investments in young children, they expect, first and foremost, to have youngsters who are ready for school, youngsters who meet standards, and youngsters who are adept at preliteracy and numeracy skills. Make no mistake, the "basics" have returned in full force to early care and education. So prevalent is this sentiment that White House conferences, vast media attention, countless new initiatives, and fresh legislation are promoting standards, outcomes, skills, and assessments for young children. Awash with good intentions, this orientation has also, however unintentionally, obfuscated another set of less well known, but equally important, basics. Poorly understood, this second set of basics refers to what it takes to make early care and education programs function so that they can, indeed, provide the quality services necessary to achieve the basics so common in today's parlance.

Just what constitutes this second set of basics, and why are they so important? This chapter suggests that these "hidden basics" are the *infrastructure* and the *system* of early care and education. At the core of every critical policy question faced by policymakers and advocates, these basics beg for attention as America asks the following questions. How should quality services be "incentivized"? How can we break down the heretofore segregated approach to services? Who should take the lead in administering and/or regulating such efforts? How do we know that such efforts are working, and for what populations do services work best? What will such efforts cost?

Not glamorous, catchy, or well-understood words, *infrastructure* and *system* are often neglected in important discussions of early childhood policy. They are regarded as vague and are deemed remote from the daily realities that face parents and children. Little could be further from the truth. Parents care

about quality early care and education for their children. And infrastructure is the sine qua non of that quality; it is the essential ingredient that enables expansion and excellence. Systems are also important to parents and policymakers. Systems make the pieces function; they are what enable tax dollars to yield returns and what congeal highly disparate, idiosyncratic, and episodic efforts. Systems eliminate redundancies and maximize efficiencies.

This chapter is about the all-important and hidden basics—the *infrastructure* and the *system*. By *infrastructure*, we mean the supports that are essential to making programs and other direct services to children and families effective. Such supports (or elements of the infrastructure), although differing somewhat according to various authors (as we delineate later), are generally accepted as including (a) professional development and training, (b) regulation, (c) quality assurance mechanisms, (d) information dissemination, (e) finance, (f) governance, and (g) accountability. *System*, as we use it, is a broader term that encompasses both the infrastructure and the direct services that children and families receive (typically, the programs and services). Using these definitions, this chapter considers the nature of systems, revealing that to date there is no single or uniform definition of an early care and education system or of its infrastructure. The chapter considers why this is the case and discusses the liability of continuing to mount programs in the absence of such definitions. It offers a more elaborated working definition of an early care and education system and of its infrastructure. The chapter asserts unequivocally that unless the system and the infrastructure are addressed and supported, there is little opportunity for achieving early care and education and the desired outcomes for children now being touted. Finally, it concludes with concrete operational suggestions

for consideration as new agendas for children are being considered.

WHY A SYSTEM AND WHY AN INFRASTRUCTURE?

During recent years, investments in early care and education have increased dramatically at both the federal and state levels. Using constant 1999 dollars, federal expenditures on early care and education increased from about \$8 billion to \$12 billion between 1992 and 1999 (Barnett & Masse, in press). If we examine the trajectory of state investments, we see that total spending for child development and family support efforts has increased by nearly 90% since 1998 (Cauthen, Knitzer, & Ripple, 2000). In 2000, state investments alone totaled more than \$3.7 billion, a dramatic increase over a mere 2-year period. In fact, 33 states reported overall funding increases of 10% or more. Although these increases were found across the early childhood age group, there are still fewer resources accorded to infants and toddlers. Between 1998 and 2000, state funding for children ages 3 to 6 years increased by 24% (from \$1.7 billion to \$2.1 billion), and funding for children under 3 more than doubled (from \$108 to \$226 million) (Cauthen et al., 2000).

These trends are mirrored—and in some cases magnified—internationally. Although European countries have had long traditions of investing in programs for young children, some nations with much shorter histories have increased their financial commitments to early care and education dramatically over the past 5 years. In Portugal, for example, the national budget for preschool education has more than doubled since 1996. Significant increases have been documented in the Netherlands and the United Kingdom as well. Most countries now spend between 0.4% and 0.6% of their gross domestic product

(GDP) on early childhood education for children between the ages of 3 and 6 years (the United States spends about 0.36%). Some countries spend significantly more when infant-toddler services and other family benefits are included in the calculations (Organization for Economic Cooperation and Development [OECD], 2001). Indeed, countries such as Belgium, Denmark, France, and Sweden routinely spend more than 1% of their GDP on early care and education. Moreover, nearly all other industrialized countries invest in important family supports, including child allowances and paid parental leave policies (Meyers & Gornick, 2000; OECD, 2001; Rostgaard & Fridberg, 1998).

Despite this rapid and significant infusion of funds, concerns about the quality of services and their ability to yield and sustain the outcomes desired by policymakers remain prevalent (Kagan & Cohen, 1997). When the Cost, Quality, and Child Outcomes Study was released in 1995 (Cost, Quality, and Child Outcomes Study Team, 1995), even those closest to the field were surprised by its findings related to the pervasiveness of low- and mediocre-quality care. Then, and still today, we correctly ask the following questions. How can quality be so low when so many centers and programs are being accredited? When so many quality initiatives are being funded? When investments are increasing so? When parents are paying the most they can pay, often more for child care than for college tuition?

There are two answers to these challenging questions. First, and most important, the resources to establish quality are insufficient to meet the true costs of American child care (Cost, Quality, and Child Outcomes Study Team, 1995). This is the case despite requirements that a certain percentage of the Child Care Development Fund and Head Start funds be allocated for quality improvement measures and despite notable complementary

efforts by states to bolster services. Unlike other nations with whom we are routinely compared, America's public investment in early care and education remains distressingly low (Meyers & Gornick, 2000; OECD, 2001). As noted earlier, although the United States ranks among the richest nations, it spends a much smaller share of its wealth on young children and families than do most other industrialized countries. In these countries, parental fees typically cover 25% to 30% of the costs of child care, with government picking up the rest of the tab. In contrast, parents in the United States carry the burden of roughly 60% of the costs of early care and education (OECD, 2001), and this makes investing in quality more difficult to finance. So, the first critical issue revolves around *how much* is being expended on young children.

Although inadequate resources is the most important issue, it is not the only issue. We need to understand that *how* resources are spent is also critically important. Historically, our public investments in early care and education have been directed to providing direct services to children and families and to increasing the supply of services. A secondary objective has been to increase affordability via subsidies to fee-paying parents. Some, but far less, attention has been paid to the quality of those services. And even less attention has been paid to nurturing the activities and supports that nourish quality.

For example, even though *study* after study has found that states with more stringent regulations tend to have higher quality centers (Cost, Quality, and Child Outcomes Study Team, 1995; Howes, Smith, & Galinsky, 1995) and family child care homes (Galinsky, Howes, Kontos, & Shinn, 1994), states have strengthened some regulations but not others. Many states have improved staff-child ratios for infants and preschool children but not for 2-year olds. States have

added substantial numbers of hours of ongoing staff training, but preservice qualifications have not improved greatly (Morgan, in press). Although we have learned that wage enhancements are directly related to increased quality in programs (Bell, Burton, Shukla, & Whitebook, 1997), increases in wages have remained the purview of special (and worthwhile) projects rather than a prevailing characteristic of all early care and education efforts. Similarly, although research has found that programs accredited by the National Association for the Education of Young Children (NAEYC) pay higher wages to staff, report lower teacher turnover, and have retained twice as many staff members over the past decade as compared with non-accredited programs (Whitebook, Howes, & Phillips, 1998), few states provide incentives for settings to undergo this quality improvement process. Just 16 states pay a higher per-child rate to accredited programs (Morgan, in press), and only 5 states require state prekindergarten programs to be accredited (Mitchell, Ripple, & Chanana, 1998). Finally, although we understand that quality curriculum and quality pedagogy are essential to quality early care and education, only very recently have we linked these ingredients to robust calls for credentialed personnel (Bowman, Donovan, & Burns, 2001; Kagan & Cohen, 1997).

The disconnect among research, policy, and practice clearly looms large in early care and education. It is particularly problematic in early care and education now, however, because we have an opportunity to redirect a portion of the significant investments that are being made. Indeed, rather than focusing all new dollars on direct services and demand-driven subsidies to improve affordability, quality enhancement would stand a far better chance if some portion of the investments were devoted to supporting the infrastructure and building a durable coordinated system

of early care and education (European Commission Childcare Network, 1996; Kagan & Cohen, 1997; Gallagher & Clifford, 2000; OECD, 2001). To that end, Kagan and Cohen (1997) recommended that 10% of early care and education funds be invested directly in the infrastructure. This earmarking would still allow states the flexibility to determine how to allocate the money so as to meet local needs. In other countries, such as Germany and Austria, the high quality of early care and education programs has been attributed to a strong infrastructure (Tietze, Cryer, Bairrao, Palacios, & Wetzel, 1996). Not surprisingly, the European Commission Childcare Network (1996) recommended that countries allocate at least 6% of early childhood funds to develop the infrastructure. In America, however, a major part of the challenge is that we are unclear as to what we mean by a system and what we mean by infrastructure.

HOW HAVE SYSTEM AND INFRASTRUCTURE BEEN DEFINED IN THE PAST?

Webster's New World Dictionary defines a system as "a set or arrangement of things so related or connected as to form a unity or organic whole (e.g., a solar system, school system, system of highways)" (Merriam-Webster, 1970, p. 1445). Note that the nomenclature "school system" is so commonplace that *Webster's* uses it as an exemplar. This popularity of "school system" stands in stark contrast to the notion of an "early care and education system" not only in *Webster's* nomenclature but also in reality. To think of schools as functioning within the context of a system is normative; to think of early care and education as functioning within the context of a system is not, even during an era when so many parallels are

drawn between compulsory (K-12) education and early childhood education.

Although it is not common to consider a system of early care and education, during the past decade such conceptualizations and nomenclature have begun to appear. For example, in 1991, Jule Sugarman discussed the characteristics of an early childhood system. He noted that although early childhood programs were gaining increased attention at the federal level, "what is missing is a sense of what system(s) would best accomplish our national objective" (Sugarman, 1991, p. xi). He suggested that the characteristics of an early childhood system had elements "with respect to" the child's program, service availability, protecting children, health and mental health, families and social services, staff, environment, funding, providers, nutrition, and other matters. For each of these items, Sugarman spelled out a set of indicators.

Taking a different approach, the Essential Functions and Change Strategies Task Force (1993) of the Quality 2000 initiative began to deal with the definition of the infrastructure. Using the Webster's definition of an infrastructure as the "substructure or underlying foundation" (Merriam-Webster, 1970, p. 723), it suggested that the early care and education infrastructure was composed of five essential functions: (a) collaborative planning and cross-system linkages, (b) consumer and public engagement, (c) quality assurance, (d) professional and workforce development, and (e) financing. In addition to creating subthemes for each of the five functions or pieces of the infrastructure, this group noted that each function was a specialized or essential component of the whole; "a function implies performance and action essential to the operation of the system" (Essential Functions and Change Strategies Task Force, 1993, p. 11). A function or an element of the infrastructure is a part of, but not a replacement for, a system.

Emanating from this work, *Not by Chance* (Kagan & Cohen, 1997) identified eight components of an early care and education system for consideration by those interested in designing a long-term vision for such a system: (a) quality programs; (b) child-based, results-driven system; (c) parent and family engagement; (d) individual licensing; (e) professional preparation; (f) program licensing; (g) funding and financing; and (h) governance, planning, and accountability (see Box 15.1).

Although the list of components is important, more crucial is the definition of the infrastructure and the system proffered by *Not by Chance* (Kagan & Cohen, 1997). The report suggested that a system consisted of these eight components and that all eight components had to be present for a system of early care and education to exist. Stated as a somewhat unconventional formula " $8 - 1 = 0$," *Not by Chance* suggested that if even one component of the system were taken away, the system could not function as a system; the net result would be zero or a nonsystem. Equally important, *Not by Chance* suggested another formula: The system (or all eight components) was composed of programs (Component 1) + the infrastructure (Components 2-8). Definitionally, then, it is programs plus the infrastructure that equals or composes the system.

More recently, other scholars and practitioners have highlighted the need for increased attention to the infrastructure and to systems theory. Gallagher and Clifford (2000) argued that the lack of a comprehensive infrastructure or support system for the delivery of early care and education services undermines efforts to protect and enhance the well-being of young children. They identified and discussed eight necessary components for creating a comprehensive infrastructure for an early care and education system: (a) personnel preparation, (b) technical

Box 15.1 The Eight Components of an Early Care and Education System

1. *Quality Programs.* At the core of any system must be a set of direct services to children and families that are of high quality and that are easily accessible.

- *Create learning environments and opportunities:* Foster the effective use of materials, curriculum, and pedagogy, including multi-age and flexible grouping of children, effective staff deployment, attentiveness to cultural and linguistic variation, and appropriate balance between academic and play activities. Establish effective systems of assessment that are ongoing and that are used to improve instruction.
- *Advance children's healthy development:* Foster concerted attention to children's physical and mental health by either providing or accessing appropriate screenings, immunizations, and services.
- *Foster accreditation:* Provide incentives to encourage early care and education services to participate in accreditation and in other quality enhancement efforts.
- *Create and maintain links with community resources:* Foster ongoing links with schools, resource and referral agencies, and other community services. This component stresses support for these agencies.
- *Create and maintain links with family child care:* Support family child care and family child care networks.

2. *Child-Based, Results-Driven System (accountability)*

- *Define appropriate results:* This includes the establishment of a state- and/or community-wide system of results across all domains of development, with appropriate benchmarks. Parents and professionals must be included in the development of such results.
- *Establish mechanisms to collect results appropriately:* This includes the development of data collection strategies that take the ages and abilities of young children into consideration.
- *Ensure that results are used appropriately:* This includes the establishment of appropriate safeguards so that data collected will not be used to label, track, or stigmatize young children and that data will be useful to policymakers as they plan increased services for young children and their families.

3. *Parent, Family, Community, and Public Engagement*

- *Support parents as consumers:* Ensure that parents have options as they use early care and education services.
- *Increase workplace commitments to families and business and community involvement in early care and education:* Ensure that incentives are provided for American businesses to be family friendly in their policies and practices and to be involved in advancing legislative and community supports for early care and education.

- *Increase community awareness of early care and education:* Provide for the development of ongoing opportunities for the public to gain information regarding the status of young children and their families.

4. Individual Credentialing

- *Credential all who work with young children:* Create an appropriate set of credentials so that all who work with young children have the ability to gain transferable credentials. This suggests that the licensing of facilities should be distinct from the credentialing of individuals.
- *Create the credentialing system and compensate teachers accordingly:* Ensure that credentials that are developed are instantiated in state regulations and are accompanied by appropriate salaries and benefits.
- *Create administrator/director/master teacher and leadership credentials:* Recognize that an array of opportunities for adults exist in early care and education, and create credentials for them.

5. Improve the Content of, and Resources for, Professional Development

- *Examine the content of all preparation programs:* Ensure that all certification and teacher preparation programs are up-to-date and focused on producing developmentally appropriate outcomes.
- *Create the content and incentives:* Ensure that administrator/director/master teacher content is appropriate for the diverse roles and responsibilities.
- *Create opportunities for advocacy and leadership:* Foster the development of leadership in all sectors of the early care and education system.

6. Program Licensing

- *Eliminate exemptions:* Ensure that all programs serving young children are subject to state regulation.
- *Streamline, coordinate, and adequately fund facility licensing:* Ensure that licensing is efficient and that it is funded at levels sufficient to ensure its completion.
- *Promote national guidelines:* Create and/or support the promulgation of a set of national licensing standards that can be used as guidelines for states.

7. Funding and Financing

- *Identify the costs of a quality system:* Ensure that all fiscal projections include the cost of funding the infrastructure and the full cost of care.
- *Raise staff compensation:* Staff compensation in early care and education should be commensurate with that of public schools given equal education and experience of staff.
- *Identify revenue sources:* Discern short- and long-term revenue sources that can fund the early care and education system.

- *Develop a long-term financing plan:* Engage civic leaders, stakeholders, and academics in the development of a comprehensive 15-year financing plan that considers the costs of creating an early care and education system, with adequate funding to support the infrastructure. Create a time line for its implementation.

8. Governance, Planning, and Program Accountability

- *Establish governance mechanisms at the state level:* Such mechanisms should durably provide for the oversight of the early care and education field. Such mechanisms might be boards, cabinets, or other structures, but they must be durable and take responsibility for planning, assessment, distribution of resources, and agenda setting.
- *Establish governance mechanisms at the local level:* Create mechanisms at the local level that will coordinate the delivery of services, ensure the effective use of funds, provide for the infrastructure, and coordinate efforts with the state governance mechanism.

SOURCE: Kagan and Cohen (1997).

assistance, (c) applied research and program evaluation, (d) communication, (e) demonstration, (f) data systems, (g) comprehensive planning, and (h) coordination of support elements. They discussed the various types of barriers—institutional, psychological, sociological, economic, political, and geographic—that one may face when implementing new policies to support an infrastructure.

Systems theory is prevalent also in international discussions for improving early care and education policies and programs. The 1992 European Council Recommendation on Child Care, which has been adopted by all member states, proposed specific objectives for the development of services for young children: affordability, access to services in all areas, access to services for children with special needs, combining safe and secure care with a pedagogical approach, close and responsive relations between services and parents and local communities, diversity and flexibility of services, increased choice for parents, and coherence between different

services. "Taken together, these objectives form the basis for the definition of a good quality service system; fully achieved, they would ensure equal access to good quality services" (European Commission Childcare Network, 1996, p. 5). The European Commission Childcare Network (1996) proposed criteria or targets for assessing progress toward achieving the recommendation's specific objectives and establishing the conditions that would enable their achievement.

Building on this work and its own policy analysis, the OECD Thematic Review of Early Childhood Education and Care Policy proposed eight key elements of successful policy to promote equitable access to quality services (OECD, 2001): (a) a systemic and integrated approach to policy development and implementation; (b) a strong and equal partnership with the education system; (c) a universal approach to access, with particular attention to children in need of special support; (d) substantial public investment in services and the infrastructure; (e) a participatory approach to quality improvement and

assurance; (f) appropriate training and working conditions for staff in all forms of provision; (g) a systematic attention to monitoring and data collection; and (h) a stable framework and long-term agenda for research and evaluation. Cross-national analyses suggest that each of these key elements needs to be addressed for the goal of quality accessible services to be achieved.

As analytic as these definitions are, their utility emerges only when they are coalesced into action and practice. In reality, however, there is little commonality in the systems of early care and education that are emerging. Each state, each leader, and each policymaker seems to be etching a unique definition. Like the veritable and venerable Rorschach Test, early care and education systems seem to derive individual meaning in, and from, the eye of the beholder.

On the one hand, such differences in interpretation are welcome. They provide the maximum amount of flexibility to states as they craft their early care and education policies. This approach does not limit ingenuity or invention, with the result that exciting efforts are being mounted to augment and enrich direct services to children. In addition, such variation leaves us with an unintended natural experiment whereby states can glean workable strategies and ideas from others. Often a pioneer state will create an effort that supports one component of the system, and when it is reviewed by other states, it is modified and improved, sometimes causing the pioneer state to alter its effort. Examples of this may be observed in the increasing authority being given to governance bodies as they proliferate across the states (Cauthen et al., 2000). As such, there is not only a cumulative building of efforts but also an approach that promotes their continuous improvement. Finally, an advantage of the "nonsystematization" of the system is that the different efforts could be subjected to qualitative and comparative evaluation.

On the other hand, the lack of a common understanding of what is meant by a system of early care and education leaves policymakers and practitioners in somewhat of a quandary. Lacking clear direction, policy initiatives often focus on one element of the system one year and on another element the next. Furthermore, without a widely accepted definition of a system, there is no organized way to ascertain whether all elements of a system are being addressed. Another risk is that as initiatives develop haphazardly in parts of the country—with some very active states and others much less so—inequities in system building emerge across states.

A scholar from another country might peer at the United States and discern that the same kind of unsystematic chaotic development of early childhood programs is now characterizing the development of early childhood systems. Indeed, the international OECD review team that reviewed U.S. early care and education in 1999 noted the following:

We witnessed an abundance of collaborative initiatives and innovative practices, particularly at the local level, a remarkable array of energising forces intent on improving the overall situation of young children and their families. . . . In order to increase the chances of sustaining and nourishing regional partnerships (which are all based on voluntary participation), an agreed infrastructure with clear policy goals and implementation plans is necessary. What is needed is an overall vision of quality education and care in the early years, a coordinated policy framework to draw together these varied approaches and use them to the best advantage of young children and their families. (OECD, 2000, p. 52)

THE CURRENT STATUS OF SYSTEMS DEVELOPMENT

State efforts to build a system are so prevalent today that the most recent *Map and Track* edition (Cauthen et al., 2000), a report

that profiles and analyzes state policies and initiatives for young children and families, has a special category titled "Early Childhood Systems Development." The report found that state efforts to build early childhood systems and maximize the impact of program investments are increasing but remain uneven across the country. The authors found that 30 states report some level of early childhood systems-building efforts. Although not all of these efforts focus exclusively on young children, this nonetheless represents a substantial increase over the 16 states that reported such systems-level initiatives in 1998. On the other hand, only 11 states dedicate state funds for systems development efforts, and some of these funds support programs and services. The authors summed up the situation as follows:

Recognizing that developing individual programs is not sufficient to address the multiple needs of young children and families, state policymakers are increasingly attending to early childhood system development—developing the infrastructure, resources, and leadership necessary to create a coordinated system of services and supports to address the many needs of young children and their families. (p. 8)

But how coordinated and how comprehensive are these services really? On the positive side, many states, in addition to funding direct programs and services, are funding components of the infrastructure. We use the term *direct services +* to describe efforts that typically provide for direct services to children and families plus one or two other components of the infrastructure. In some cases, these noteworthy *direct services +* efforts include funding new supports for staff to achieve better training and compensation. For example, Rhode Island's RItCare Health Insurance provides health insurance for child care center staff whose programs serve state-subsidized children (Mitchell,

Stoney, & Dichter, 2001). North Carolina's TEACH and WAGES models, now being replicated in many other states, provide educational scholarships and the potential for increased wages for people working in early care and education settings (Mitchell et al., 2001). In other states, *direct services +* means that funds are provided to subsidize facilities expansion. For example, Connecticut has appropriated money to lower the debt owed by providers on revenue bonds for new facilities. Early education providers who build new facilities are responsible for paying back, over a 30-year period, only 20% of the debt incurred (Mitchell et al., 2001).

In still other states, *direct services +* means establishing mechanisms that facilitate coordination and policy development. For example, Hawaii has established its Good Beginnings Alliance, a statewide public-private partnership that works to plan and coordinate services for young children. Indiana has its Building Bright Beginnings effort, a governor's initiative that has both an advisory team and a center that work to coordinate and assess services and to disseminate information to policymakers. South Carolina's First Steps to School Readiness has established public-private partnership boards in every county to assess local needs and develop strategic planning. The Governor's Early Childhood Initiative in Kentucky, funded with tobacco settlement funds, has created an Early Childhood Development Authority to oversee and administer funding, Community Councils to assess local needs, and a Business Council to promote involvement in early childhood issues (Cauthen et al., 2000).

These efforts, and many like them, clearly indicate that the idea of supporting the infrastructure is becoming more normative. Yet this progress has not been easy given both the nation's penchant to legislate incrementally and its predilection to invest in direct services. As a result, these efforts warrant accolades, as

do the ardent pioneers who conceived, advocated for, and implemented them.

Internationally as well, there are countries that have demonstrated a strong commitment to developing services plus one component of the infrastructure. For example, England has set up Early Years and Childcare Development Partnerships with representatives from the public, private, and voluntary sectors; local education, health, and social services; employers, trainers, advisers, and parents in each local authority. The partnerships are a governance tool for expanding and improving early care and education services in partnership with public, for-profit, and nonprofit providers. Although the funding is decentralized to the local and services level, national standards and regulations remain. Part of the grant is earmarked for developing the local infrastructure and services, which support quality assurance (Bertram & Pascal, 1999).

Several countries have focused on strengthening the training and working conditions of staff. Finland, Italy, and Portugal recently upgraded the required training and education of lead early childhood staff to the university level (OECD, 2001). Belgium, Italy, Norway, and Portugal have improved in-service training; noncontact time is set aside in employee contracts for ongoing professional development as an essential part of forging staff relationships and of undertaking an ongoing critical evaluation of the curriculum being offered to children. In Italy, early childhood staff have a right to 6 hours of paid professional development time each week. During this time, they may undertake, for example, the process of pedagogical documentation, which is a very useful tool to deepen understanding among staff and children and to encourage reflective practice (European Commission Childcare Network, 1996).

Another example of *direct services* + is found in Australia, which is unique in

having a national, government-supported accreditation system for its early care and education centers that is tied directly to the provision of funding. The Quality Improvement and Accreditation System (QIAS) is based on the NAEYC voluntary accreditation program. Like the NAEYC accreditation, the QIAS focuses primarily on assessing and improving the determining, or process, components of quality through an externally validated, center-based evaluation method. Because centers are required to take part in the QIAS process for parents to be eligible for the Child Care Benefit (the main fee subsidy in Australia), more than 98% of both private for-profit and nonprofit centers participate (Press & Hayes, 2000).

Other countries have focused their *direct services* + on improving parent and family engagement in early care and education. In the Netherlands and Portugal, for example, parent associations are among the privileged partners (along with, e.g., trade unions) in the consultation process leading to the formulation of national educational policies, including those concerning care and education. In several countries (e.g., Denmark, Finland, the Netherlands, Norway, Sweden), genuine decision making, access to information, and some powers of supervision are given to parents via parent councils and representation on governing boards (OECD, 2001).

Yet there is a problem. Only a handful of efforts are truly addressing the entire system. Although addressing one, two, or even three components of the infrastructure is better than addressing none and is extremely important, it will not render the kind of quality improvement needed over the long haul. For example, despite considerable diverse investments in training and professional development, which is often thought to be at the very heart of early care and education, gains in quality are modest. Where more robust gains appear, it is often because a

combination of improvements exists. North Carolina is an excellent example. That state, through a variety of efforts such as Smart Start, Teacher Education and Compensation Helps (TEACH), and regulatory changes, has demonstrated improvements in child outcomes (Smart Start Evaluation Team, 2000). Specifically, Smart Start is a comprehensive effort that promotes county partnerships that plan and make decisions regarding early childhood education in their counties. The TEACH project aims to promote professional development and compensation of early care and education staff. Regulatory improvements have strengthened the content of and support for regulations in early care and education settings. Together, these efforts and others in North Carolina combine to form a reform approach that is producing results. Combining lessons from practice in North Carolina and from theoretical work on systems development, we can now see that it is imperative not to fund only *direct services* +. We must press ourselves to consider the system in its entirety.

How can this be done in a nation characterized by episodic and flirtatious investments in children? In a nation where legislative and bureaucratic structures foster categorical programmatic separations? In a nation that is reluctant to value early care and education as a national imperative? Although not definitive or the sole answer, one response is to do what business and other disciplines and fields have done routinely—to acknowledge the importance of long-term strategic planning and to develop incremental operational strategies aligned with the long-term plan. Stated differently, considering the system in its entirety means having a dream and developing sequentially and systematically the process to achieve it. This approach suggests that creating a detailed vision or plan for the early care and education system is the requisite first step, to be followed by the development of implementation plans that

can be aligned with legislative initiatives over a period of years.

Is this possible? Indeed, can this be done? As states have considered expanding their services to young children, some have begun to shift from a program approach to considering the development of a system. Delaware, in its Early Success effort, developed a long-range blueprint that advanced the existence of a system (Early Success Steering Committee, 2000). Building incrementally, Delaware is moving toward the enactment of a comprehensive system of services. Likewise, Massachusetts has developed a similar comprehensive plan (Massachusetts Department of Education, 2001), as have North Carolina and California (Mitchell et al., 2001). Most recently, New York State education legislation that addresses universal pre-kindergarten has suggested that six critical dimensions need to be considered: universal access, diversity, collaboration, developmentally appropriate practice, teacher preparation, and financing. "The existing system not only contributes to shaping the development of hundreds of thousands of preschoolers in New York State, it also operates as a vital support system for the families to which those preschoolers belong" (Lekies & Cochran, 2001, p. 59). In sum, these states have a mandate to transcend programmatic thinking and move to systemic long-term planning that defines and envisions a system of early care and education.

Another example of comprehensive system building in American early care and education is the U.S. military. More than 200,000 young children are served every day (Campbell, Appelbaum, Martinson, & Martin, 2000). Over the past 10 years, the armed forces have developed a system of child care options with its own regulatory process, training and improved wages, and accreditation program. The large-scale program is adequately funded, addresses quality, has reasonable personnel policies, and is open to all children and families

for a sliding scale fee (Morgan, in press). The military uses a systemic approach that links centers, family child care homes, before- and after-school programs, and resource and referral services to assist parents in finding care through a single point of entry. Basic standards have been established and are rigorously enforced in all settings. Moreover, 95% of all military child care centers also meet the higher NAEYC accreditation standards. In military child development centers, staff receive systematic ongoing training (24 hours every year) and increased compensation that is linked to their training. Following training and wage improvements, the system has experienced a dramatic reduction in staff turnover—from more than 300% annually at some bases to less than 30%—and staff morale and professionalism have improved (Campbell et al., 2000).

Taking a look outside the United States, a few nations have recognized that all components of the system need to be addressed so as to achieve quality, accessible services, and a solid infrastructure to support them (OECD, 2001). We discuss two examples here. First, Sweden has developed a coherent early care and education and school-age child care system for children from birth to 12 years of age. All children with working or studying parents have a *legal right* to a place in early care and education from 1 year of age (after the paid parental leave period). A free part-time session will soon be available for all 4-, 5-, and 6-year-olds. Since 1996, the Ministry of Education and Science has held national responsibility for policy development for early care and education and compulsory schooling, although in practice local authorities have the freedom to adapt policies to meet local needs and circumstances. National curriculum guidelines for preschool, compulsory school, and upper secondary school are linked conceptually by a coherent view of knowledge, development, and learning. A new preservice education

program for lead staff who work with young children will ensure that early childhood, school-age child care, and primary school teachers share a common core of knowledge and understanding. Similar pay and working conditions already exist across the sector (Gunnarsson, Martin Korpi, & Nordenstam, 1999).

France is another country that has taken a systemic approach. In contrast to Sweden, however, there are in fact two highly developed systems in France: a system of infant-toddler centers, family child care, and drop-in centers for children from birth to 3 years of age that are available on a sliding scale fee and a system of universal free preschools for children from 2½ to 6 years of age. Each system has a distinct and coherent national regulatory framework, funding policy, professional development structure, and methods for evaluation and accountability. Although voluntary, more than 98% of 3-, 4-, and 5-year-olds attend the preschools (*écoles maternelles*), which are administratively part of the primary school system. A national curriculum organized around 3-year "cycles" encourages pedagogical continuity as children move from one class to another (French-American Foundation, 1999). Although in the past there have been few links between the infant-toddler and preschool systems, new approaches are being developed, particularly at the local level, to bridge the divide (Baudelot & Rayna, 2000). In sum, these two international examples confirm the need for efforts in all areas for the system to really work in ways that promote child and family well-being.

ACHIEVING THE VISION

There is no question that we are a long way from implementing all components of an early care and education system. Yet if we look back just a few years, the idea of a

system and the idea of developing an infrastructure were not even in the lexicon. Today, armed with better research and greater public support than ever before, we sit on the cusp of making decisions that will affect the future of American early care and education and the life chances of millions of youngsters during the years to come.

Rather than asking *whether* this vision can be achieved, we must turn our energies and discourse to discerning *how* to do it. This shift is simple to state but not simple to do. The journey begins by engaging states in the process of thinking strategically about how to promote more positive outcomes for young children given that a wide gap in state-level vision and leadership exists between states that are doing little for young children and those that have mounted comprehensive early childhood systems-building initiatives. This gap reflects not only different levels of fiscal investments but also different degrees of understanding about how investing in young children relates to larger state economic and educational goals (Cauthen et al., 2000).

With this context in mind, the first step would be to coalesce knowledgeable and caring people to develop a state plan. The state plan must address all components of the system. It must delineate strategies for each. Then, the state must be self-critical and undertake an honest assessment of where it sits in each component. By identifying programs and projects that exist either at the state or local level and slotting them into one of the components, it will quickly be apparent where voids exist and, therefore, where work is necessary.

Once the tasks are identified, a time line over a period of years should be established. The point is not to achieve all elements at once but rather to have a strategic vision and time line of what and when each area will be addressed. Developing a strategy for achieving an early care and education system requires sustained long-term planning, so

perhaps it would be prudent to start with a series of 5-year plans (Gallagher & Clifford, 2000). Establishing benchmarks for accomplishment will facilitate the tracking of progress.

This work could augment current efforts in the field to build public and political will and to develop strategic planning. For example, the National Governors Association's Center for Best Practices has launched an initiative to support seven states (Georgia, Illinois, Maryland, New Hampshire, Ohio, Washington, and Wisconsin) in their efforts to build public and political will for improving access to affordable, quality early care and education. Each state team is working on establishing a vision of early childhood care and education with specific objectives and is developing a strategic plan for building public and political support for this vision. The National Governors Association has provided technical assistance and guidance to the state teams to help them achieve their goals (www.nga.org).

Engaging legislators and business leaders in the process helps tremendously. Once the power elite have a clear understanding of what is needed, why it is needed, and how it will help them, obtaining funds is less difficult. The media can be an important partner in this effort, particularly to help explain to both the public and decision makers what an infrastructure is and why it is needed to support a system of quality services (Gallagher & Clifford, 2000). For example, I Am Your Child is a national campaign that has worked with mass media, community mobilization, public education, and policy outreach to promote public awareness about, and stronger societal investments in, early childhood development. The public engagement campaign seeks to unite and expand the work being done on the national, state, and local levels to provide comprehensive, integrated early childhood development programs that

include health care, quality child care, parent education, and intervention programs for families at risk (www.iomyourchild.org).

Finally, lessons from abroad highlight the importance of developing a shared vision for children across the early childhood years with coherent policy frameworks, regulations, funding, and staff training and working conditions for all early care and education programs (OECD, 2001). This approach not only is viewed as more efficient, because it resists the fragmentation and overlap of resources and services, but also is supported because it is more equitable for children and families. In addition, international experiences suggest that developing and operating a system does not have to be part of a special initiative with a catchy title or slogan. Indeed, although such efforts may

be necessary initially to garner public support, examples from other countries suggest that early care and education can become part of a set of inviolable rights for all citizens, just like public schooling.

It has been noted that to have dreams come true, we must first dream. The challenge at hand is not to squander the opportunity by thinking too narrowly or by thinking in the short term. We need to settle for nothing less than a comprehensive plan and strategy that will create a system of early care and education founded on a clear and coherent vision for children and families. In so doing, we will reaffirm that achieving the basics being called for by the popular press and policymakers will never be achieved unless the basic infrastructure and system for early care and education are well in place.

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