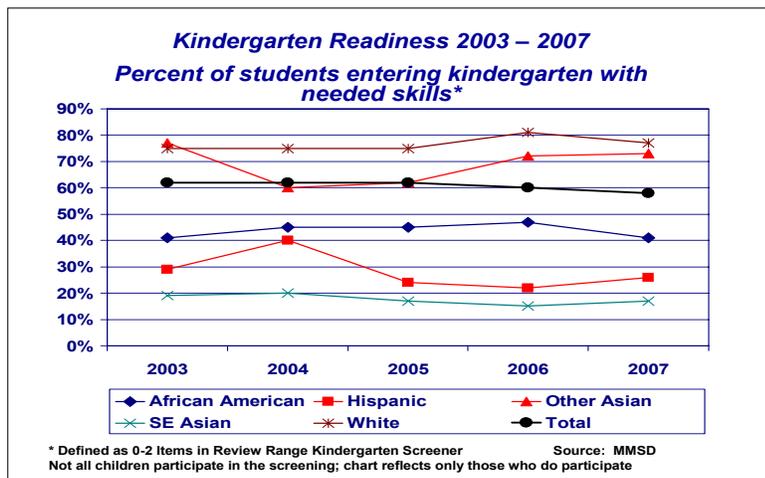


United Way of Dane County Born Learning Delegation Mobilization Plan

All children upon entering kindergarten have age appropriate skills to be successful in school.

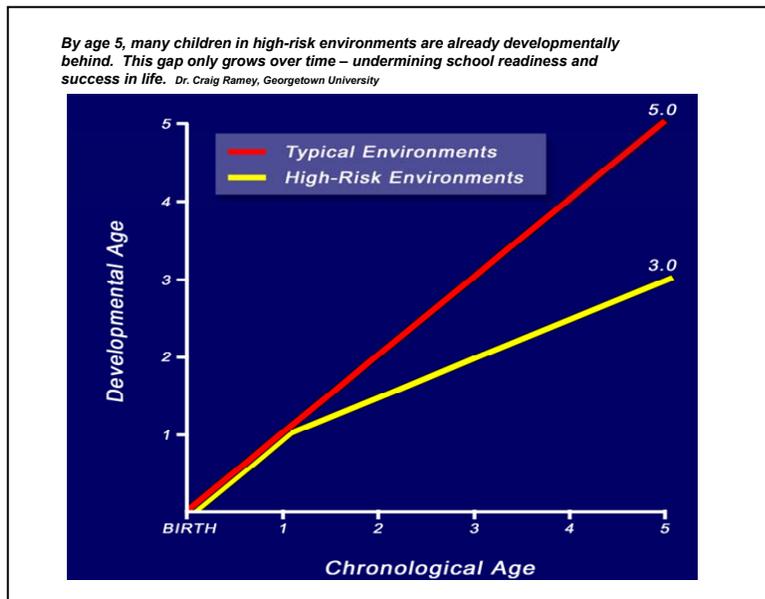
I. Problem Statement

As the population of Dane County has grown and changed so have our children. School Districts across Dane County are experiencing an increasing diversity among entering kindergartners related to the skills they have to begin the learning process. In the Madison Metropolitan School District, approximately 42% of the entering kindergartners do not have the basic skills needed to



start the learning process. Because playing “catch-up” in the early years of school is difficult, children who come to school without the necessary skills are more likely to experience academic failure, drop out of school, and become economically dependent on society.

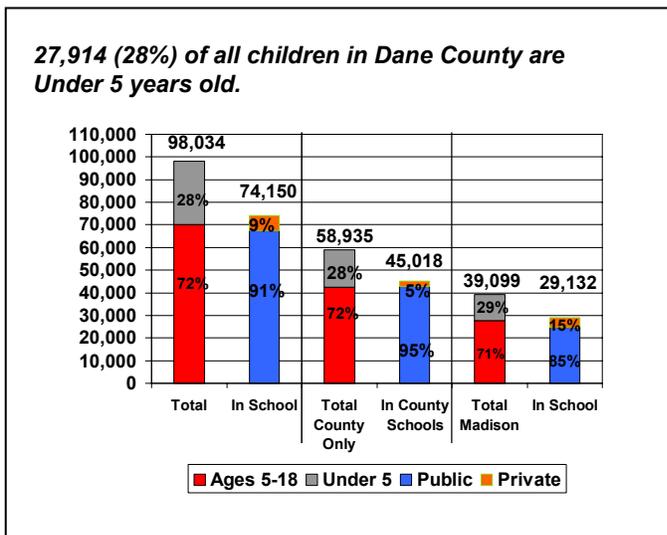
We know that the most formative years in a child’s development are those from birth to five. It is during this timeframe that the brain is developing connections that enable a child to learn and develop skills they will need throughout life. The caregivers of young children- be they family, friends, neighbors or formal childcare providers- have the opportunity to be the first teacher(s) and set in motion brain connections that will aid in their development and prepare them for learning. It is crucial to provide support and information to caregivers on how they can best nurture a young child’s development and prepare them for success in school. “The quality of young children’s environment and social experience has a decisive, long-lasting impact on their well-being and ability to learn” (p. 4).¹



¹ Carnegie Corporation of New York. (August 1994). *Starting points: Meeting the needs of our youngest children, executive summary*. New York, NY: Carnegie Task Force on Meeting the Needs of Young Children.

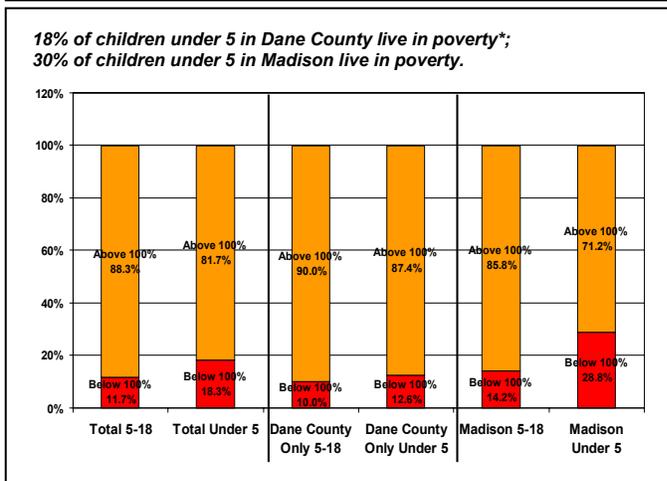
Why this matters

Early experiences don't just affect performance in Kindergarten. They are linked to future outcomes, even into adulthood. For those children who grow up in a supportive environment, with an emphasis on cognitive, emotional, social, physical, and mental growth, a future consisting of success in school and positive contributions to society is likely. Those children who do not receive this support, however, are more likely to drop out of school, collect welfare, and participate in criminal acts.²



All children need high-quality early childhood experiences to ensure a successful start in school. Parents are recognized as their child's first teachers and every parent wants to help their children master skills to be successful in school. However, research tells us that children from low income homes are more likely to come to school without these basic skills.³

Census data tells us that there are 27,914 children under the age of five in Dane County. Of these children, 5,024 (18%) are living in poverty- based on 100% of the Federal Poverty Guidelines.⁴ According to Community Coordinated Child Care, Dane



County children living in poverty are less likely to participate in accredited high-quality child care. Of the 5,000+ children living in poverty, only 3,309 children reportedly attend some type of child care. Only 20% of these children are participating in accredited child care, preschools or Headstart programs⁵. As a result, there are approximately 1,700 Dane County children under the age of 5 that are living in poverty and being cared for by their families, friends or neighbors.

A study by Hart & Risley (1995) looked at children's exposure to words. They found that children from low income families enter kindergarten with a significant vocabulary disadvantage as compared with their peers. In fact, by five years of age, children from professional families are estimated to hear 32 million more words than children living in poverty. It is crucial that children hear a variety of words when they are young because it makes recognizing words easier when learning to read. Additionally, this vocabulary gap doesn't just affect a child's performance in

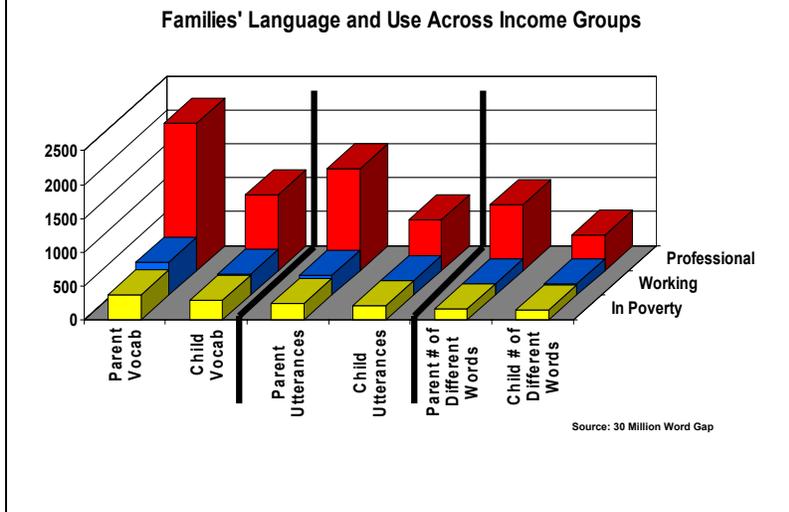
² Rolnick, A.J., & Grunewald, R. (2007, January 4). Early intervention on a large scale. *Education Weekly*, 26(17), 32, 34-36.

³ Robinson, D. (N.D.). *Preschool and Pre-K*. Retrieved September, 2007, from Giving Matters. Web site: <http://research.givingmatters.com/papers?id=33686>

⁴ *Federal poverty guidelines in 2007 for a family of four are \$20,650.*

⁵ *Community Coordinated Child Care, Dane County*

Vocabulary gap huge between different social economic statuses.



Kindergarten. Hart & Risley (1995) found that early vocabulary skills are a strong predictor of third grade reading scores. A subgroup from this study allowed their children to be measured on school performance skills in third grade. The results showed a strong correlation between children's scores- on the Peabody Picture Vocabulary Test-Revised and on the Test of Language Development-2: Intermediate subtests- at age 9-10 with their scores- vocabulary growth rate and use- at age 3.⁶

II. National Research

A child's first teachers are found within the family— parents, grandparents and other family members who may care for the child during the day. Research shows that when young children and adults interact through talking, singing, and rhyming together they stimulate language development which creates the foundation for learning to read.⁶ Community has a role to play in offering an environment that supports early learning and gives parents and caregivers the information they need to provide the appropriate stimulating environment for their children. Experts say that the choices families make regarding literacy are more important than the family's income or the caregiver's educational backgrounds in predicting future success⁷. Positive and responsive adult-child interactions are "associated with stronger cognitive skills in young children and enhanced social competence and work skills later in school – illustrating the connection between social/emotional development and intellectual growth" (p. 2).⁸

A. Importance of Educational Play

We cannot overemphasize the importance of play for young children as a tool for healthy development and learning. In a comprehensive review of numerous studies, Smilansky and Shefatya (1990) found strong evidence that play contributes to advances in a variety of skills including verbalization, vocabulary, imagination, concentration, problem-solving strategies, cooperation, and empathy.⁹ According to Bodrova and Leong (2003), "Thoughtfully supported play is essential for young children's learning and development" (p. 53).¹⁰ Play is so important to child development that it has been recognized by the United Nations High Commission for Human

⁶ Hart, B. & Risley, T.R. (1995). *Meaningful differences in the everyday experiences of young American children*. Baltimore, MD: Brookes Publishing.

⁷ Ballen, J., & Moles, O. (1994, September). *Strong families, strong schools: Building community partnerships for learning*. Washington, DC: U.S. Department of Education. (ERIC No. ED 371909)

⁸ National Scientific Council on the Developing Child. (2004). Young children develop in an environment of relationships. Working Paper No.1. Retrieved September, 2007 from www.developingchild.net/pubs/wp/environment_of_relationships.pdf

⁹ Smilansky, S., & Shefatya, L. (1990). *Facilitating play: A medium for promoting cognitive, socio-emotional, and academic development in young children*. Gaithersburg, MD: Psychological and Educational Publications

¹⁰ Bodrova, E., & Leong, D.J. (April 2003). The importance of being playful. *Educational Leadership*, 60(7), 50-53.

Rights as one of several rights of every child.¹¹ Play allows children to use their creativity while facilitating healthy brain development.¹² It is through play that children explore the world around them. They learn how to work in groups, share, negotiate, resolve conflicts and advocate for themselves. When caregivers join with their children in play, they are given a unique opportunity to see the world through their child’s eyes as the child navigates a world perfectly created just to fit his or her needs.¹³ (See Appendix A for information on the benefits of play and how to make time for play. Appendix B provides tips for caregivers on engaging in play.)

B. Economic and Social Impact of a Focus on Early Childhood

There is also an economic incentive to paying attention to the stimulation and development of our young children. According to Barbara Wolfe and Nathan Tefft¹⁴, “Childhood interventions have the potential to significantly affect economic growth in positive ways. Because childhood interventions, especially those for children 5 and younger, condition all future gains in human and health capital, they are likely to yield a high return in terms of economic benefits” (p. 1). A 40 year longitudinal study that followed infants into adulthood shows that investing \$1 in high-quality early developmental practices saves \$17 down the road as measured by a decrease in crime, a decrease in teen pregnancies and an increase in education and earning levels¹⁵. Thus, the consequences of not ensuring that all children have quality experiences during the first five years of life will affect all of society.

Investing in early childhood has huge investment returns.

- Investing \$1 in early childhood development brings a return on investment of \$17 – with tangible results measured in lower crime, fewer single parents, higher individual earnings and education levels.
- For every State \$1 invested in four-year old kindergarten, \$.68 is returned in savings to the education system.

This 68% cost savings over the remaining K-12 years (est. of \$140+ million) is due to reductions in special education, reductions in grade retention and improvements in learning productivity.

Data Source: Art Rolnick, Director of Research for the Federal Reserve Bank of Minneapolis

Data source: An Economic Analysis of Four-Year-Old Kindergarten in WI

C. National Research Supporting Born Learning Strategies

1. Importance of Developmental Screenings and Early Assessment

As research on brain development has become more sophisticated we have learned that the human brain grows and changes at an astonishingly rapid rate during the first few years of life. The brain’s unusual “plasticity” seems to make young children unusually responsive to environmental influences. Psychologists often refer to these early years as a sensitive period for the child’s development of several important cognitive and other skills.

“The young child’s growing skills in communication, language, and learning are vitally important in their own right. No one disputes that success and persistence in school are major contributors to constructive life pathways. Children who do not complete high school, for example, are

¹¹ Office of the United Nations High Commissioner for Human Rights. Convention on the Rights of the Child. General Assembly Resolution 44/25 of 20 November 1989.

¹² Shonkoff, J.P., & Phillips, D.A. (Eds). (2000). *From neurons to neighborhoods: The science of early childhood development*. Washington, DC: National Academy Press.

¹³ Ginsburg, K.R. & The Committee on Communications and the Committee on Psychosocial Aspects of Child and Family Health. (2007). The importance of play in promoting healthy child development and maintaining strong parent-child bonds. *Pediatrics*, 119(1),182-191.

¹⁴ Wolfe, B., & Tefft, N. (Fall 2006). Childhood interventions that may lead to increased economic growth. *La Follette Policy Report*, 16(2), 1-2, 8-14.

¹⁵ Schweinhart, L.J. (2004). *The high/scope Perry Preschool study through age 40: Summary, conclusions, and frequently asked questions* (Monographs of the High/Scope Educational research Foundation). Ypsilanti, MI: High/Scope Press.

significantly more likely as adults to display a host of behaviors that are destructive to themselves and others, including substance abuse, unemployment, low income, welfare dependency, delinquency and crime. One of the most significant insights about educational attainment in recent years is that educational outcomes in adolescence and even beyond can be traced back to academic skills at school entry. Academic skills at school entry can, in turn, be traced to capabilities seen during the preschool years and the experiences in and out of the home that foster their development. Children's cognitive skills before they enter kindergarten show strong associations with achievement in elementary and high school and during early adulthood" (pp.124-125).¹⁶

Because the early years are so important in determining a child's future success, the use of early identification procedures and intervention services are crucial. "Timely and periodic assessment of young children's development makes it possible to identify and treat developmental disabilities at the earliest possible point of manifestation and to prevent loss of developmental potential" (p. 1927).¹⁷ A 1998 national survey of parents with young children concluded that most parents view the pediatric health care system as meeting the physical health needs of their young children. However, this study also found that parents want more information and support on child-rearing concerns. Pediatric clinicians often fail to discuss nonmedical questions with families for a variety of reasons. Therefore, adding interventions that address these needs can positively affect parental behavior.¹⁸

One such intervention, the Ages and Stages (ASQ) Developmental Questionnaire, was created at the Early Intervention Program Center on Human Development at the University of Oregon. Although it takes only 15 minutes to complete, its impact is long-lasting. One study reported that after using the questionnaire in a pediatric setting, 62 more referrals were made (238% increase) and 39 more children were monitored or placed in intervention services (191% increase).¹⁹ In response to these results, co-author Dr. Kevin Marks made the following statement: "We found that many doctors were simply missing many kids and not because they were taking a 'wait and see' approach on possible delays. We, as doctors are under identifying the number of children who can benefit from intervention. The paradox is that the children with mild delays are the same ones who oftentimes respond well to early intervention" (p. 2).²⁰

The concept of incorporating developmental screenings into physician visits and other service settings has started to take hold in several communities across the country. For example, the United Way of Greater Chattanooga's Project Ready for Schools includes a strategy of making the ASQ available at no cost to parents of all preschoolers. The State of Connecticut's Help Me Grow Initiative provides universal access to ASQ through child care centers, family resource centers and in home visiting programs. The Connecticut initiative uses 2-1-1 (a local information and referral program) as a single point of entry for system for all families with young children. A trained telephone care coordinator – from Help Me Grow –assists the caller with obtaining child development information and finding appropriate services or resources. In both communities partnerships with pediatricians have been established around assessment. In Connecticut pediatric settings participate in training that includes solicitation of parents' concerns about their

¹⁶ Shonkoff, J.P., & Phillips, D.A. (Eds). (2000). *From neurons to neighborhoods: The science of early childhood development*. Washington, DC: National Academy Press..

¹⁷ Halfon, N., Regalado, M., Sareen, H., Inkelas, M., Reuland, C.H.P., Glascoe, F.P., & Olson, L.M. (2004). Assessing development in the pediatric office. *Pediatrics*, 113(6), 1926-1933.

¹⁸ Young, K.T., Davis, K., Schoen, C., & Parker, S. (March 1998). Listening to parents: A national survey of parents with young children. *Pediatrics & Adolescent Medicine*, 152, 255-262.

¹⁹ Hix-Small, H., Marks, K., Squires, J., & Nickel, R. (August 2007). Impact of implementing developmental screening at 12 and 24 months in a pediatric practice. *Pediatrics*, 120(2), 381-389.

²⁰ Medical News Today. (September 2007). *Parental Surveys Boost Diagnosis Abilities of Doctors*. Retrieved September 26, 2007, from Medical News Today. Web Site: www.medicalnewstoday.com/articles/82210.php.

child's development as a regular part of well-child visits. This training also helps child health professionals make service referrals on behalf of children through the Help Me Grow program.

2. Importance of Quality Early Childhood Experiences

a. Family, Friend and Neighbor Caregivers of Children²¹

"Family, friend and neighbor care (FFN) ... is a broad term that refers to child care by extended family members, nannies, friends, neighbors and other unrelated adults. Many parents, especially low-wage earning or part-time employees, also play the dual roles of parent and caregiver – when they are not at work – by caring for their own and coworkers' or family members' children" (p. 1).²¹

In the United States, most children – including those from low-income homes and children under the age of 5 – spend the majority of their time under the care of FFN caregivers "in settings that are frequently not subject to external standards or requirements" (p. 1).²¹ Many of these caregivers are relatives who have little contact with public service systems and who are not eligible for financial assistance.

The following are recommendations to improve existing support programs for FFN caregivers- from a study conducted by Sparking Connections²¹:

- Relationships are central to all aspects of FFN care. Programs serving this group should focus on building and facilitating the relationships necessary to creating, promoting and effectively providing a range of learning opportunities for FFN caregivers and the children they care for.
- FFN care is more akin to family support than regulated child care. Programs, services and systems serving FFN caregivers should use family support principles to guide their work.
- Effective FFN work results in social and learning networks (groups that enable FFN caregivers to meet, share ideas and resources and learn from each other in social settings) that strengthen families and communities. Community organizations should create places, spaces and time for facilitation of social learning networks among caregivers paying attention to the interests and needs identified by the caregivers.

An example of a program operating at scale in this area is Tutu and Me out of Hawaii. Tutu and Me sets up parent/caregiver play-and-learn groups at a community site a couple of morning each week. About 500 families are served through this collaboration each year. At a cost of approximately \$2,000 per child per year, Tutu and Me supports caregivers by providing information, support and skill building so that the caregivers can help the children they are caring for be ready for kindergarten. Information provided includes examples of activities using simple materials that are found in the home as learning tools as well as printed information for the participant to replicate the experience in the home environment. The Tutu and Me program is free and is conducted in public places. The program also provides entry points into needed services for families who otherwise might not know where or how to get help. Finally, the program is a point of identification for children with special learning needs.

Further research should be conducted on the effects of caregiver's social networks, child and caregiver well being, school readiness, community stability, and family and community economic success. Although we know that the mutual support offered by well-facilitated social networks helps families and communities, there is a lack of data linking social networks to specific child, family and community outcomes. Efforts to replicate this model should have evaluation components established from the beginning for both caregiver and child outcomes.

²¹ Sazer O'Donnell, N., Cochran, M., Lekies, K., Diehl, D., Ashley, N., & Steinke, P. (September, 2006). *Sparking connections, phase II; Part 1: Lessons learned and recommendations*. New York, NY: Families and Work Institute. Available online at <http://familiesandwork.org/site/research/reports/main.html>

Dane County currently has three versions of this model in action, called Play and Learn Programs. An evaluation component has been developed for these programs. The Born Learning Mobile Play and Learn Initiative will expand the reach of Play and Learn by adding 5 to 7 sites in 2008.

b. Quality Child Care Programs

The Carolina Abecedarian Project, the High/Scope Perry Preschool Study and the Title 1 Chicago Child-Parent Center Program studies all found that children who attended high quality child care programs had better outcomes than those that did not. “When children who are at risk of school failure participate in intensive and high-quality programs, there are sizeable benefits in terms of higher scores on tests of reading and mathematics, less grade retention, fewer placements in special education, higher educational attainment, reductions in crime and other indicators of life success” (p. 4).²² And furthermore, the future benefits of those programs far outweigh the costs. For example, in the Chicago Child-Parent Center Program study, by enrolling 1,000 children in a high-quality preschool program, there was a \$26 million total return to the public (as measured by a reduction in costs related to welfare, incarceration, etc.). Since the program’s conception in 1998, approximately 100,000 children have been served. This translates into the public saving as much as \$2.6 billion. These are savings in school remedial services, increased tax revenues and averted crime victim costs²³.

The reality is that the cost of child care averages between \$183 and \$274 per week in Dane County, and is increasingly difficult for families to afford. This means a family’s annual cost for one child in child care would be between \$9500 and \$14200, over 50% more than a year of undergraduate education at the University of Wisconsin. If all 28,000 children needed child care, the cost of that care would be between \$266 and \$397 million.

Young children who participate in high-quality, accredited early childhood care and education programs benefit from the inclusion of developmentally appropriate early literacy and math activities in their daily activities. Early childhood caregivers and educators also provide families with information and suggestions for helping their children be ready for kindergarten. Launching Into Literacy and Math is a Dane County Collaboration that brings over 300 early childhood caregivers and educators together for three professional development conferences each year. During these three day long conferences, caregivers and educators learn about current research as well as best early literacy and math practices that can be incorporated into their curriculums. Providers who attend the conferences report intentionally including more developmentally appropriate early literacy and math activities throughout their day.

3. Importance of Family

A recent study done by the National Institute of Health²⁴ reveals that family characteristics have more influence on a child’s development, through age four and a half, than does a child’s experience in child care. Major findings of the study include:

- Children who spent more time in high-quality child care centers developed slightly better language and social skills and demonstrated better pre-academic skills involving letters and numbers, but were also more likely to exhibit problem behaviors when first entering school as compared with children who spent less time in formal child care settings.

²² Galinsky, E. (February 2006). *The economic benefits of high-quality early childhood programs: What makes the difference?* New York, NY: Families and Work Institute.

²³ Reynolds, A.J., Temple, J.A., Robertson, D.L., & Mann, E.A. (June 2001). *Age 21 cost-benefit analysis of the Title I Chicago child-parent center program: Executive Summary*. Available online at <http://www.waisman.wisc.edu/cls/cbaexecsum4.html>.

²⁴ NICHD Early Child Care Research Network. (2006). *The NICHD study of early child care and youth development: Findings for children up to age 4 ½ years* (NIH Publication No. 05-4318). U.S. Department of Health and Human Services, National Institutes of Health.

- Parenting behaviors and family dynamics were two to three times more strongly linked to child development than was child care during the preschool years. For example, children showed more cognitive, language and social competence as well as more harmonious relationships with parents when the parents had more formal education, had higher incomes, provided home environments that were emotionally supportive and cognitively enriched, and when mothers experience little psychological distress.
- “One of the most important and consistent predictors of child cognitive and social development was the quality of the mother-child interactions. The more sensitive, responsible, attentive, and cognitively stimulating the mother was during observed interactions, the better the children’s outcomes” (p. 23).

Other research confirms the importance of the home environment. Young children who are in the process of establishing trust with adults require a safe and stable home as well as caring, permanent relationships. Reading to and conversing with young children on a regular basis helps them develop the early literacy skills necessary to become good readers and writers, and successful lifelong learners. For example, children from homes with literacy poor environments arrive at school with vocabularies of 800 -1000 words vs. 8,000 – 10,000 words for children from more literacy- affluent homes.²⁵ Research has also shown that children from middle-income families have been read-to for approximately 1,000 hours by the time they start kindergarten; children from low-income families only log 25 hours.²⁶ Therefore, the importance a family places on literacy can have a huge impact on a child’s success in kindergarten.

a. Home Visitation

Home visitation is a strategy that brings information, medical support, social emotional support and modeling behavior to caregivers of young children in their homes. In this way, trained home visiting educators can observe family interactions in a natural environment. This strategy has been accepted as a strategy for preventing child abuse and promoting healthy relationships between the baby and (primarily) the mother. David Olds, at the University of Colorado Health Sciences Center, has conducted high quality research in this area for over 20 years. He has found positive short-term and long-term outcomes of home visitation programs. The mothers in his study were primarily first-time mothers. The research found that home visitations led to decreased rates of child maltreatment, juvenile delinquency and maternal criminality in addition to increased economic self-sufficiency and social-emotional development.²⁷ Home visitation programs focus on parent/child interactions, providing relevant information in an environment that is comfortable and secure for the parent. Home visiting programs vary across the country from universal programs- providing services to all parents giving birth- to targeted programs that focus on first time and teen parents.

Developing a home visitation system to support new parents and their young children emerged, in part, from the work of the U.S. Advisory Board on Child Abuse and Neglect in the early 1990s. Drawing on the experiences of western democracies and the State of Hawaii in taking home visitation “to scale,” as well as the results from a David Olds study, the U.S. Advisory Board concluded that “no other single intervention has the promise that home visitation has.”²⁸ Several other compelling assessments of home visitation efforts found significant gains in parent-child attachments, access to preventive medical care, parental capacity and functioning, and early

²⁵ Hart, B. & Risley, T.R. (1995). *Meaningful differences in the everyday experiences of young American children*. Baltimore, MD: Brookes Publishing.

²⁶ Adams, M. (1990). *Beginning to read: Thinking and learning about print*. Cambridge, MA: MIT Press.

²⁷ Colorado Department of Public Health and Environment. (October 1996). *Child abuse and neglect: An introductory manual for professionals and paraprofessionals*. Denver, CO: Colorado Children’s Trust Fund.

²⁸ U.S. Advisory Board on Child Abuse and Neglect. (1991). *Creating caring communities: Blueprint for an effective federal policy on child abuse and neglect*. Washington, DC: U.S. Government Printing Office.

identification of developmental delays.²⁹ As beneficial as it is, home visitation is not the ultimate solution for preventing child abuse, improving a child's developmental path, or establishing a strong and nurturing parent-child relationship. It should be done in partnership with other wraparound services. However, empirical evidence generated so far does support the efficacy of the model and its growing capacity to achieve its stated objectives with an increasing proportion of new parents.³⁰

b. Parenting the First Years Newsletter

University of Wisconsin-Extension has created a cost-effective parenting program that has been very successful. It consists of a series of newsletters entitled: *Preparing to Parent, Parenting the First Years and Parenting the Second and Third Years*. The newsletters, which are written at a 5th grade level, are delivered to parents based on the ages of their children. Research shows that parents change both their beliefs and actions in raising their children as a result of reading this newsletter. For example, parents who receive *Parenting the First Year* report spanking or slapping their babies significantly less often than comparable parents who did not receive the newsletter. In Dane County the newsletters are distributed when parents give birth in one of two select community's hospitals. This distribution system does not account for parents with young children who move into our community or families that move with no forwarding address. Expanding the distribution of the newsletter, which is published in English and Spanish, as well incorporating the newsletter into home visitations are two ways to increase the information parents are receiving about children's development.

4. Importance of Community Awareness

Community awareness is an opportunity to educate the broad community about the impact of early experiences on the development of our children and provide information about opportunities to act on the information. General public service announcement campaigns (PSAs) have been found to be effective. For example, we all recognize the "Friends Don't Let Friends Drive Drunk" PSAs. As a result of this campaign 68% of Americans report personally acting to prevent someone from driving drunk. Additionally, it is the most recognized anti-drinking and driving slogan in America. The seat belt campaign has resulted in an increase in seat belt use from 14% to 79% since 1982, saving more than 85,000 lives. Research conducted by the National Cancer Institute indicates that PSAs are more effective than other communications techniques such as pamphlets, POP displays, editorial articles, etc. TV PSAs generated over 55,000 calls to their toll-free hotline, twice as many as all other outreach efforts combined.³¹

United Way of America has partnered with the Ad Council and CIVITAS to develop a media campaign as well as materials emphasizing the importance of the early years that have been made available for local United Way use. This already developed campaign, along with local input, will enable us to get our public awareness campaign started quickly.

United Way of Greater Chattanooga's Project Ready for School community awareness piece was a grass roots effort that targeted all caregivers, emphasizing that reading, singing, and playing are important. Supports were provided to parents through the creation of "The Parents' Place," a one-stop shop where parents could get information and resources. Community awareness of the importance of the early years was provided by the Born Learning public awareness campaign referenced earlier.

²⁹ Olds, D.L., Chamberlain, R., Henderson, C.L., & Tatelbaum, R. (1986). Preventing child abuse and neglect: A randomized trial of nurse home visitation, *Pediatrics*, 78(1), 65-78.

³⁰ Daro, D, (2006). *Home visitation: Assessing progress, managing expectations*. Chicago: Chapin Hall Center for Children. (ERIC No. ED 496-752)

³¹ Goodwill, B. (N.D.). Effectiveness in Public Service Campaigns. *Broadcasting Café*. Retrieved from www.psaresearch.com.

III. Local Data

a. Mapping the Community Resources:

Research has shown that both physical health and well-being and early care and education experiences impact children's readiness for school. Therefore, it is critical that all children have access to high quality, affordable services in the community. Appendices C1 and C2 highlight a preliminary list of Dane County programs and services available to children ages 0-5 and their families. Capacity and cultural competency are issues that need to be addressed so that all families that need services are able to access them.

b. Community Engagement

United Way of Dane County has had a long history of engaging the community around the issues of early childhood: The community has consistently guided us in the direction of focusing on parenting and increasing literacy experiences for young children. What follows is a history of our public engagement efforts and the results.

1. 1990 – 1998 – Start Smart Dane County

1990 – Community leaders convened

1991 – Forty public forums held throughout community

Over 400 people shared insights and issues

1995 – Survey of 439 employers to develop "Creating a Family-Friendly Workplace Booklet"

Impact – Home visitation increased; family resource center started, City of Madison accreditation standards used throughout county, Take 5 literacy campaign launched.

2. 2002 – 2003 Birth to Four Series

2002 – Community Event to celebrate WSJ 150th birthday – Jack Schonkoff, nationally recognized expert in early childhood and panel of local experts presented to audience of 250+, audience surveyed and participated during event in suggesting strategies and prioritizing them

2003 – Series of four public forums held in challenged areas, with sessions led by University and local experts and discussions with attendees afterwards; attended by over 200 community members

Community Leaders agreed to assume leadership in one of four primary areas related to their organizations.

United Way of Dane County – Time with loving parents and guardians;

City of Madison – Consistent, high quality, affordable child care;

Madison Metropolitan School District – Early enrichment opportunities and

Dane County – Safe places to live, play and learn.

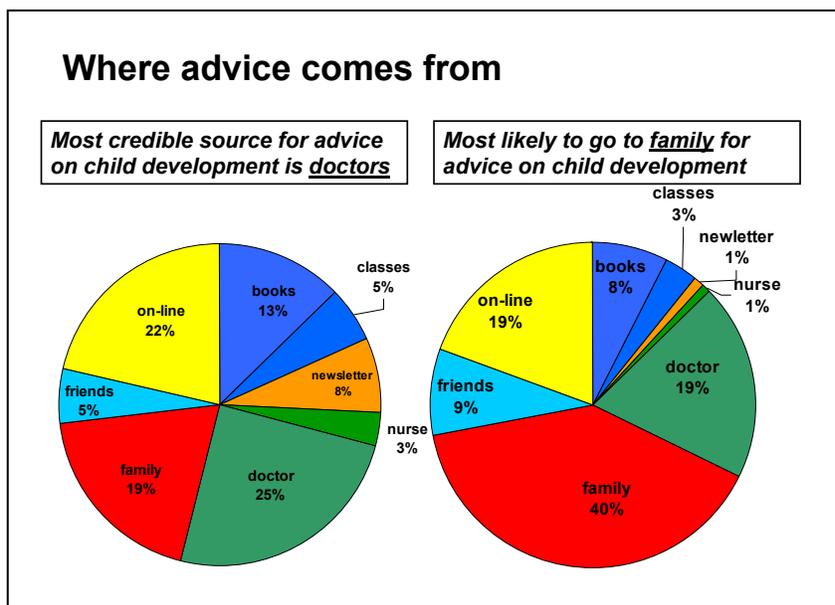
Impact – Increase in home visiting for first time parents; Preschools of Hope initiated

3. 2006 - Before embarking on the Born Learning Delegation work we asked the community what they felt the focus of United Way of Dane County should be in this area. We engaged 312 participants from 20 of the largest companies in Dane County and 209 United Way of Dane County key donors and child care providers with the following results:

Where United Way should focus efforts to improve children's readiness for kindergarten		
Strategy	Employees of 20 largest companies N=312	Key donors and child care providers N=209
Educating parents on children's age-appropriate language, social and emotional development.	41%	42%
One year of home visitation for first-time parents at risk for abusing/neglecting their child(ren).	31%	29%
Training and supporting child care providers in literacy and math techniques to help children gain the skills necessary to enter school.	28%	29%

Impact - The consistent message from these groups was that our focus should be on parents which became the charge for the Born Learning Delegation.

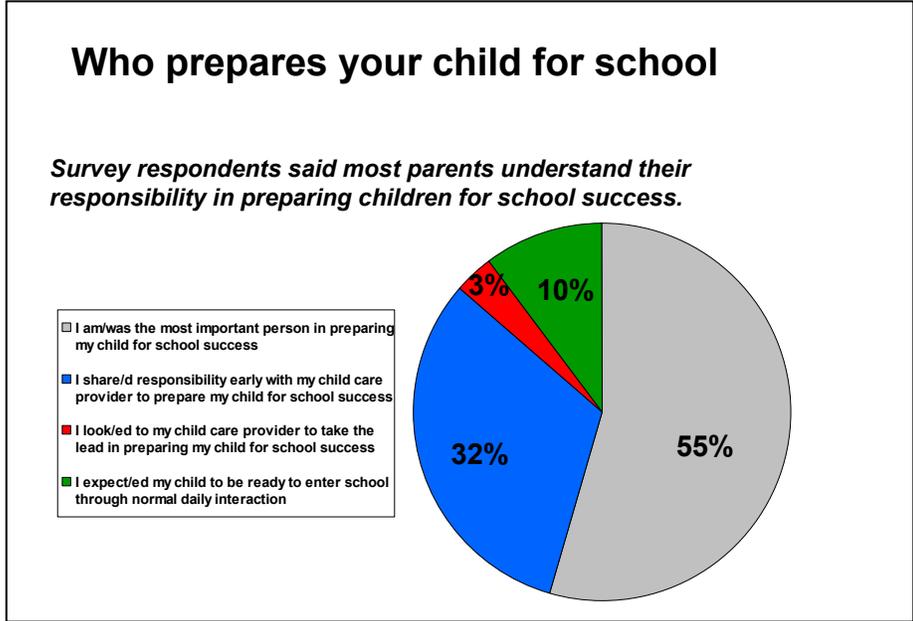
4. June 2006 – February 2007 – Immediately prior to the Born Learning Delegation, United Way of Dane County conducted surveys in businesses and community locations to learn about to whom families looked to for advice and information around child development and preparation for school success.



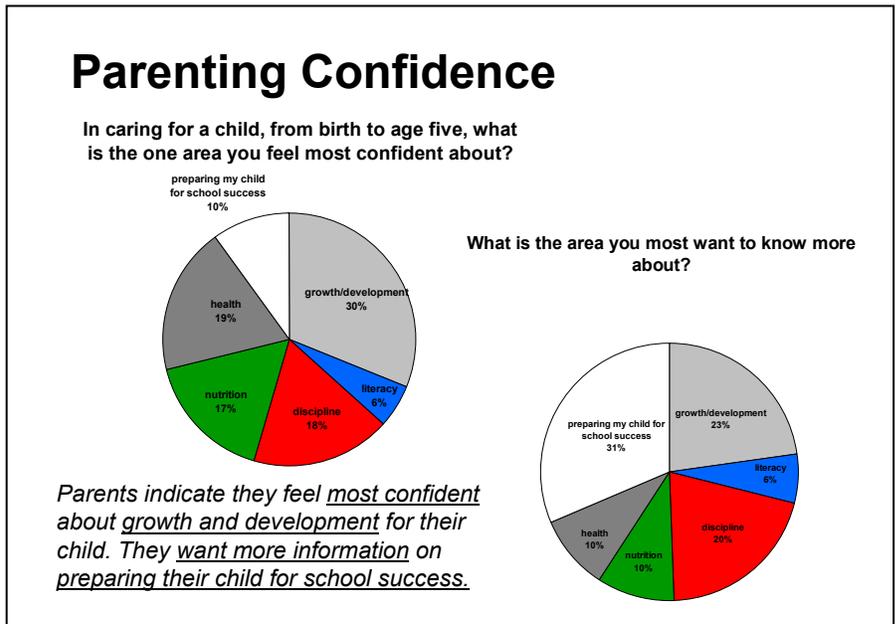
a. Where advice comes from:

The results indicated that respondents felt the most credible source on child development was physicians, yet they were most likely to go to family first for advice. This response tells us that we need to look at both family and medical professionals as information providers.

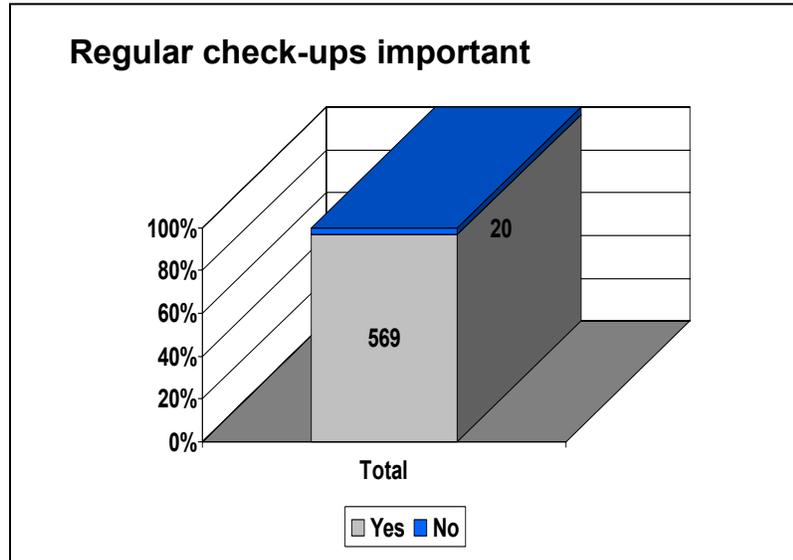
b. Who prepares your child for school: More than half of the respondents indicated that they, as parents, were responsible for preparing their child for school. The next highest response was a sharing of responsibility with their child care provider. This shows that providers of child care should be included as liaisons to parents as well as receiving additional information themselves as to how to help prepare a child for kindergarten.



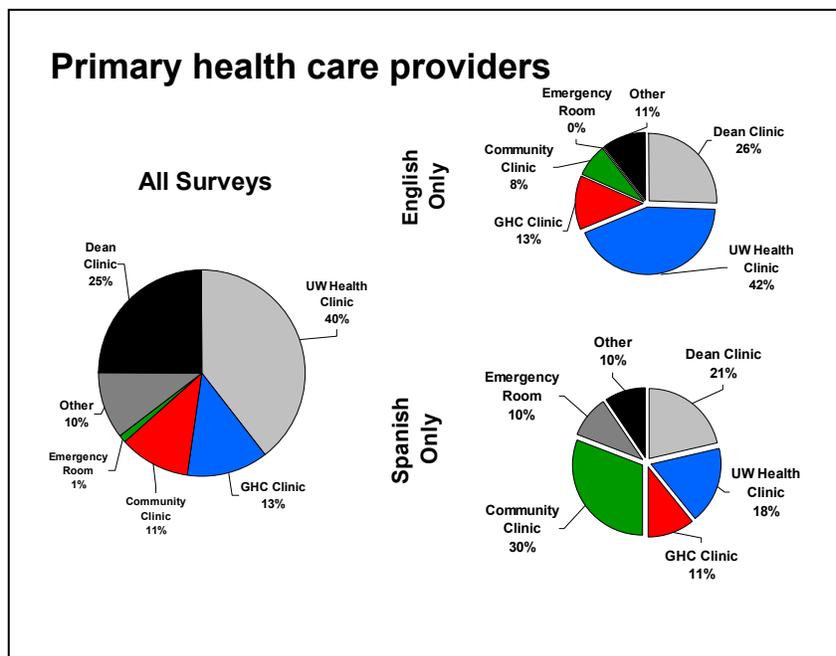
c. Parenting confidence: Parents indicated a certain degree of confidence when it came to appropriate growth and development for their child. They are interested in learning more about how to prepare their child for school success. This result indicates an interest in the developmental guidance that will be part of the Born Learning strategies.



5. August 2007 - United Way of Dane County conducted community surveys to test out the strategies that were being identified by the Born Learning Delegation. More than 600 surveys were completed in English and Spanish. The results provided confirmation for the direction the strategies are taking and provided insight into when the parents are most receptive to receiving information.

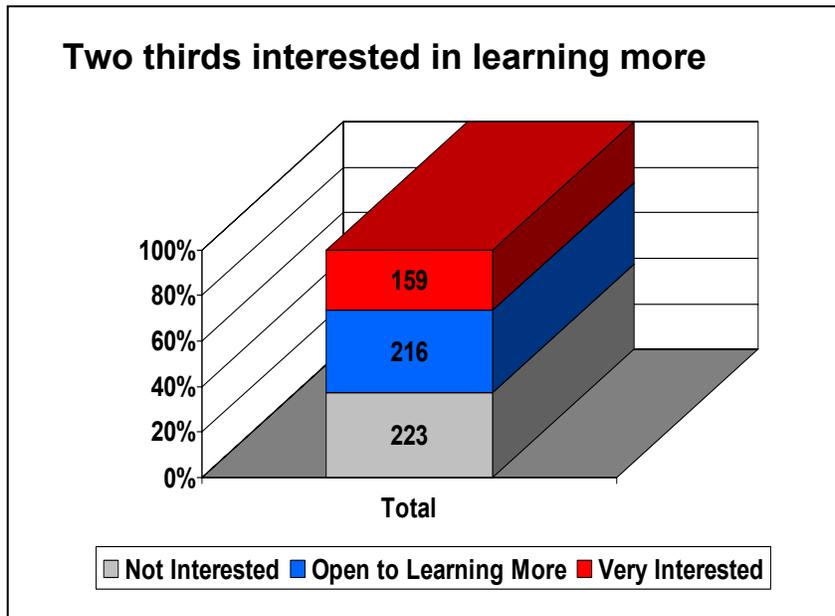
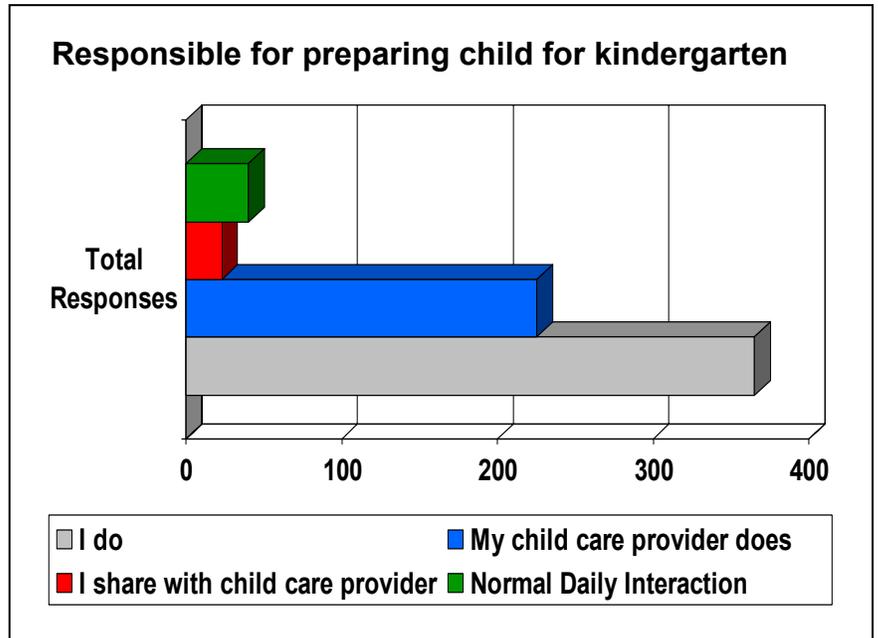


a. Regular check-ups important: Almost all of the respondents indicated that regular check-ups with a physician were important indicating assessments at check ups would be effective.



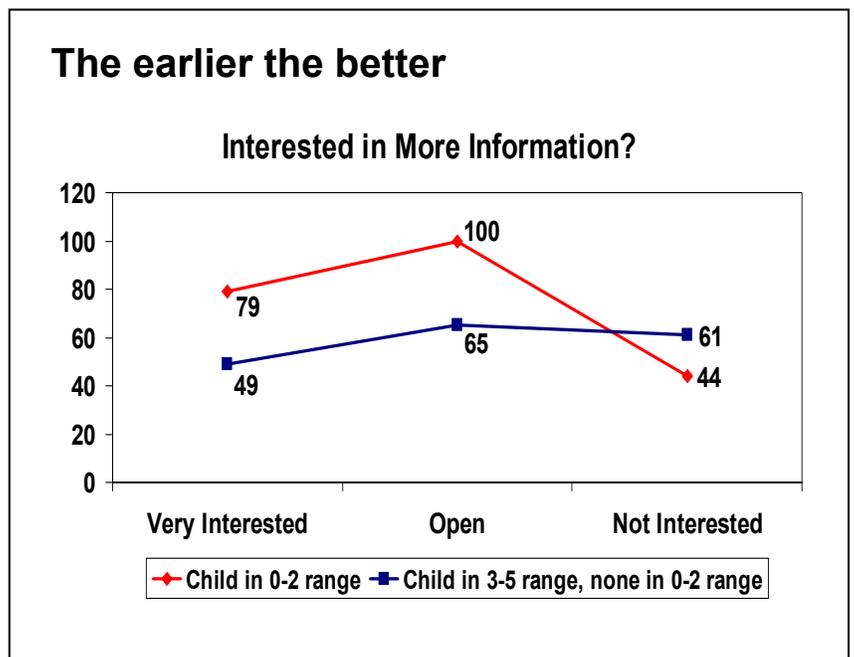
b. Primary health care providers: Respondents primary health care providers were Dean Health System, University of WI Health Clinic and Group Health. However, for the Latino families, Access Community Health Centers was noted as the primary provider for health care for their children. These are the systems that have initially indicated interest in participating in the common assessment.

c. Responsible for preparing child for kindergarten: Similar to the results in the survey conducted June of 2006 through February of 2007, those surveyed indicated that, for the most part, they are the primary person responsible for preparing their child for kindergarten. However, the next highest response indicated the child care provider was the one who was responsible for kindergarten readiness. This response confirms the importance of working with child care providers as linkages to parents and to provide the child care providers with literacy and math curriculum they can use in their settings.



d. Two thirds want to learn more: Two thirds of those surveyed indicated that they were either very interested or open to learning more about their child's development and how to prepare them for kindergarten. Approximately one-third were not interested in more information.

e. The earlier the better: Among those surveyed, the younger the child the more interested they were in receiving more information. Those with children between the ages of 0 – 2 were almost twice as likely to want more information as those with children in the 3 – 5 year range. This data suggests that providing information to parents should start as soon as possible.



IV. Hypothesis

By ensuring early assessment of all children at critical stages of their development prior to age five, we will be able to identify potential developmental delays at early enough stages to intervene and potentially avoid continued delay. If caregivers are provided information and support about what is appropriate development (birth to 5) and what they can do to encourage that development, we will increase the percentage of children entering kindergarten with the skills needed to be successful in school.

Goal: By 2013, 75% of the children entering kindergarten will have the necessary skills to be successful as measured by a community assessment tool (Ages & Stages).

V. Strategies and Resources

Goals	Strategies	Tactics
<p>1. All children are screened for at risk status, cognitive, social, and emotional development by 18 months and again at age three (at minimum) and provided with access to needed services.</p>	<p>Provide county-wide screening through family practice and pediatricians and ensure the three major clinics will accurately record physician's impressions of how well a child is growing in the Epic System</p>	<p>Partnership with local health providers to use common screening tool at a minimum at ages 18 months, 3 years and 5 years.</p>
		<p>Create opportunities for screenings to be provided elsewhere in the community through child care providers, non profit agencies, etc.</p>
		<p>Physicians/health care providers have special access to 2-1-1 for patients assessed needing services.</p>
<p>2. All children have access to quality early childhood experiences to encourage positive development</p>	<p>Provide information, resources and materials for early childhood development focusing on early literacy, early math and social-emotional development</p>	<p>Implement 5 – 7 Play and Learn sites annually. Mobile Play and Learn truck to establish new sites based on need and create community awareness around early childhood development.</p>
		<p>Continue support of Launching Into Literacy and Math collaboration to increase early childhood caregivers and educators' knowledge and implementation of developmentally appropriate early literacy and math teaching and learning strategies, as well as explore expansion of collaboration to serve up to 20% more providers than currently participating in workshops.</p>
		<p>Ensure support for professional development of Latino and Hmong child care providers.</p>
<p>3. All caregivers have access to resources to help them become successful as their child's first teachers</p>	<p>Increase access to a variety of culturally appropriate opportunities for caregivers of children under five to receive support, information, and materials to help them prepare their children for school</p>	<p>Expand home visitation through KinderReady to all school district areas using the Parents as Teachers Program and Welcome Baby Program. Explore the use of a volunteer model in rural locations.</p>
		<p>Continue support for increased distribution of Parenting the First Years newsletter in tandem with home visitation and health clinic visits.</p>
		<p>Develop United Way 2-1-1 as primary resource for families, caregivers, and professionals.</p>
<p>4. The Dane County community is aware of the importance of high quality early childhood experiences in assuring that all children have age appropriate skills upon entering kindergarten.</p>	<p>Awareness campaigns focused on: 1) providing caregivers of children under 5 with ways to interact with their children in play to promote learning as well as information stressing the importance of being their child's first teacher 2) increasing the public awareness of the importance of early childhood development, and 3) informing the business community of the economic impact of investing in early childhood.</p>	<p>Development of parenting information on UWDC website as a destination for information with links to other relevant websites.</p>
		<p>Develop annual campaign on a key aspect of early childhood development each year for the next six years.</p>

VI. Results, Measures and Timeframe

Goal/Strategy	Time frame--begins	Anticipated results
1. Provide county-wide screening through family practice and pediatricians and ensure the three major clinics will accurately record physician's impressions of how well a child is growing in the Epic System	Work with providers to agree to common tool – 1 st quarter 2008 Implementation of common screening by end of 2008. A minimum of one community wide screening in 2008 First data available in 2009	10% of children under 5 screened before the end of 2008.
2. Provide information, materials, and resources to families and childcare providers focusing on early literacy and math development	Develop 5 – 7 new Play and Learn sites by end of 2008, up to 42 sites by end of 2013.	Play and Learn sites available in 5 – 7 neighborhoods reaching between 200 and 300 children and caregivers by end of 2008. 42 sites reaching up to 900 children and caregivers by 2013.
3. Increase access to a variety of culturally appropriate opportunities for parents of children under five to receive support and skill building to help them prepare their children for school	Continue support of current services and work with community partners to develop expansion plans for 2009 through a design build in 2008.	By 2013 home visitation will be available for all first time parents assessed to be at risk by medical personnel.
4. Awareness campaigns focused on parents of children under 5 on the importance of their being their child's first teacher and ways to help children play and learn, general public to increase awareness of importance of early childhood development, and business community focused on economic impact of investing in early childhood.	Fully functional, interactive website for parents and caregivers by end of 2008. First awareness campaign launched in second quarter of 2008.	

Appendices:

- A. Importance of Play
- B. Ways to Play
- C. Mapping the Community Resources

Appendix A* Importance of Play

In today's busy world, opportunities for children to "just play" and be creative are becoming fewer and fewer. More and more children are spending time in front of televisions and computers, thus missing out on socialization experiences. Even the chances to play during school recesses are lessening, as several of these spaces are unsafe for children to roam around in.

This loss of play time may seem trivial, but research has shown that the benefits of play are monumental in the development of a child. Child's play has been shown to positively impact a child's physical development, academic growth, social and emotional well-being, and level of happiness.

- Make-believe play can foster creativity and problem-solving skills, laying the foundation for future academic success in a variety of subjects
- Outdoor play also provides children with a chance to learn about science as they obtain hands-on experience in the field
- Children learn to cooperate with others, empathize more, and utilize less aggression when they engage in social make-believe play
- Children who play more are happier as a child and are more likely to be happy as an adult
- Play involving physical activity, especially outdoors, helps to combat childhood obesity as well as improve a child's sensorimotor skills

Although child's play is on the decline, there are several things that can be done to restore it such as:

- decreasing the amount of time a child spends in front of a "screen"
- provide children with simple toys that spark imagination
- encouraging children to explore nature
- allowing children to fully immerse themselves in their play, without interruptions (often, children engage in their play as much as adults engage in their work)
- advocating for more play time in schools and child care facilities

By following these tips, caregivers can revitalize play in their own children's lives.

* Adapted from Alliance for Childhood, Importance of Play, Fact Sheet on Healthy Play

Appendix B* Ways to Play

As children age, they benefit from different kinds of play activities. Caregivers can adjust the activities that they participate in with their children to correspond with their children's developmental stage.

Tips for caregivers with children aged **0-18 months** include:

- responding to baby's sounds
- singing to and talking with baby
- playing "peek-a-boo," "pat-a-cake," and hiding games with baby
- naming objects around baby
- smiling at baby

Caregivers with children aged **18 months- 3 years** can engage them by:

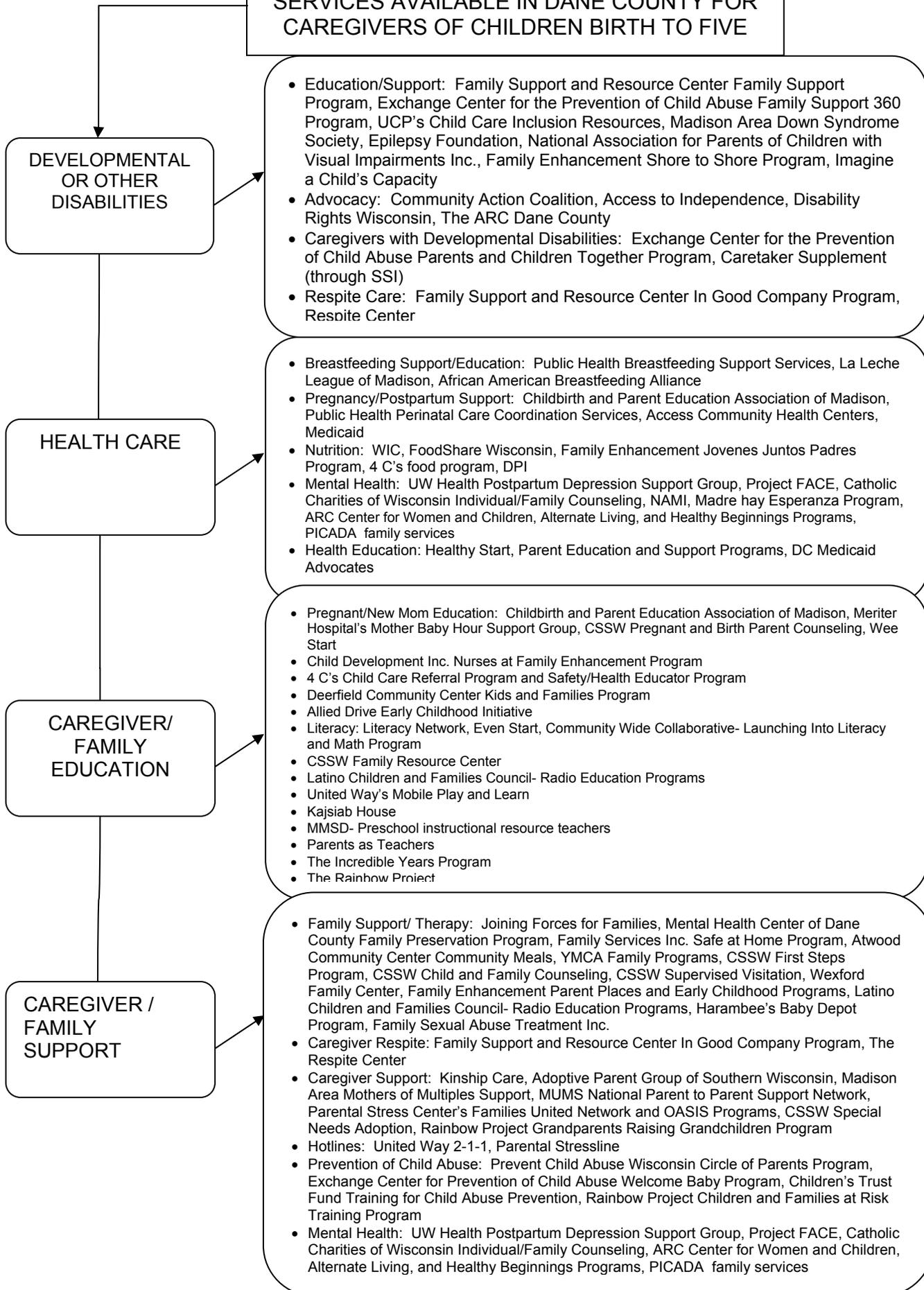
- playing follow-the-leader, tag, catch, and guessing games
- reversing caregiver-child roles
- telling and acting out stories
- taking outdoor field trips
- using pretend-play

For children aged **3-6 years**, caregivers can:

- play counting games, number games, matching games, and games of courage
- use hand puppets
- begin card and board games
- do gymnastics
- read to children

*Adapted from National Network for Child Care, Better Kid Care: Play is the Business of Kids, Better Kid Care Project, Pennsylvania State University Cooperative Extension

Mapping Community Resources
**SERVICES AVAILABLE IN DANE COUNTY FOR
 CAREGIVERS OF CHILDREN BIRTH TO FIVE**



Mapping Community Resources
**SERVICES AVAILABLE IN DANE COUNTY
FOR CHILDREN BIRTH TO FIVE**

- Birth to Three Programs: Birth to Three Connections, Bridges for Families
- Integrated Development Service
- Family Support and Resource Center Community Inclusion Program
- Wisconsin Early Autism Project
- Waisman Center: Communication Development Program, Communication Aids and Systems Clinic
- Madison Area Down Syndrome Society
- Epilepsy Foundation
- Advocacy: Community Action Coalition, Access to Independence, Disability Rights Wisconsin, The ARC Dane County
- MMSD Early Childhood Programming and Child Find Resource
- Imagine a Child's Capacity
- Head Start, Early Head Start, Even Start
- The Rainbow Project

- Health Screenings: Dane County Coalition for Neighborhood Child Health, Well-Child Screenings, Access Community Health Care, Medicaid, Badger Care
- Lead Screenings: Public Health Child Health Services
- Oral Care/ Fluoride Treatments: Well-Child Screenings, Access Community Health Care
- Nutrition: WIC
- Mental Health: Mental Health Center of Dance County, Access Community Health Care
- ICC's Clinic Services, Youth Crisis Screening, Children Come First
- Advocacy: DC Medicaid Advocates Group

- For Low-Income Children: Preschools of Hope, Early Head Start, Head Start, CSSW KinderReady program
- Through Community Centers: Atwood Community Center Preschool Program, East Madison Community Center Preschool Enrichment Program, Kennedy Heights Community Center Early Childhood Program, YMCA Preschools
- Child Enrichment: United Way's Mobile Play and Learn, Madison Children's Museum, YMCA Aquatics
- Artistic Programming: VSA Arts of Wisconsin, YMCA Arts
- Jewish Community: Hilde L Mosse Gan HaYeled Preschool
- African American Ethnic Academy Pre-School
- Four year old Kindergarten

- Support for Trauma/ Abuse: The Rainbow Project, Parental Stress Center's OASIS Program, DAIS Children of Violent Homes Counseling Program
- Wraparound: Community Partnerships
- Social Support: Deerfield Community Center's Kids and Families Program, Family Enhancement
- Allied Drive Early Childhood Initiative
- Parental Stress Center's Families United Network Program
- Mental Health: Mental Health Center of Dance County, Access Community Health Care

DEVELOPMENTAL
OR OTHER
DISABILITIES

HEALTH CARE

EARLY
CHILDHOOD CARE
AND EDUCATION

SUPPORT FOR
CHILD