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Wisconsin's Early Care and Education Landscape: Planning for a Coherent System





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Introduction

The purpose of this paper is to provide background information, analysis and options to inform planning of a comprehensive early care and education system for Wisconsin. Economists, business leaders and child development experts agree that smart early investments can help close the achievement gap and ensure that our children have the essential early learning experiences that will allow them to thrive in school and beyond. The Wisconsin Early Childhood Collaborating Partners have developed a proposed plan encompassing five areas:

- Early care and education
- Mental health and social-emotional development
- Parenting education
- Family support
- Health insurance and medical homes

The Wisconsin Early Childhood Collaborating Partners--a network of over 40 agencies, associations and programs—has been doing collaborative work since 1994. A merging of the Collaborating Partners efforts and work on Early Childhood Comprehensive Systems, funded by a federal grant, resulted in a comprehensive plan across a broad range of services. The system plan gives a high-level vision of a much more comprehensive system than is addressed in this paper, and could serve as a broad context for the more narrowly focused early care and education system envisioned here.

This paper acknowledges and endorses the work done by the Collaborating Partners in conceptualizing an early childhood system plan, including the guiding principles, the overall infrastructure envisioned, and coordinating across early childhood programs. The paper takes a much more detailed view of one portion of that plan: early care and education.

The paper is intended to stimulate analysis and discussion of how Wisconsin should use the existing infrastructure of programs and services, identify resources needed to address access to and quality of those programs, and build a comprehensive system of early care and education in the state. Young children should have nurturing care and early learning experiences no matter what the setting, at home or in an early childhood program. This paper explores how to assure that families have the support they need to achieve that goal.

Nationwide, several trends are converging that shine a spotlight on ECE:

- A growing understanding of the importance of the first five years, reinforced by research on early brain development
- The remarkable growth in the number of children with all available parents in the workforce, and the parallel surge of child care and preschool services to meet the demand
- Concerns about the gaps in school readiness, especially for children from disadvantaged backgrounds
- Extraordinary research on the economic benefits of investing early in a child's development

These trends are leading to efforts across the country to create coherent systems that provide support to our changing families and assure healthy development and early learning for our children.

The federal stimulus legislation, the American Recovery and Reinvestment Act, invested billions for Head Start, Early Head Start, child care, services to children with disabilities, and public education. The recent emergence of President Obama's Early Learning Challenge Fund proposal and his recommendations for

expansion of evidence-based home visiting programs could lead to major opportunities for Wisconsin, as the state begins to develop a comprehensive early care and education system.

Definition of "Early Care and Education" for This Paper

For purposes of this paper, the term "ECE" includes public pre-kindergarten programs, regulated child care centers and family child care programs, private preschool programs, Head Start, Early Head Start, services to children with disabilities (public school special education for children ages 3-5 and the Birth to 3 Intervention Program), and home visiting programs designed to enhance early learning.

While it is clear that many other important services have impacts on young children and their families, the intent of this paper is to focus on early care and education programs that provide nurturing care and early learning experiences to children in their first five years. We are also focusing on these particular services because of strong research evidence showing that high-quality child development and home visiting programs are effective in preparing children for school and life.

Four Scenarios: Families In Search of ECE Solutions

Bessie works full time to support her family (herself and her 3-year-old son Marcus). She is lucky that her job is a good one even in this economy, but her wages aren't enough to pay the high price of child care. She qualifies for Wisconsin Shares, so her son can go to a child care provider of her choosing. However, she does not have a car and her options are limited. Her neighborhood child care provider is not very experienced or qualified, and Marcus has developmental disabilities. She needs to work full-time, but she is worried about Marcus.

Jennifer enrolled in a local home visiting program after she heard about it from a neighbor. The Parents as Teachers program sends a home visitor once a week, and Jennifer works with her on the activities that she will do with her child for the rest of the week. Her son Kyle loves the books, which he gets to keep, and the two enjoy their learning time together. But Jennifer also works 30 hours a week and needs child care. She qualifies for Wisconsin Shares, and while she's at work, Kyle is cared for in a family child care home with a great early learning program.

Sam and his wife Marsha work full-time and their 4-year-old Annie goes to 4K each day at the same school as their 3rd grader Michael. The 4K program operates half day. In order for both children to get the benefits of a public school experience, Sam and Marsha need to arrange for Annie to go to a child care provider in the afternoon, and to work out a separate plan for Michael after school. They are having trouble finding a child care provider to take Annie only in the afternoon. In the summer, both children need full-day care and supervision, which Sam and Marsha are having trouble affording. They are planning on having a teen-aged neighbor care for them, but they are worried about the quality of that care.

Molly recently enrolled her 4-year-old daughter Reeva in Early Head Start. Molly is working full-time to support her family, and she wants to make sure that Reeva has loving care and opportunities to grow. Molly has come through a difficult divorce, and Reeva has been having emotional problems. Molly is thrilled to see Reeva adjust and thrive in the last month, and she's feeling more competent as a parent. Molly believes that the Early Head Start program is helping Reeva develop skills while also giving her valuable support as a parent.

Section I: Components of a Quality Early Care and Education System

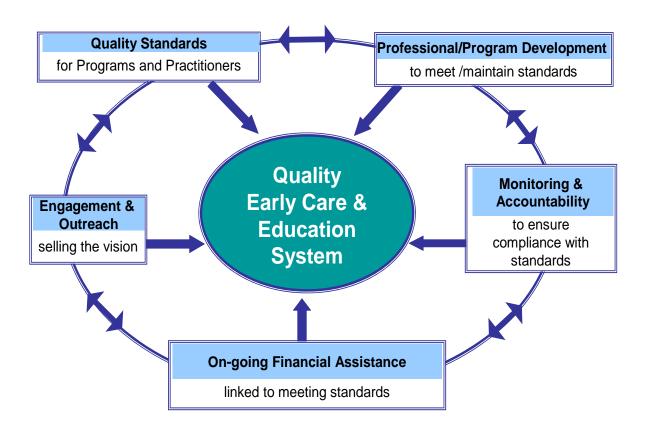
What are Essential Components in a Quality Early Care and Education System?

An effective system for early care and education begins with quality standards, but includes several components:

- Quality standards for effective programs and practitioners
- Professional/program development to meet and maintain standards
- Monitoring and accountability to ensure compliance with standards
- Ongoing financial assistance linked to meeting standards
- Engagement and outreach to sell the vision across the state

These components of an effective system were set forth in a 2001 paper by Anne Mitchell and Louise Stoney of the Alliance for Early Childhood Finance (see Figure 1).² Such a system could assure consistent ingredients of quality across the range of early care and education programs.

Figure 1



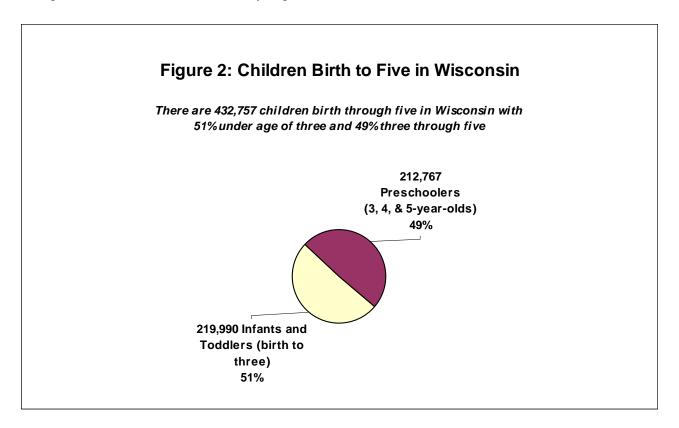
Section II: ECE Landscape Early care and education is an enormous enterprise in Wisconsin, with a large economic impact. However, for such a substantial set of services, there is fragmented infrastructure, despite the potential impact of these services for shaping our children in their most important years. There are well over 10,000 early childhood programs in Wisconsin, including public and private preschools, child care centers and homes, Head Start, home visiting programs and services for children with disabilities. The vast majority of these settings are private sector child care programs, trying to manage primarily on fees parents pay. Unfortunately, an unacceptably large percentage of the settings serving our children have difficulty delivering the kinds of quality early learning and development experiences that we know help our children thrive and bring a solid return on investment.

The expansion of early care and education services and public investments in the last quarter century has been impressive, but the patchwork system of services and funding streams has left many families at a loss as to how to find and access services and how to ensure the services are well-designed.

A. Young Children in Wisconsin

Children Ages Birth Through 5 in Wisconsin

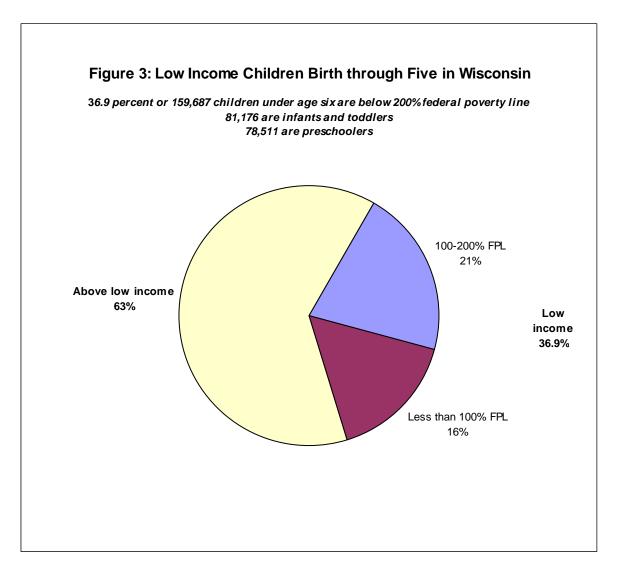
Wisconsin has 432,757 children ages birth through 5, with about half of them birth to age 3 and half ages 3 through 5 (2008 data), as illustrated by Figure 2.



Children from Low-Income Families

More than a third of Wisconsin's children under age 6 live in low-income families, with 16 percent in poverty (2008 data), as illustrated in Figure 3. We know from multiple research studies that the nearly 37 percent of children in low-income families and the 16 percent in poverty are at higher risk for poorer outcomes in school

and in life. For instance, we also know that in Wisconsin there is a serious school achievement gap for low-income children, particularly those of color. Wisconsin had the widest black-white gap in the nation on the fourth-grade math test in 2007, and was the only state in which the black-white achievement gap was larger than the national average in the tests for fourth and eighth grades in both math and reading, according to a study by the National Center for Education Statistics released in July 2009.³



B. Complicated Governance and Funding

ECE services have grown up through a complicated combination of public, private and semi-public services. The largest sector, child care, is primarily a private free market, with significant public investment to help working low-income families afford the service. Pre-kindergarten programs and programs to help children with disabilities and their families are essentially public programs operated through school districts or county human service agencies (4-year-old kindergarten, special education for children ages 3-5, and the Birth to 3 Intervention Program). Head Start and Early Head Start are publicly funded, but are usually operated through

community-based organizations, CESAs/schools or tribal nations. Home visiting programs are operated by public and private entities.

Figure 4 below illustrates the main responsibilities of three key state departments: the Department of Children and Families, the Department of Public Instruction, and the Department of Health Services. Most of these services use a mix of federal and state funding.

Figure 4

Department	Mission	Key ECE Programs	Key Funding Sources
Department of Children and Families	To promote the economic and social well-being of Wisconsin's children and families	Wisconsin Shares, the child care subsidy program Child care licensing and certification Home visiting pilots (11) Child care quality improvement initiatives	 Federal Child Care and Development Block Grant Federal Temporary Assistance to Needy Families (TANF) Federal Title IV-E funds State General Purpose Revenue (GPR)
Department of Public Instruction	To ensure the opportunity of a quality education for every child in the state	 4-year-old kindergarten Early Childhood Special Education program (children ages 3-5) Head Start state supplement Child care food program 	 State General Purpose Revenue (GPR) Federal Individuals with Disabilities Education Act (IDEA), Part B Local property tax revenue
Department of Health Services	To protect and promote the health and safety of the people of Wisconsin	Birth to 3 intervention program	 Federal Individuals with Disabilities Education Act (IDEA), Part C

The various funding streams and regulations for ECE program often developed independently of one another at the state and federal levels. In recent years Wisconsin has made some efforts to coordinate and consolidate ECE programs, but a coherent system has yet to be established. Two recent governance changes can bring us closer to a cohesive system:

- The creation of a new Wisconsin Department of Children and Families in July 2008, with a newly created Division of Early Care and Education (July 2008), and
- The establishment of a Governor's State Advisory Council on Early Childhood Education and Care (April 2009).

C. Funding for Early Care and Education in Wisconsin

Wisconsin, like most states, has a range of funding streams for early care and education that are often separate and disconnected. Figure 5 illustrates the range of ECE programs funded at the state level (with state and federal funding), the funding level, the numbers served, and other relevant information.

Figure 5: Key Wisconsin Funding for Early Learning

	Dept of Children and Families			Dept	Dept of Health Services		
ECE Program	Program Shares Quality and Comprehensive		4-Year-Old Kindergarten (4K)	Head Start & Early Head Start Including State Supplement	Special Education Children 3-5	Birth to 3 Interventio n Program	
Funding Level	Subsidy: \$385.0 m. 2009-10 \$402.5 m. 2010-11 Fed share: over 92 %	\$11.4 m. per year In 2009-11 budget Fed share: over 92%	\$985,700 per year for 10 Family Foundations sites and \$812,085 for Empowering Families Milw. Other home visiting programs are funded at local level or with private grants	per year for 10 Family Foundations sites and \$812,085 for Empowering Families Milw. Other home visiting programs are funded at local level or with private \$55 m. local In 2008-09 (include tribal & migrant funding) Total combined estimate: \$160 m. Federal Fed Breakout: \$88.9 m for Head Start \$10.6 m. for Early Head Start \$2.4 m for migrant		\$7.9 m. fed State funding in school funding formula \$14 m. state for teacher salaries Approx. breakout: State: 28% Fed: 16% Local schools: 56%	\$ 7 m. state \$7 m. federal \$15 m county Total federal, state, and local funding in 2008: \$ 29 million
Eligibility	Working or preparing for work. Family income: 185% of poverty initial, 200% ongoing.	Varies	First-time Medicaid eligible parents Most programs targeted to families with risk factors, all participation is voluntary	Universal	Low-income or disability	All eligible children must be served Children must have a disability as defined by rule	All eligible children must be served Must have developme ntal delay or disability
# of children served	59,067 mo. ave. first 7 months 2009 Ages: 0-2 (19%) 2-5 (47%) 6+: (34%) (2nd qtr 2009)	Not available	530 - Family Foundations 217- Empowering Families Milw.	33,976 (2008-09) universal where offered half of all 4's served	Head Start:16,356 Early Head Start: 1,629 children & 181preg.women Migrant&Seasonal: 541 Total: 18,707 (PY07-08)	15,153 (2008)	5,980 (2008, point-in- time count)
Delivery System	65% child care center 32% family child care 2% school programs (after-school)	\$4.8 m. for licensing \$3.5 m for child care scholarships & wage supplements \$1.2 m CCR&R \$0.6 m. TA	State contracts with up to 9 counties and 2 tribes	77% of school districts (2008-09) 87 districts have community approach models	Delivered by 56 Head Start/ Early Head Start grantees & Migrant/Seasonal program and 9 tribes	Delivered through school districts	Delivered through counties

The chart shows that by far the biggest budget item is for child care (Wisconsin Shares plus child care quality improvement), which will exceed \$396 million in fiscal year 2009-10, including funding from the federal Child Care and Development Block Grant, the federal Temporary Assistance to Needy Families block grant, and state general purpose revenue. Wisconsin Shares also serves the largest number of children—over 59,000 per month on average.

4K has the 2nd highest level of funding, estimated at \$160 million in state and local funding for the 2008-09 fiscal year. Head Start and Early Head Start annual funding totals \$108.8 million, counting federal allocations to the state plus the state supplement for federal fiscal year 2009, including tribal and migrant allocations.

Birth to 3 Intervention Program expenditures added up to \$28 million of combined federal, state, and local contributions in 2008. Special Education for Children Ages 3-5 is difficult to determine because the expenditures are blended into the school funding formula.

Overall home visiting expenditures are not available. The chart includes the two programs funded at the state level (Family Foundations and Empowering Families Milwaukee), totaling \$1.8 million..

Cost per child

For some of the ECE programs, we can make estimates of the annual cost per child:

<u>Program</u>	Estimate Cost per child per year
Wisconsin Shares	\$5,700
	Using the monthly average state cost per child. The cost is considerably higher for children in full-day, full-week child care—the average factors in part-time care costs. Costs vary according to the age of the child, provider prices and local market.
4-year-old	\$4,700
Kindergarten	Based on the estimated number of children served divided by total annual funding.
Head Start	\$7,200
	Based on estimates from the Wisconsin Head Start Association for federal Head Start slots.
Birth to 3 Intervention	\$4,850
2.1.0.1 to 0 11101	Based on dividing the number of children served by total annual funding. Costs per child vary significantly depending on a child's disabilities and services needed.

D. Changes in the Labor Force Creating a New Need in Wisconsin

Parents are a child's first and foremost teachers. But the world has changed from the days when most children were home with a parent in the years before school. In 1970 most children were cared for primarily by parents

or relatives prior to school, and most mothers were not in the labor force. Now, 40 years later, most mothers work, and the vast majority of children spend an extensive part of their early childhood years in out-of-home settings.

Wisconsin, partly due to its strong work ethic, has the 3rd highest percentage of children under age 6 with all available parents in the workforce: 72 percent.⁴ The high rates of young children with working parents have led to an explosion of child care settings to meet the needs. Working parents want their children to have nurturing early learning experiences that help them grow and develop. Parents know that ECE programs can enhance their child's development and school readiness, whether or not they are working.

72 percent of Wisconsin children under 6 years old have all available parents in the workforce

So where are all these children being cared for and educated? A recent national study found that in 2005-06, two-thirds of 4-year-olds were in a primary child care or early education arrangement other than a parent or relative. Very young children are more likely to be cared for by parents and relatives, with increasing participation in ECE settings as they approach school enrollment, but demand for infant and toddler care continues to grow.

E. The ECE Industry: Size and Impact

The ECE sector of the economy is much larger than most people realize. There are well over 10,000 ECE programs in Wisconsin, including regulated child care, 4-year-old kindergarten, Head Start and Early Head Start, programs serving children with disabilities, and home visiting programs. Child care is by far the largest sector.

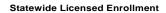
The economic impact of ECE programs likely exceeds \$2 billion annually.

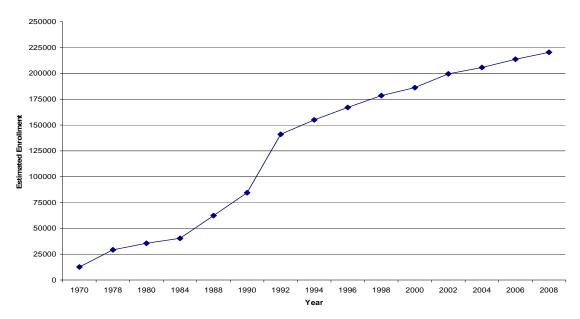
Studies of the economic impact of child care in Milwaukee and Dane counties show that the combined total impact on employment is estimated at over 35,000 jobs, including child care employees and employment generated by the child care industry, with a total economic impact of \$673 million. Extrapolating from this data, it is plausible to estimate a statewide economic impact from child care of as much as \$1.8 billion. The economic impact of all ECE programs, not just child care, is likely to exceed \$2 billion annually.

As demand for child care has grown, so has the number of regulated providers. In the last 20 years, the number of licensed child care centers more than doubled in Wisconsin, from 2059 in 1988 to 5,601 in 2008, a 172 percent increase. While group child care centers (serving nine or more children) nearly doubled, family child

care centers (serving up to eight children) more than quadrupled.⁸ The capacity of licensed child care programs to serve children in the state has grown dramatically, as illustrated by Figure 6.

Figure 6: Growth in Licensed Child Care Capacity in Wisconsin





Key Findings on Wisconsin ECE Landscape

- ECE has a very diverse delivery system, with multiple funding sources and administrative agencies.
- Family needs have changed dramatically, with more parents working and more parents wanting child care and early education.
- ECE constitutes a large economic sector in Wisconsin.
- A significant portion of our children, particularly children of color, are at risk of poor outcomes.

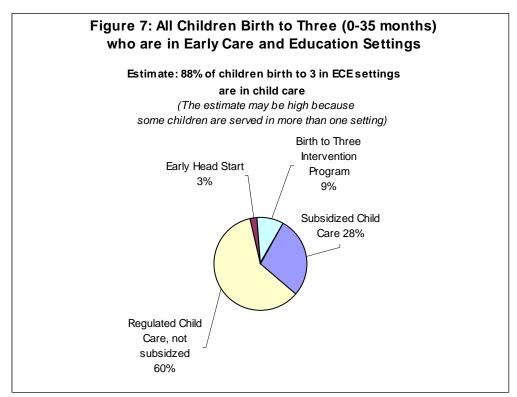
Section III. Access to Wisconsin's ECE Services

A. Overview of Children in ECE Settings

1. Use of ECE Settings by Age Group

Estimate of Children Under Age 3 in ECE Settings

Figure 7 provides an estimate of Wisconsin under age 3 who are in various out-of-home ECE settings. An estimated 88 percent of children under 3 served in ECE settings are in child care programs (subsidized and not subsidized), while 9 percent are served by the Birth to Three Intervention Program, and 3 percent in Early Head Start. The percent breakouts are estimates, and they don't account for children in multiple settings.

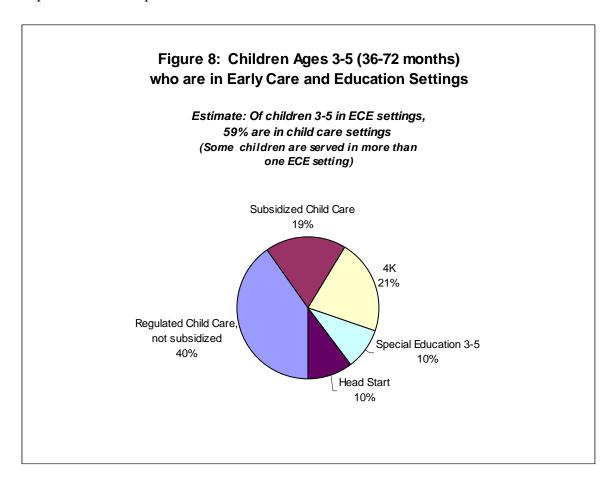


Data are unclear about what percentage of Wisconsin children ages birth to 3 are in ECE settings, largely due to duplicated counts of children who are in more than one setting, but our estimate is approximately 60,000 children, or 27 percent. Statewide data on home visiting programs were not available.

Estimate of Children Ages 3-5 in ECE Settings

Figure 8 shows the breakout of preschool children (ages 3 through 5) in ECE settings. Many children are served in more than one ECE setting. Because the data includes duplicated counts, and because overall child care usage by age groups is not collected, it is difficult to arrive at reliable breakouts. For instance, many Head Start children are also enrolled in child care, many 4K programs are delivered in Head Start and child care settings, and Special Education services are increasingly delivered in natural settings like child care.

Child care is the ECE setting used most by preschoolers. Of children in ECE settings, an estimated 59 percent of children ages 3-5 are in child care settings, while 21 percent are in public 4K, 10 percent in Head Start, and 10 percent receive special education services.



Data are unclear about what percentage of all Wisconsin children ages 3-5 are in ECE settings, largely due to duplicated counts of children who are in more than one setting, but our estimate is approximately 127,000 children, or 60 percent. Note that nearly all five-year-olds attend kindergarten, which we are not considering an "ECE program" in this paper. Statewide data on participation in home visiting programs were not available. If we estimate for 4-year-olds only, well over 75 percent are probably in ECE settings (4K, child care, special education, and Head Start)

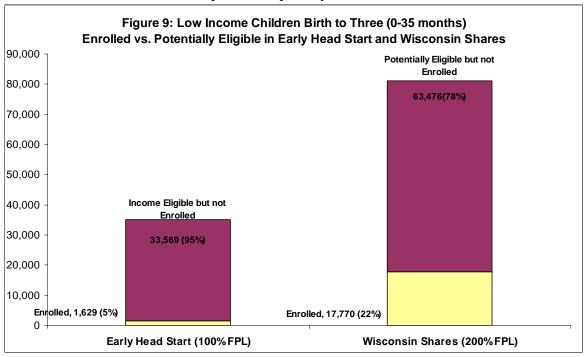
2. Low-Income Children: Access to Key ECE Services

Most of Wisconsin's investment in early care and education is focused on low-income or disabled children (Wisconsin Shares, Head Start and Early Head Start, the Birth to 3 Intervention Program, Special Education, and most home visiting programs). Four-year-old Kindergarten is the primary non-targeted universal ECE program; it reaches many low-income children, since the program is free to all 4-year-olds.

Low-Income Children Under 3: Early Head Start and Wisconsin Shares

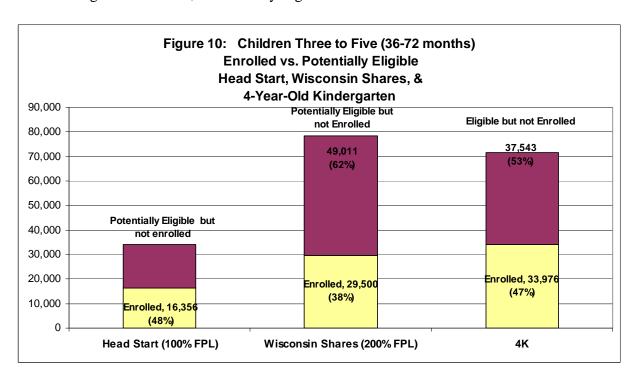
Only a fraction of children under age 3 from low-income families who are eligible or potentially eligible for Early Head Start or Wisconsin Shares child care are receiving services, as shown by Figure 9. Potential

eligibility was defined for Early Head Start as children in poverty and for Wisconsin Shares as children in families with income below 200 percent of poverty



Low-income Children Ages 3-5: Head Start, Wisconsin Shares and 4K

Since 2007, an increasing percentage of children ages 3 to 5 are being served in Head Start, Wisconsin Shares, and 4-Year-Old Kindergarten. However, a significant percent of eligible or potentially eligible children are still not receiving these services, as shown by Figure 10.



The graph assumes potential eligibility for Head Start if children are in poverty, and potential eligibility for Wisconsin Shares if children are in families with income below 200 percent of poverty. For 4K, all 4-year-olds are eligible if a school district offers the service.

A significant number of Wisconsin's children are at risk of poor outcomes due to disadvantaged backgrounds, disabilities or special needs. In Wisconsin 37 percent of our children under age 6 grow up in low-income families (under 200 percent of poverty), and 16 percent of children under age 6 grow up in poverty. These rates are much higher for Black, American Indian and Hispanic children. We know from extensive research that later success in school and life is rooted in the first five years, and that effective early care and education programs can help close the gap by engaging families early and enhancing children's development and early learning.

3. Distribution of Children in ECE Settings in Wisconsin

Data is less than clear about children in ECE settings, particularly because many children spend time in more than one setting during a typical week. Figure 11 provides estimates on where children under age 6 receive early care and education services.¹⁰

Figure 11: Breakout of Children Served by ECE Settings

ECE Setting	# children under age 6 served (duplicated counts)	Children Served Percent of Total
Certified family child care (2008)	13,770	6.9 %
Licensed family child care centers(2009)	15,620	7.8 %
Licensed group child care centers (2009)	93,734	46.7 %
Head Start & Early Head Start (2008)	19,942	9.9 %
4K (2008)	33,079	16.5 %
Special Education 3-5 (2008)	15,153	7.5 %
Birth to 3 (2008)	5,980	3.0 %
Home visiting (Parents as Teachers only)	3,405	1.7 %
TOTAL	200,693	100%

The majority of young children, an estimated **61 percent** in ECE settings are served in regulated child care settings (combining children in licensed group child care centers, licensed family child care centers, and certified family child care). Because statewide child care enrollment data by age are not available, and many children are served in multiple settings and unduplicated data are not available, the estimates in Figure 11 may not be extremely precise; however, the figures are probably in the ball park.

Note that home visiting data are from only one program (Parents as Teachers) because this model has been shown specifically to contribute to school readiness and because there is a state and national system for this model that supports data collection. Other home visiting models address school readiness, but data was not available. The number of children (and their families) served by *all* home visiting programs in Wisconsin is considerably higher, but no state system for data collection exists.

B. Trends: Children Served by ECE Programs in Wisconsin

Wisconsin has a proud history of assuring access to needed ECE services and is often ranked high in comparison to other states. But there is still unmet need. This section looks at the number of children served and the trends in the major ECE sectors.

1. Four-year-old Kindergarten

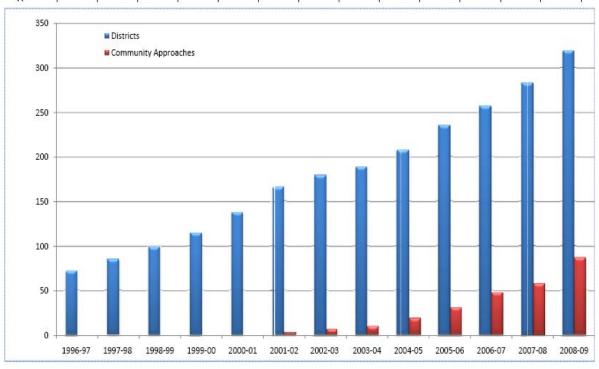
In recent years the number of school districts offering universal 4-year-old Kindergarten (4K) has expanded rapidly, from 61 districts in 1995-96 to 319 in 2008-09 (see Figure 12).

Figure 12

Trends in 4-Year-Old Kindergarten

The number of Wisconsin school districts offering 4-year-old kindergarten, 1996-2009 and The number of Wisconsin school districts using the Community Approach, 2001-2009

Year	1996-97	1997-98	1998-99	1999-00	2000-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08	2008-09	
Districts	72	85	99	115	138	166	180	189	208	235	257	283	319	8
Community Approaches						3	7	10	19	31	48	58	87	ì



Now 77 percent of school districts offer 4K; 27 percent of those districts use "community approaches," where districts work with community-based early childhood programs to deliver 4K services.

Nearly half of all 4-year-olds (about 34,000) are estimated to have been enrolled in 4K programs in the 2008-09 school year, compared to 14,483 in 2001-02. Wisconsin ranks 7th among states in preschool access for 4-year-olds. A significant strength of 4K is that services are free and universal, so families face no affordability issues in accessing 4K. Enrollment has more than doubled since the 2002-03 school year, from 16,051 to 33,976 in 2008-09.

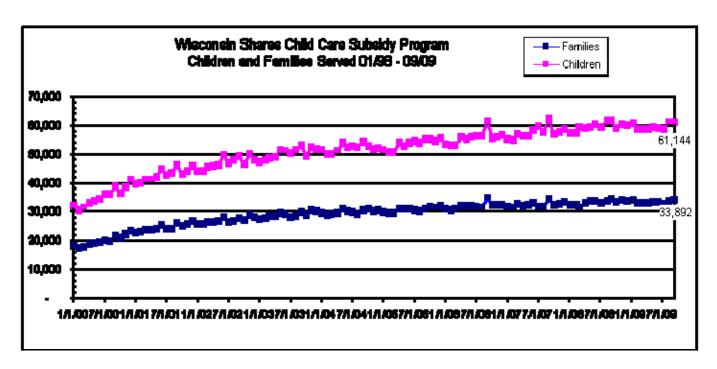
2. Child Care Use and Affordable Access

As discussed earlier in this paper, use of child care has expanded rapidly, mirroring increases in parents' participation in the workforce. A major trend in the 20 years has been the public policy focus on affordable access to child care for working families.

Wisconsin Shares

A parallel development to the growth in Wisconsin's private child care market is the increase in efforts to assure affordable child care access for low-income working parents. The Wisconsin Shares child care subsidy program was launched in 1997 as one of the cornerstones of Wisconsin Works (W-2). The program, building on prior efforts, provided financial assistance to families with income up to 200 percent of poverty so they could afford child care in order to work or prepare to enter the workforce. In the twelve years since the start of Wisconsin Shares, participation has more than doubled from 30,000 children per month in 1997 to about 61,000 in 2009, as shown in Figure 13. ¹³

Figure 13: Children and Families Served by Wisconsin Shares



Children Served in Licensed Child Care

The Wisconsin Department of Children and Families estimates that over 220,000 children may be served in licensed centers and family child care programs (see Figure 6 in Section II), assuming that enrollment is often greater than licensed capacity due to part-time slots. However a recent study in Milwaukee by the Public Policy Forum found an 89 percent enrollment rate in a survey of licensed and certified child care providers. This paper assumes that currently licensed child care centers and homes are serving about the number they are licensed to serve: 165,709 children. A reasonable estimate is that at least two-thirds (111,025) of these children are under age 6. While child care slots have rapidly increased, Wisconsin's system of Child Care Resource and Referral agencies regularly report that the supply of infant/toddler child care is insufficient to meet demand.

Fluctuation in Certified Family Child Care

To help ensure health and safety and to provide accountability for public funds, Wisconsin Shares regulates family child care providers who are not required to be licensed—providers serving fewer than four children unrelated to them. These programs must be certified for public funding, meeting a set of fairly basic health and safety standards. As Wisconsin Shares grew, the number of certified homes grew quickly as well to 5,533 in 2002, but in recent years the number of certified providers has dropped markedly, dropping 38 percent to 3417 certified providers in 2008. Figure 14 shows the change in capacity of certified providers, assuming that each provider can care for up to six children, counting relatives and non-relatives.

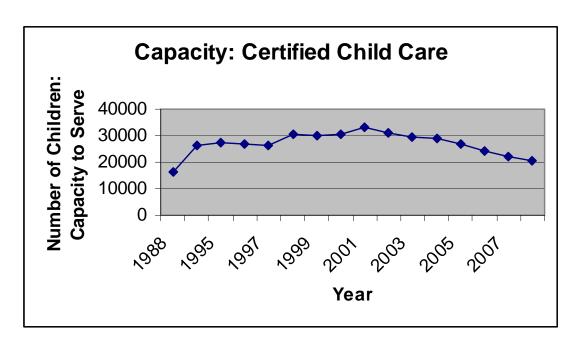


Figure 14: Children Served in Certified Family Child Care

As of the 2nd quarter of 2009, 86 percent of children funded through Wisconsin Shares were in licensed child care, 11 percent in certified family child care, and 3 percent in school programs.

3. Head Start and Early Head Start Enrollment

Head Start and Early Head Start are comprehensive early childhood development programs targeted to families in poverty, with a strong emphasis on serving children with special needs or disabilities (at least 10 percent of

Head Start slots must be made available to children with disabilities). Head Start's comprehensive approach includes an extensive early learning program, health and mental health screening and services, and social services and counseling for families.

In program year 2007-2008, Wisconsin Head Start and Early Head Start programs served 18,707 children: Head Start served 16,356 (including Tribal programs), Early Head Start served 1629 children and 181 pregnant women (including Tribal programs), and Migrant and Seasonal Head Start served 541 children. ¹⁴ Head Start enrollment has increased significantly in the last decade, and Early Head Start continues to grow, with an expected boost from new federal investments in 2009-2010, as illustrated by Figures 15 and 16.

According to the National Center on Children and Poverty, about 68,580 (16%) of Wisconsin young children under the age of 6 are living below the poverty line. As of 2008, an estimated 23.6% of Wisconsin children in poverty were served by Head Start and Early Head Start.

Figure 15: Wisconsin Head Start Enrollment (includes Tribal Programs)

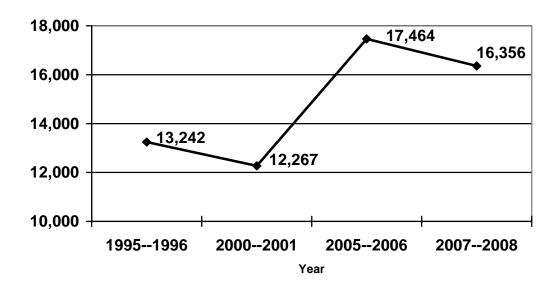


Figure 16: Wisconsin Early Head Start Enrollment

Year	Children Served
1995-96	0
2000-01	686
2005-06	1,408
2007-08	1,629

State Supplement to Head Start

Wisconsin is one of only 15 states that supplements federal Head Start funding with state dollars.¹⁵ State supplemental funding for Head Start has helped to serve additional children, but recent budget cuts have reduced the numbers served back to levels of 15 years ago, as shown in Figure 17, and per child funding has been declining.

Figure 17: Wisconsin Children Served by State Head Start Supplement

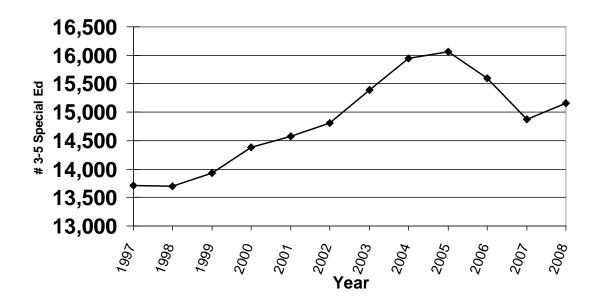
Year	# Children Served
1995-1996	1,296
2000-2001	1,388
2005-2006	1,416
2009-2010	1,219

4. Services for Children with Disabilities

a. Early Childhood Special Education for Children Ages 3-5

Under state and federal law, school districts are required by federal law to identify children with disabilities and provide school-based services to children ages 3-5 in the "least restrictive environment." As of the fall of 2008, 15,153 children ages 3-5 were enrolled in public school special education programs in Wisconsin. Figure 18 shows the number of children ages 3-5 served by public school special education programs. The number of children served has grown 10.5 percent between 1997 and 2008. During that same 11-year period, overall public school enrollment declined by 1 percent, so an increasing percentage of children with disabilities are being served. Federal funding and requirements for children ages 3 and older come from the Individuals with Disabilities Education Act (IDEA), Part B.

Figure 18: Children Served in Special Education 3-5



b. Birth to 3 Early Intervention Program

Birth to 3 is Wisconsin's early intervention program for infants and toddlers with developmental delays and disabilities from birth to 36 months. Children receive a range of services in the home or in early care and education settings, such as child care programs. The program served 5,980 children as of the fall of 2008. Wisconsin is above national averages in the percent of the population served under the IDEA program for ages 0-2 and 3-5. The program is required to serve children as much as possible in settings with non-disabled peers.

The number of children ages 0-2 served through the Birth to 3 program has more than doubled since 1992, as illustrated in Figure 19. Wisconsin is above the national baseline in the percent of population served by the birth to 3 program, but below the national baseline for serving infants less than 1 year of age, as of 2007. Federal funding and requirements for Wisconsin's Birth to 3 program comes from IDEA, Part C.

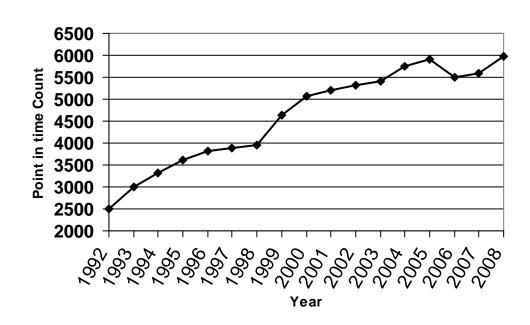


Figure 19: Children Served by the Birth to 3 Intervention Program

Disabled Children Served by Head Start/Early Head Start

As discussed in the Head Start/Early Head Start section, services to children disabilities are mandated in those programs. Of the 16,356 children ages 3-5 enrolled in Head Start in 2007-2008 in Wisconsin, 2,161 were children with disabilities (including Tribal programs); that's 13 percent of the total number of children ages 3-5 enrolled in Head Start in 2007-2008. Of the 541 children enrolled in Migrant and Seasonal 0-5 Head Start, 40 were children with disabilities; that's 7 percent of the total number of children ages 0-5 enrolled in Migrant and Seasonal Head Start in 2007-2008

In 2007-2008, of the 1,629 infants and toddlers ages 0-3 enrolled in Early Head Start in Wisconsin, 253 were infants and toddlers with disabilities (including Tribal programs); that's 16 percent of the total number of infants and toddlers enrolled in Early Head Start in 2007-2008.

5. Home Visiting

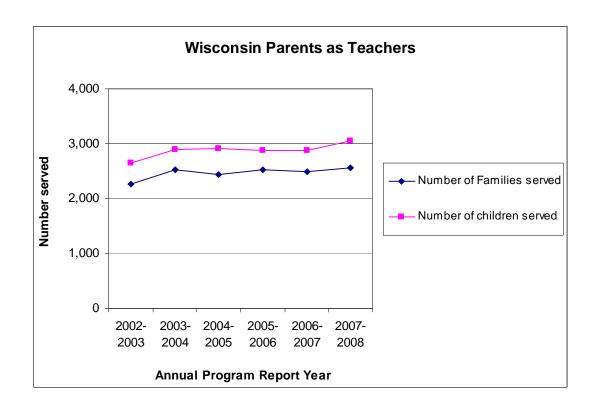
Well-designed home visiting programs can increase children's school readiness, improve child health and development, reduce child abuse and neglect, and enhance parents' ability to support their children's overall development. Wisconsin has a wide range of home visiting programs that support families. From data collected by the University of Wisconsin-Extension Family Living Programs we know that there are at least 85 agencies providing home visiting services in 43 counties.¹⁹

For the purposes of this paper, which has a clear focus on early care and education, we can look at data for those home visiting programs that have a strong focus on school readiness and have been proven to address early education outcomes: Parents as Teachers (PAT) and Head Start/Early Head Start. Home Instruction for Parents of Preschool Youngsters (HIPPY) USA also has a focus on early learning, but data was not available. Other home visiting programs, like the state-funded Family Foundations program and Empowering Families Milwaukee, have a primary emphasis on preventing child abuse and neglect and enhancing family functioning, as well as supporting child health and development. While the paper focuses on home visiting programs with particular school readiness goals, it should be noted that home visiting programs focused on other outcomes (child health, reduction of abuse and neglect, etc.) also are likely contribute to positive child development and school readiness.

Parents as Teachers Home Visiting

Figure 20 illustrates Wisconsin participation in the Parents as Teachers model, which has grown from 2,645 in 2002-03 to 3,045 in 2007-08, an increase of 15 percent over 5 years.

Figure 20: Children and Families Served by Parents as Teachers in Wisconsin



Home Visiting in Head Start/Early Head Start

In 2007-2008, 453 of the 16,356 children enrolled in Head Start in Wisconsin (including Tribal programs) were served in home-based programs, and an additional 343 were served in a combination program (both home-based and center-based program options); that's **5 percent** of the total number of children ages 3-5 enrolled in Head Start (including Tribal Head Start) receiving a home-visiting services.

Of the 1,629 infants and toddlers ages 0-3 enrolled in Early Head Start in Wisconsin in 2007-2008, **55 percent** were enrolled in Early Head Start programs with home-visiting services.

C. Summary: Access to ECE Services

Overall Wisconsin has very good access to services as illustrated by the following information:

- **4K:** Wisconsin is ranked 7th among states in enrollment in state pre-kindergarten programs for 2007-08 (NIEER 2008 State Preschool Yearbook²⁰)
- Child Care: Clearly child care programs have expanded rapidly to meet family demands in recent years. However, Child Care Resource and Referral programs report a lack of available infant/toddler child care.
- Wisconsin Shares: Wisconsin's child care subsidy program has not had a waiting list since 1997, so all eligible families that apply have had access to financial help with child care costs up to 200 percent of poverty, higher than most states. About 75 percent of child care programs participate in Wisconsin Shares, providing a wide range of choice for most parents.
- **Head Start/Early Head Start:** Head Start and Early Head Start in Wisconsin serve about 23.6 percent of eligible young children. Wisconsin is one of only 15 states that supplement federal funding.
- Services to children with disabilities/special needs: Wisconsin is above national averages in the percent of the population served under the IDEA program for children 0-2 and 3-5. In addition, Head Start and Early Head Start serve significant numbers of children with disabilities.
- Home visiting: Home visiting programs in Wisconsin have been growing rapidly in the last decade, as documented by the University of Wisconsin-Extension. Head Start/Early Head Start, Parents as Teachers, and HIPPY particularly focus on early learning.

Key Findings on Access

- Many disadvantaged children are not accessing ECE services.
- 4K enrollment has more than doubled in 7 years.
- Child Care is the setting most used by parents for early care and education.
- Nearly two-thirds of Wisconsin children in ECE settings are in child care programs.
- Early Head Start and home visiting are emerging programs serving children birth to 3.

Section IV: Quality of Wisconsin's ECE Programs

A. Why Quality Matters

Scientific evidence is clear that the first five years of a child's life are a critical time for learning. A child's brain develops at an astonishing rate during this period before school entry.

Researchers estimate that 85% of a child's brain develops based primarily on experiences during the first five years.

Research shows that high-quality early care and education helps children achieve in school and makes them more likely to become productive citizens. This is especially true for children from disadvantaged backgrounds. High-quality early learning can happen in many settings: at home, in child care, and in preschool settings. Programs that simultaneously provide direct support for parents and high-quality care and education for children have been shown to yield impressive return on investments. Lower quality child care is linked to more problem behaviors, less language ability, and lower school readiness.

Note: For more information on the benefits of high-quality early childhood programs, go to the Wisconsin Council on Children and Families 2009 publication, *The Economic Benefits of Investing in Early Learning:*http://www.wccf.org/pdf/great_start_investment_ece.pdf

B. Elements of High-Quality Programs

Research provides strong evidence on the elements of effective ECE programs, including (1) out-of-home programs designed for the care and education of children, and (2) home visiting programs.

1. Child Care and Preschool Settings

Several studies have synthesized the key elements of effective programs in child care and preschool settings. According to analysis by Harvard University's Center on the Developing Child, the National Institute for Early Education Research, and the Committee for Economic Development, five quality components stand out.²²

Well-qualified and Effective Teachers: Well-qualified teachers are a key ingredient to an excellent program. Teachers with better education and training understand child development more thoroughly, and are more likely to establish positive relationships with children and help them develop the skills they will need in school.

Small Class Sizes and High Adult- to-Child Ratios: Nearly all studies of staff-child ratios and group size have concluded that these indicators of quality lead to better experiences and outcomes for children. The fewer the number of children cared for by an adult, the more optimal the care-giving and teaching.

A Curriculum Focused on Children's Development and Learning: A well-designed curriculum focuses on the whole child, including social and emotional development, and leads to rich language development, engaging children's natural curiosity, and joy of learning.

Parent Engagement: Excellent programs partner with parents in their child's learning. Great ECE services include extensive home visiting programs.

Attention to Health and Safety: Top level ECE programs pay close attention to health and safety, including early screening, preventive health care, nutrition, and physical and mental health.

2. Home Visiting Programs

A growing body of research is finding positive outcomes from well-designed home visiting programs that meet critical elements for success. According to Deborah Daro, an expert on home visiting from the University of Chicago, the likelihood of success is enhanced by home visiting programs that embrace the following features:

- Forming an extended relationship with a family to accomplish meaningful change in parents' knowledge levels, skills, and ability to form a strong positive attachment to the infant
- Well-trained and competent staff
- High-quality supervision that includes observation of the providers and participant
- Solid internal consistency that links specific program elements to specific outcomes
- Strong organizational capacity
- Linkages to other community resources and supports.²³

In addition, this body of research points to the importance of fidelity to proven models and quality standards. All of the five national home visiting models have systems for quality assessment and program improvement that are managed at national and regional levels. The eleven state-funded home visiting programs use outcomes attainment measures based on best practice in the field, with a focus on health outcomes and the reduction of child maltreatment. Oversight for these programs is managed by the Department of Children and Families.

C. Data on Overall Quality in Wisconsin ECE Settings

1. Research on Child Care Quality in Wisconsin

According to a 2001 study by the Wisconsin Child Care Research Partnership of Wisconsin child care centers participating in the Wisconsin Shares child care subsidy program, most programs did not meet good or excellent standards, either for infant and toddlers or for 3- and 4-year-olds. The study found that:

- 15% were rated as good or excellent,
- 74% were rated mediocre, and
- 11% were rated poor.

The research project used Environment Rating scales designed for infants/toddlers and for preschool-age children to measure quality in 175 classrooms within 28 randomly-selected child care centers. The researchers believe the findings approximate the overall quality of child care centers, since 80 percent of centers participated in the subsidy program. These findings were very similar to the findings of the 1995 Cost, Quality and Child Outcomes Study, a four-state study that included 400 classrooms.

Research on Staff Qualifications in Center-Based Child Care

Research by the Research Partnership found that teacher education, hourly wages, and child-centered beliefs were highly correlated with quality interaction in classrooms. The research also found significant correlations between the education of child care directors and the quality of teacher characteristics and interactions with children.²⁵

Research on Quality in Family Child Care

The Research Partnership found that licensed family child care providers were more likely to have good or excellent quality than county-certified providers. In addition, the Partnership found that family child care providers were more likely to provide high quality services if they had a two-year or four-year degree or a CDA credential, and if they demonstrated certain business practices or professional commitment. ²⁶

Accreditation of Child Care Programs

- *NAEYC Accreditation*: The National Association for the Education of Young Children (NAEYC) has accredited child care centers meeting high-quality standards for over 20 years. However, only 5 percent of licensed Wisconsin child care centers (128 out of 2,532 licensed centers) were NAEYC accredited as of June 2009. In 2001 there were 240 NAEYC accredited centers in Wisconsin, meaning the number has dropped by 112 centers, a 47 percent reduction in the last eight years. Wisconsin provided quality improvement grants from 1992 to 2002 to help child care programs receive and sustain accreditation, but those grants have not been available for seven years. The absence of strong financial incentives and the increase in NAEYC standards and fees appear to be the key reasons for the decline in NAEYC accredited programs in Wisconsin.
- *City of Madison Accreditation*: Madison has accredited child care programs for over 30 years. Madison standards are similar but less detailed than those of NAEYC. On-site consultation, training and grants help programs meet and maintain the standards. As of June 2009, **141** child care centers and family child care programs were city accredited (85 centers and 56 family child care programs).

2. Research on 4-Year-Old Kindergarten Quality in Wisconsin

According to the 2008 State Preschool Yearbook put out by the National Institute for Early Education Research (NIEER), Wisconsin met five of 10 quality benchmarks: early learning standards, teacher degree, teacher specialized training, teacher in-service, and monitoring. ²⁸ The NIEER rankings required quality benchmarks to be met statewide, a criterion that does not fit very well with Wisconsin's locally controlled public education system.

Wisconsin was part of an 11-state study by the National Center for Early Development and Learning of pre-Kindergarten programs, with findings published in 2005. The study found that children finished pre-kindergarten with more skills than when they started, particularly in language, literacy and numeracy. Teachers also reported improved social skills.²⁹ The study found that teachers were well-educated, and ratios were generally within recommended standards (under 1:8). The study found classroom quality was less than what children needed for best learning outcomes. It is difficult to know how much these aggregate 11-state findings reflect the quality of Wisconsin 4K programs.

3. Head Start Quality

Head Start and Early Head Start programs are required to meet a rigorous set of performance standards, monitored by the federal government. Performances standards cover early child development and health, family and community partnerships, staff requirements, program design, and requirements for serving children with disabilities.

Two nationally representative studies--the Head Start Impact Study and the Family and Child Experiences Survey--reveal that Head Start programs are of consistently good quality.³⁰

4. Quality of Services to Children with Disabilities or Special Needs

Wisconsin is determined to "meet requirements" outlined in IDEA, as evidenced by high performance on 14 federal indicators of quality of services to families and children in the Wisconsin Birth to 3 Program, as well as federal indicators for children 3 to 6. DHS collects performance results for children in the Birth to 3 Program on timely services to children, services in natural environments, child outcomes, family outcomes, transition to school district services, and children served; the Department then reports these results in a Dashboard format, by county, through a link to the North Central Regional Resource Center at the University of Minnesota.

Note: Those results are available for FFY 2007 at http://northcentralrrc.org/wisconsin/. More information, as well as the Annual Performance Report for the Birth to 3 Program, is available at this link: http://dhs.wisconsin.gov/bdds/birthto3/reports/aprffy2007rev200901.pdf

As referenced earlier, Head Start/Early Head Start have specific federal performance standards related to services for children with disabilities.

5. Quality of Home Visiting

Wisconsin home visiting programs include those that follow three of the national models--Parents as Teachers (45 sites), Healthy Families America (3 sites) and Nurse Family Partnership (1 site). Programs that implement these proven models have been shown to improve birth outcomes, enhance parenting skills, increase school readiness and help to reduce child maltreatment. The Parents as Teachers model has been found to increase school readiness for children birth to 5 years old.

While Wisconsin does not have a system for quality shared by all home visiting programs in the state, there are strong models to draw from. The Early Years Home Visiting Outcomes Project of Wisconsin has identified outcomes across program models and developed a shared data collection system for pilot programs. In addition, programs implementing the Parents as Teachers model rely on the State Affiliate Leader, Parents Plus, Inc. of WI, Inc., to ensure quality implementation of Parents as Teachers. This program is highlighted in this paper because of its proven impact on children meeting developmental milestones (early education). PAT Quality Standards include indicators related to personal visits, group meetings, screening, resource networking with families and other agencies, recruitment and retention, program management, professional development and evaluation. Programs can participate in a self-assessment process.

D. An Analysis of Quality Across ECE Sectors

This section analyzes quality components across several out-of-home ECE program types. For most of the five quality components, there is a wide range of quality.

1. Teacher Qualifications

The qualifications of lead teachers (teachers/providers with lead responsibility for children) in ECE programs. While virtually all public school and special education preschool teachers have bachelor's degrees, and about 85 percent of Head Start teachers have at least a two-year degree, fewer than 30 percent of child care center teachers and family child care providers have two-year degrees or more. Figure 21 illustrates the range of qualifications across ECE settings. 32

Figure 21: Teacher Qualifications

Teacher or Special Educator Qualifications by Early Care and Education Settings						
Teacher or educator in ECE setting	Percent of Teachers with 4- year-degree or higher	Percent of Teachers with 2- year Degree or higher	Estimated Number under age 6 served			
Certified small family child care provider	Unknown	Unknown	13,770			
Family child care provider in a licensed family child care center	6%	24%	15,620			
Child care teacher in a licensed child care center	14%	29%	93,734			
Head Start teacher	58%	87%	16,356			
Early Head Start Teacher	27%	77%	1,629			
Home visiting (Parents as Teachers)	76%	84%	3,045			
Teacher in public school 4-year-old kindergarten and special education for ages 3-5; Special educator in Birth to 5 Intervention	99-100%	99-100%	54,212			

The discrepancies in staff qualifications between different ECE settings are highly related to the requirements for each type of program and the fiscal resources available. For instance, 4K and Head Start/ Early Head Start teachers are required by law to meet educational qualifications, and public funding is allocated to help ensure those standards are met. However, for child care programs state requirements are fairly minimal, and revenue for child care is primarily through parent fees in the private market. With parent fees as their primary source of revenue, child care programs cannot afford to pay for highly qualified staff.

Wages and benefits are highly correlated with teacher qualifications. The connections are fairly obvious: Individuals with higher qualifications demand higher rates of pay and benefits. Wages for 4K and early childhood special education teachers are more than double those of child care teachers, and significantly higher than Head Start teacher wages. For instance, the average annual salary for Wisconsin public school classroom teachers in 2008-09 was over \$50,000, while the average annual wage for a child care center teacher is in the \$20,000 range. The wage gap is wide largely due to the economics of the two systems: Child care operates in a free market system depending on parent fees, while public schools pay teachers with public tax dollars based on wage scales established through collective bargaining.

2. Group Size and Staff-Child Ratios

Staff-child ratio and group size requirements range from stringent statewide requirements to locally determined standards. Head Start has the strongest requirements, set in federal regulations. Figure 22 below compares the requirements.

Figure 22: Group Size and Staff-Child Ratio Requirements

ECE Setting	Group Size Limits		Maximum Staff-Child Ratio		
Certified family child care provider	6 maximum		1:6, unless 3 or more under age 2		
Licensed family child care center	8 maximum- need additional staff if 2 or more under 2		1:8, unless 2 or more children under age 2 are present		
Licensed child care center	Group size 8 12 16 20 24	Age Birth to 2 2 to 2½ years 2½ to 3 years 3 to 4 years 4 to 5 years	Ratio 1:4 1:6 1:8 1:10 1:13	Age Birth to 2 2 to 2½ years 2½ to 3 years 3 to 4 years 4 to 5 years	
Head Start & Early Head Start	13-17 range 15-20 range	Age 3 Age 4	2:15 3-year-olds 1:10 4-5 year-olds- 2 teachers or a teacher + aide		
4K	Varies determined by school districts. No state requirements		Varies—determined by school districts No state requirements		
Special education for ages 3-5 in public school	Varies—determined by school districts No state requirements		Varies—determined by school districts No state requirements		
Birth to 3 Intervention Program	Determined locally No state requirements		Determined locally No state requirements		

4K and special education generally do not have group size and ratio requirements at the state level, since local school boards have the authority to determine these policies. However, The Department of Public Instruction has issued staffing guidelines for use by local school boards for 4K and for special education, but they are not requirements. Group size and staff-child ratios do not logically apply to home visiting, where services are for one family at a time. Best practice standards indicate that a full-time home visitor would conduct no more than 12-15 visits in a week.

3. Parent Engagement

In this area, requirements vary widely from very minimal rules for child care programs to extensive requirements for Head Start/Early Head Start, Special Education for ages 3 to 5, and the Birth to 3 program—all three of which are designed as intervention programs for children with special needs or disadvantaged backgrounds. State policy includes fiscal incentives through the school funding formula to encourage school boards to do parent outreach and engagement with families that enroll children in 4K. An essential element of home visiting programs in Wisconsin is parental engagement using family development principles. Home visitors work in the context of a partner relationship with parents, serving as a connector to other resources and services a family may need.

4. Curriculum and Learning Activities

Again, there is a wide range of requirements across ECE settings. Child care rules have broad requirements to ensure a program of learning and play activities, but with very few specifics. A study by the Wisconsin Child Care Research Partnership found that a small percentage (less than 20 percent) of child care centers use a formal curriculum. Head Start has extensive curriculum requirements, with provisions to plan for and track indicators in language, literacy and numeracy skills, testing requirements, and detailed standards. School boards operating public school 4K and special education are required to provide an instruction program, a reading program, and utilize standards to operate a curriculum. State statutes define subject areas that must be addressed in 4K programs, including reading and language, math, social studies, science, health, the arts, etc. Birth to 3 programs and public school special education programs establish individual development and learning plans for each child.

Home visiting programs that adopt a model that supports early education, such as Parents as Teachers, are equipped with up-to-date, research-based parent handouts and age-paced activities that follow a developmental sequence, created by experts in the field, that are updated every 3 to 5 years. These materials match the early literacy standards of the National Center for Family Literacy. Most home visiting programs participate in statewide training of the Ages and Stages Questionnaires, a standardized developmental screening tool.

5. Health and Safety

Health and safety requirements are fairly strong for all ECE settings. Licensed child care health and safety rules are thorough, covering communicable disease, medications, sanitation, nutrition, transportation, hazards and fire safety. Certified child care providers must follow similar rules, but they are not as detailed. Head Start has the most extensive health and safety requirements and resources, including preventive and primary health care and developmental screening. Public school programs must meet building codes for facilities, a set of health and safety rules, and usually have nurses available. Home visiting programs use proven methods for hearing, vision, dental and health screening. Home safety checks are conducted and safety concerns are recorded and addressed using a shared data collection system housed in the Department of Health Services.

E. Summary: Quality of ECE Programs

1. Quality in Key ECE Sectors

- **Head Start/Early Head Start:** Designed as a program to change the trajectory of development for children from disadvantaged families, Head Start and Early Head Start have very strong quality standards in all areas, especially with recent improvements in teacher qualifications over the last few years.
- **4K and Programs Serving Children With Disabilities:** 4-year-old Kindergarten, Special Education for Children Ages 3-5, and Birth to 3 Intervention Programs have the most educated teachers/educators, a component that many experts believe links strongly to quality services.
- **Child Care:** The overall picture of child care program is of widely varying quality, but with only a small percentage meeting multiple high-quality standards. Particularly disturbing is that quality is lowest in the service area –child care—that serves the most children. State child care standards are

comparatively low in staff qualifications, curriculum and parent engagement compared to other ECE sectors.

• **Home Visiting:** A major effort has been underway since 2000 to establish quality standards for effectiveness and evaluate outcomes, but Wisconsin does not yet have a statewide system that supports the wide range of programs in the state.

2. Coherent Systems Lead to Higher Quality

Quality indicators appear to be met more consistently where there are clear systems in place: quality standards, robust professional development programs, accountability, clear governance, and financing. Head Start has a complete system of grantees, performance standards, training and technical assistance, and set-aside targeted public funding to sustain quality. Public school systems that deliver 4K and Special Education have school board oversight, mandatory teacher certification, curriculum, systems for continuing education, salary scales, and a clear stream of public funding. Birth to 3 Intervention programs have strong quality standards, technical assistance, and oversight to assure effective programs.

While child care, with over 9,000 regulated programs, is the most pervasive ECE service statewide, it has the least amount of infrastructure to support and sustain high quality. Child care operates almost entirely in the private market, where what parents can afford or are willing to pay determines the resources available. Even though there is significant funding going into child care through Wisconsin Shares, the funding is not tied to quality standards, but to basic licensing and regulation primarily geared to assure health and safety.

Home visiting, which has grown in recent years, has not yet developed a statewide system to assure quality services statewide, although progress is being made. Home visiting has established evidence-based best practices, but those key elements to quality have only been incorporated in a fraction of Wisconsin's home visiting programs.

3. A Missing Link: Funding for Child Care Quality

The earlier section on quality showed serious gaps in the child care sector. The trend of funding for child care quality improvement paints a picture of rapid increases from 1994 to 2003, followed by decreases to the point where funding for quality has dropped to one-third of its 2001 level.³⁴ Figure 23 illustrates the trend.

This drop in funding for quality improvement coincided with a significant rise in participation in Wisconsin Shares and a leveling off of federal Temporary Assistance to Needy Families (TANF) and federal child care block grant funding. Essentially, in order to fully fund Wisconsin Shares, funding for quality improvement was reduced to the lowest level allowed by federal child care block grant policies (4 percent of the Child Care and Development Block Grant funding). Child care is the only sector where a separate budget level for quality is determined in the state budget, so it is difficult to track funding dedicated to quality in other sectors.

Figure 23

Wisconsin Child Care Quality Budget					
1994-2011					
1994-1995	\$ 4 million				
1996-1997	\$ 7 million				
1998-1999	\$ 6 million				
2000-2001	\$38 million				
2001-2002	\$33 million				
2002-2003	\$35 million				
2003-2004	\$15 million				
2004-2005	\$13 million				
2006-2007	\$12 million				
2007-2008	\$10 million				
2008-2009	\$10 million				
2009-2010	\$11 million				
2010-2011	\$11 million				

It is clear that the child care sector has serious challenges in meeting high quality standards. It is also clear that child care is a sector with low financial resources, given the size of the child care system. According to the Public Policy Forum's 2008 study of child care providers in southeast Wisconsin, cost as well as low wages and lack of benefits for workers constrain providers from pursuing improvements to child care.³⁵

Key Findings on Quality

- 4K and Services to Children with Disabilities have the highest teacher educational qualifications.
- Head Start and Early Head Start have perhaps the most comprehensive quality standards.
- Child care lags behind on most quality indicators, primarily due to a combination of lower standards and insufficient financing.
- Home visiting has developed excellent quality indicators, but they are not required for most home visiting programs.

Section V: Other ECE Systems

Several states and the U.S. military have developed coherent systems to assure families' access to quality early care and education.³⁶

North Carolina

Smart Start, initiated in 1993, is North Carolina's nationally recognized and award-winning early childhood initiative, with state funding of over \$200 million annually. The Smart Start program is considered by many national experts to be the most comprehensive state early care and education system in the country. Smart Start is a comprehensive, community-based system of early care and education operated through public/private partnerships in each county, with the goal that all children enter kindergarten healthy and ready for success. Smart Start efforts include a quality rating system built into the state's licensing system, major efforts to improve child care teacher education and benefits, and expansion of 4K.

For more information on Smart Start, go to http://www.ncsmartstart.org/index.htm

Pennsylvania

Pennsylvania is getting attention nationwide for its breakthrough efforts to improve child care and early education across the state. The state has taken several steps toward a coherent system, including the following components:

- **Keystone STARS:** Pennsylvania's Keystone STARS program is the largest, most comprehensive voluntary quality rating and improvement program in the nation. The program includes intensive technical assistance, financial incentives, scholarships and wage supplements. Six regional centers help administer the program, providing and coordinating training and technical assistance.
- **Pre-K Counts**: The state enacted Pre-K Counts, its pre-Kindergarten program, has grown rapidly in recent years.
- **Head Start expansion:** Pennsylvania has expanded Head Start to eligible children, and extended Head Start services to full-day and full-year through the Head Start Supplemental Assistance Program.
- **Home visiting**: The state has expanded research-based prevention strategies like home visiting to families with very young children in over half its counties.

For more information, go to: http://www.pakeys.org/docs/Dichter_testimony_3_09.pdf

Illinois

In 2006, Illinois was the first state to pass a bill making preschool available to all 3- and 4-year olds through its Preschool for All program. Preschool for All, which provides universally available, high quality preschool, is being phased in over several years through the Early Childhood Block Grant. What is unique about Illinois' approach is an Early Childhood Block Grant funding mechanism that funds services to at-risk infants and toddlers as well as Pre-K services to at-risk 3- and 4-year-olds. The Block Grant includes an 11 percent set-aside for services to at-risk infants and toddlers, which includes home and center-based Early Head Start services and research-based home visiting services to strengthen families.

Many in Illinois point to the Illinois Early Learning Council, which was established in statute in 2003, as an important catalyst for the Preschool for All plan. To learn more about Illinois efforts, go to http://www.ounceofprevention.org/user_nav.php?EditID=44&Level=2

Massachusetts

Massachusetts has been on the cutting edge of early care and education, moving the agenda dramatically in the last nine years. Early Education for All Campaign was established in 2000 to lay the foundation for a high-quality system of early education in Massachusetts. After years of planning by public and private champions of early education, the House and Senate both unanimously passed an act establishing the Massachusetts Universal Pre-Kindergarten program. The bill called for phasing in high-quality universal early care and education over 10 years, with a diverse delivery system including public and private preschools, child care centers, and family child care. Designed to meet a wide range of family needs, including full-day child care, the design of the program is unique in the U.S.

For more information, go to the Early Education for All website: http://www.strategiesforchildren.org/eea/EEA1 accomplish.htm

U.S. Military Model

The U.S. Military operates a child care program systematically designed to address the problems of affordability and quality. Key components include basic quality standards, a well-developed staff training and compensation system, and strong monitoring for accountability. Many early childhood experts believe that the military's child care system is the best in the nation. Prior to systematic changes starting in 1981, child care problems and deficiencies were prevalent in the military community. For more information on the military model, go to: http://www.childcareexchange.com/library/5016131.pdf

Key Findings From Other Systems

- Other states show that effective ECE systems are possible.
- The U.S. Military transformed its child care system with systematic standards for quality.

Section VI: Options for Wisconsin

A. An Assessment of System Components in Place in Wisconsin

It is clear that Wisconsin does not have a coherent overall system for high-quality early learning and development. The infrastructure for some sectors of early care education is well developed, while there is a minimal system for other sectors.

To analyze the infrastructure Wisconsin has in place, it is instructive to use some of the components described by the Alliance for Early Childhood Finance (described in Section I), with an addition of another component that seems essential to address: administrative system/governance. This paper suggests five key components to form a framework for building a system:

- quality standards,
- professional development,
- monitoring & accountability
- financial assistance to meet standards
- administrative system/governance.

Figure 24 examines key ECE sectors using these five key components. The chart contains an estimate by the author of the strength of the component for each sector *on a statewide basis*: very strong: 3 stars (***); somewhat strong: 2 stars (**); or not strong; 1 star (*).

As Figure 24 illustrates, it is clear that public school 4K programs have a strong infrastructure, with clear governance and state and local financing. Head Start and Early Head Start also has a coherent system governed by the federal government, with a strong system of quality standards, monitoring and financing. In addition, programs for children birth to 5 with disabilities have strong standards, with clear governance and solid federal, state and local financing. The two sectors that appear to be underdeveloped are **child care** and **home visiting**.

Child care is almost entirely a private market system operated by for-profit and not-for-profit businesses, with accountability only through the state child care regulatory system that focuses primarily on health and safety. Child care is the largest sector, but has limited infrastructure and financing to meet quality standards. It is a free-wheeling, private enterprise system, with a hodge-podge of center-based and family-based programs, and very little structure to hold it together.

Home visiting programs have collaborated to share research and successful strategies in the field. However, a statewide system is still in development, resulting in many overlapping efforts or gaps. Wisconsin has done some groundbreaking work on what standards could govern home visiting, best practices for professional development, and accountability—all of which are being applied to a group of state-funded home visiting programs. Nonetheless, not all home visiting programs are able to benefit from collective lessons learned due to the lack of a state system for quality improvement, program development and sustainability.

Figure 24: Statewide Infrastructure Components by ECE Sector

ECE Sector	Quality Standards	Professional Development	Monitoring & Accountability	Financial Assistance to Meet Standards	Administrative System/ Governance
4-year-old Kindergarten	** Strong staff qualifications mandated Local control on most other quality standards Standards vary widely	*** Strong system, with teachers with BAs licensed by DPI, and a continuing education system	* Most monitoring and accountability is through local school boards and districts. Varies widely.	*** State and local public funding is expected to assure a quality product. Several federal funding also go to school districts.	*** Strong public school system with oversight and TA from DPI
Head Start and Early Head Start	*** Strong national performance standards in all key areas of quality.	** Solid professional development system, with on-site technical assistance. By 2011 HS teachers must have BA, 50% by fall 2013. EHS teachers must have CDA & infant/toddler training by fall 2012	*** Federal oversight through Feds enforcement of performance standards.	*** Federal funding expected to assure that performance standards can be met. State funding supplements the program.	** Federal program operated through grants to local agencies.
Services to children with disabilities: Birth to 3 Intervention program and Special Ed. for children ages 3-5	*** National standards are in place Strong state standards. Generally BAs are required for teachers and special educators	*** Solid system, with teachers with BAs licensed by DPI, licensed therapists, and a continuing education system. Strong technical assistance system	*** Federal government requires state performance plans and results Birth to 3 and Special Education have quality improvement systems	*** Combined federal, state and local funds expected to assure quality standards are met	*** Special Education for 3-5 administered through public school system Birth to 3 is administered primarily through county departments and schools
Child Care	* Licensing and certification standards provide floor for health, safety & child development	* Most teachers have high school as highest degree. Many course offerings, but not a coherent professional development system	** Coherent regulatory system monitors programs, primarily for health & safety.	Very minimal funding is directed at meeting quality standards	* Child care is a free market system No substantial administrative structure Skeletal child care resource and referral system.
Home visiting	Programs that follow a proven model have quality standards. Other programs adopt elements of best practice at varying degrees.	* Staff qualifications vary from minimal to high. Professional development available through a variety of sources. Statewide annual conference. Core competencies identified by Children's Trust Fund. No statewide standards.	* Good model for monitoring and accountability by Home Visitation Outcomes Project No statewide system for monitoring or accountability.	Programs depend on a complex and unpredictable collection of funding sources.	Variety of administrative systems: state departments, county depts, public health, private non-profits, etc. No clear statewide administrative structure.

Key Findings on ECE Infrastructure

Strong Infrastructure: 4K, Head Start/Early Head Start, Services to Children with Disabilities

Weak Infrastructure: Child Care and Home Visiting

B. Key Wisconsin Strengths for Building an ECE System

In addition to the strengths of individual systems, Wisconsin has some key infrastructure pieces in place, some of which often cut across ECE sectors.

Model Early Learning Standards for children birth to 5 were developed collaboratively across three state departments, the Wisconsin Early Childhood Collaborating Partners, and the Wisconsin Head Start Collaboration Project.

Professional Licensing: Wisconsin has a fairly comprehensive professional licensing and credential system. The system includes DPI licensure and credentialing via The Registry, Wisconsin's recognition system for the early childhood care and education profession.

Administrative Consolidation: Wisconsin recently consolidated many services under the Department of Children and Families; this should make collaborative planning easier.

Education and Training: A solid statewide system for education and training has been built, including universities, colleges, technical colleges and other organizations. The system is linked to financial aid, scholarships and stipends, including the T.E.A.C.H. Early Childhood Wisconsin program and the R.E.W.A.R.D. program. UW-Extension has a model for training and technical assistance for home visiting programs.

Wisconsin Early Childhood Collaborating Partners is a network of stakeholders working together for 15 years for improved services and an early childhood comprehensive system. Wisconsin has a proud history of working collaboratively across early childhood sectors.

Child Care Resource and Referral: Wisconsin has a statewide system of 15 child care resource and referral agencies covering all counties.

Project on Social and Emotional Foundations for Early Learning: Wisconsin received a three-year technical assistance grant to foster professional development of the early care and education workforce so that they are better able to support the social and emotional development of children birth through 5.

C. Opportunities from the Federal Government

The Early Learning Challenge Fund proposed by President Obama (and making some progress in Congress as of October 2009) provides a set of requirements that states should meet in order to have an effective system of early learning programs. Regardless of the success of the President's proposal, the requirements included may be instructive to Wisconsin's system-building efforts. Key elements include:

Outcome Measures

- Increase the percentages of disadvantaged children in high quality early learning programs
- A process for evaluating school readiness that reflects all the major domains of development
- A coordinated data system to measure progress

Quality Standards

- Comprehensive early learning standards
- A robust quality rating system for ECE program

Improving Early Learning Practices

- Integration of early learning standards into practice in early learning programs
- A system of program review and monitoring to rate providers and improve practices
- A plan for coordinating services for children with development delays and disabilities

Professional Development

- Minimum pre-service early childhood development and education training requirements for providers in early learning programs
- A comprehensive professional development plan with pathways to credentials and degrees

Outreach to Parents and Families

 An outreach strategy for parents and families to engage them in their children's early learning and to help them choose quality options

D. Possible Long-Term Goals for an Effective ECE System

Here are some possible long-term goals for 2020 (developed by the Wisconsin Early Learning Coalition):

- 80 percent of low-income children in Wisconsin Shares are receiving child care services that meet high quality early learning standards
- 80 percent of licensed child care programs meet a set of quality standards above basic regulation levels
- 50 percent of lead teachers in child care centers and licensed family child care providers have a 2- or 4-year degree
- 50 percent of families identified as at risk are served by Early Head Start or home visiting programs meeting quality standards.
- 100 percent of Wisconsin families seeking preschool programming will have access to collaborative, high-quality public 4K.
- All child care and early education programs have curriculum based on early learning standards aligned with elementary school curriculum.
- 60 percent of children with disabilities will be served in natural settings with non-disabled peers.

E. Possible Key Questions for Planning an ECE System in Wisconsin

Overall System Issues

- Should Wisconsin use the Early Learning Challenge Fund proposed requirements for states as a roadmap for key elements?
- Is it realistic to design a single coherent system for Wisconsin early care and education?
- Would it be preferable to shore up service areas- like child care and home visiting- that lack infrastructure?
- Are there some components that could be applied across all sectors? (for instance, quality standards or professional development)
- Should Wisconsin set a future goal for the number or percentage of ECE programs meeting high quality standards and the number of children served by them? Also for the number or percentage serving children from disadvantaged backgrounds or with developmental delays or disabilities and the number of at-risk children served?
- Once future goals are set for an ECE system, what are priorities for initial action? What is the logical sequence of building components of the system?

Quality Standards

- Should each ECE sector area have its own quality standards?
- Should home visiting or itinerant services have separate sets of quality standards because they are a very different type of services from out-of-home child care and preschool programs? Should the state system give preference to proven or evidence-based models?
- Should some or all standards be established at least as a goal for all similar services areas?
- Since there are proposals for a quality rating and improvement system for child care on the table, what should the quality standards look like? Should they apply only to child care?
- Should quality standards focus on the key areas with research evidence linked to overall quality? Those key elements are highly skilled teachers, small class sizes and high adult-to-child ratios, a curriculum focused on children's development and learning, parent engagement, and attention to health and safety.
- Should quality standards for children with developmental delays or disabilities be established for all ECE programs?

Professional Development

- Should Wisconsin set a future goal for the number and percentage of early care and education teachers and directors meet a particular standard in staff qualifications?
- Should Wisconsin develop a professional development system that provides a coherent pathway for providers/teachers to credentials and degrees, regardless of their existing qualifications?
- Should Wisconsin expand specific training and technical assistance related to early learning standards that helps transform the standards into sound practices across ECE sectors?
- Should special emphasis be put on training and technical assistance to meet the social-emotional needs of infants and toddlers and on inclusive settings for children with development delays or disabilities?
- Research shows that to change actual practices with children, sound training linked to on-site technical assistance/consultation and/or mentoring is most effective. Should Wisconsin envision a system of training and technical assistance consistent with the research?

Monitoring and Accountability

- How should Wisconsin measure its progress in improving early learning and development opportunities for children? What benchmarks should be set?
- What data needs to be collected on:
 - o The quality of ECE programs?
 - o The children and families participating in ECE programs
 - o Professional qualifications, wages and benefits of teachers/providers?
 - o School readiness?
 - o Program implementation standards?
 - o Affordable access to services in general and to high quality services, with breakouts by age group and for at-risk populations?

Financial Assistance to Meet Standards

- What are the most effective approaches to financing higher quality?
 - o Setting quality standards, and then assuring adequate funding to meet the standards?
 - o Creating fiscal incentives for programs to move toward higher standards?
 - o Providing targeted grants to programs to help them move to higher levels of quality?
- Research shows that salaries and benefits are highly related to a quality workforce.
 - What funding mechanisms help individuals become highly qualified prior to joining the ECE workforce?
 - o What funding mechanisms help individuals improve qualifications once they are in the workforce?
 - o What funding mechanism help retain qualified staff
- Eligibility to funding assistance varies across sectors: some programs are universal and free, some are targeted to particular child or family characteristics. To what extent should services be universal? To what extent can we create more uniform eligibility for funding across programs?
- Several states have public/private partnerships to increase revenue for early care and education? Is this possible in Wisconsin?

Administrative System/Governance

- What mechanism(s) can ensure effective coordination across departments and sectors and the most effective use of existing funding?
- What services delivery model or models should operate in the system?
- What are state government roles and what are local or regional roles in a system? How does funding flow through the system? How much is controlled at the state level and how much at a local level?
- Should Wisconsin create a regional or local system to plan and coordinate services at the local level?
- How can an ECE system be designed to engage local philanthropists, businesses, and civic organizations in public/private partnerships?
- Is it possible or desirable to merge funding streams to ease use of multiple funding streams at the delivery level?

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Endnotes

¹ The Collaborating Partners website: http://www.collaboratingpartners.com/index.html

http://nces.ed.gov/programs/coe/2008/section1/indicator02.asp

¹⁰ Notes on estimates of children in care:

- Certified child care= 3446 programs x 6= 20,676 capacity x.66 (assuming 6 children per program served and 2/3 of children under 5)
- Licensed family child care= 23,688 licensed capacity x .66 (assuming 2/3 of children under 6)
- Licensed group child care= 142,021licensed capacity x .66 (assuming 2/3 of children under 6)
- Other counts are actual counts of children served (Head Start & Early Head Start, 4K, Special Education 3-5, and Birth

An undetermined number of children are served in more than one setting, leading to duplicate counts.

- Data from the Department of Public Instruction website: http://www.dpi.state.wi.us/ec/ec4yrpag.html
- ¹² National Institute for Early Education Research, The State of Preschool 2008: http://nieer.org/yearbook/
- ¹³ Graph provided by Department of Children and Families: http://dcf.wi.gov/childcare/wishares/spfcs.htm
- ¹⁴ Head Start data are from the Wisconsin Head Start Association.

- ¹⁶ Data from Wisconsin Department of Public Instruction: http://dpi.wi.gov/sped/ccreports.html.
- ¹⁷ Wisconsin Department of Health Services, Birth to 3 Program.

Family Support.

²¹ Center on the Developing Child at Harvard University (2007), A Science-Based Framework for Early Childhood Policy: Using Evidence to Improve Outcomes in Learning, Behavior, and Health for Vulnerable Children. http://www.developingchild.harvard.edu

The key studies referred to include: (1) Center on the Developing Child at Harvard University (2007) A Science-Based Framework for Early Childhood Policy: Using Evidence to Improve Outcomes in Learning, Behavior, and Health for Vulnerable Children. Website: http://www.developingchild.harvard.edu; (2) Galinsky, E. (2006) The Economic Benefits of High-Quality Early Childhood Programs: What Makes the Difference. Washington, DC: Committee for Economic Development, Website: http://www.ced.org/docs/report/report_prek_galinsky.pdf; (3) Espinoza, L. (2002) NIEER Policy Brief, High Quality Preschool: Why We Need It and What It Looks Like, and (4) Barnett. W.S., Hustedt, J.T,

Friedman, Ed. M., Boyd, J.S., & Ainsworth, P. (2007) The State of Preschool 2007: State Preschool Yearbook. Website: http://nieer.org/ ²³ Testimony of Deborah Daro, Ph.D., Chapin Hall at the University of Chicago, "Home Visitation: The Cornerstone of Effective Early Intervention." June 9, 2009, US, House of Representatives Ways and Means Committee, Subcommittee on Income Security and

²⁴ Riley, D.A., Roach, M.A., Adams, D.B., & Edie, D. (2001). Wisconsin Child Care Research Partnership Brief #6, Quality of subsidized child care in Wisconsin, Madison, WI: University of Wisconsin-Extension.

² Mitchell, A. & Stoney, L. Alliance for Early Childhood Finance, 2006. http://www.earlychildhoodfinance.org/mitchell.htm

³ NY Times article, "Racial Gap in Testing Sees Shift by Region: http://www.nytimes.com/2009/07/15/education/15educ.html

⁴ Annie E. Casey Foundation, Kids Count Data Center: http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?ind=62 ⁵ National Center for Education Statistics, Early Education and Child Care Arrangements of Young Children:

⁶ Sources: Krumenauer, G. & Deller, S., "Early Childhood Care and Education: Economic Impact in Dane County": http://www.cityofmadison.com/commserv/pdf/ECE-EconImpactDC.pdf; and preliminary data from the Public Policy Forum's look at economic impact in Milwaukee county, updating findings from a 2002 report by Levine & Fendt: http://www4.uwm.edu/ced/publications/childcare.pdf

⁷ A rough estimate of the statewide economic impact of ECE, extrapolating from Dane and Milwaukee county impact studies used the following data and assumptions. Milwaukee and Dane county have child care programs with capacity to serve the number of children that are 35% of the state total (60,444 out of 172,188 as of January 2009). To estimate statewide impact, the \$673 million economic benefit in combined Milwaukee and Dane counties is multiplied by 2.8= \$1.88 billion. This figure does not include the impact of other ECE programs, so it seems like a conservative estimate.

⁸ Department of Children and Families website: http://dcf.wisconsin.gov/childcare/licensed/SummaryReports/2008.htm

⁹ Estimates of children under age 3 in child care settings used an assumption that 30% of children in regulated care were under age 3. and estimated that the number of children served in child care equaled the regulated capacity of licensed and certified child care providers.

¹⁵ Barnett, W.S., Epstein, D.J., Friedman, A.H., Boyd, J.S., & Hustedt, J.T. (2008). The State of Preschool 2008. National Institute for Early Education Research, Rutgers Graduate School of Education.

¹⁸ Federal IDEA data: https://www.ideadata.org/TABLES31ST/AR 8-14.xls and https://www.ideadata.org/TABLES31ST/AR 1- $\frac{16.xls}{^{19}} \ UW-Extension \ home \ visiting \ website: \\ \underline{http://www.uwex.edu/ces/flp/homevisit/directory/stateaction.cfm}$

²⁷ NAEYC accreditation website: http://www.naeyc.org/accreditation/search

²⁹ National Center for Early Development and Learning. (2005) Pre-Kindergarten in Eleven States:

³¹ Early Years Home Visitation Outcomes Project: http://www.uwex.edu/ces/flp/homevisit/evaluation/pdfs/early_years.pdf

http://www.sohe.wisc.edu/outreach/wccrp/pdfs/trends.pdf; Wisconsin Head Start Association for Head Start teacher qualifications. 33 National Education Association statistics: http://www.nea.org/assets/docs/09rankings.pdf; and Wisconsin Child Care Research Partnership policy brief # 16: http://www.sohe.wisc.edu/outreach/wccrp/publications.html

³⁴ "Quality" budget items include items that are intended to improve the quality and supply or child care services, provide information to consumers, and promote health and safety, including: professional development (scholarships and salary stipends), licensing and regulation, Child Care Resource and Referral, technical assistance, quality or start-up grants to providers, quality grants to local communities, and related items. In past budgets these were sometimes referred to as "indirect child care." The budget comparison is for budget developed for the use of federal and state Child Care and Development Fund (CCDF) dollars. This comparison does not include other budget items related to child care. The budget totals are not controlled for inflation. A large percentage of the budgets for 2000-01 through 2002-03 was for quality grants to local communities that provided local match: \$26 million in 2000-01, \$25 million in 2001-02, and \$17 million for 2002-03.

³⁵ Public Policy Forum, Child-Care Provider Survey Reveals Cost Constrains Quality, 2008. http://www.publicpolicyforum.org/pdfs/ProviderSurveyBrief.pdf

For more information on models for ECE systems go to: http://www.wccf.org/pdf/fact_sheet_1_state_early_learning_initiatives.pdf and http://www.sohe.wisc.edu/outreach/wccrp/pdfs/policy02041.pdf

²⁵ Wisconsin Child Care Research Partnership issue briefs #8 & 9: http://www.sohe.wisc.edu/outreach/wccrp/publications.html

²⁶ Wisconsin Child Care Research Partnership issue brief #11: http://www.sohe.wisc.edu/outreach/wccrp/publications.html

²⁸ National Institute for Early Education Research, The State of Preschool 2008: http://nieer.org/yearbook/

http://www.fpg.unc.edu/ncedl/pdfs/SWEEP MS summary final.pdf

30 U.S. Department of Health and Human Services (2005) *Head Start Impact Study First Year Finding;* and U.S. Department of Health and Human Services (2003) Head Start FACES 2000: A While-Child Perspective of Program Performance.

³² Sources for data on teacher qualifications: Department of Public Instruction for 4K teacher qualifications; Wisconsin Child Care Research Partnership for child care teachers and family child care providers-