Starting Points: State and Community Partnerships for Young Children

Michael H. Levine
Susan V. Smith

In 1994, Carnegie Corporation of New York released a report called Starting Points: Meeting the Needs of Our Youngest Children, which presented research evidence on a “quiet crisis” confronting children under age three in the United States. The report concluded that “an epidemic of inadvertent neglect” characterized the nation’s response to children’s fundamental needs, and it launched a challenge to America’s pivotal sectors to take action to advance four key goals: preparation for responsible parenthood, improved preventive health care, quality child care, and stronger community planning and supports for young families.

The report received front-page coverage in many newspapers, and its findings contributed to the legislation that established the Early Head Start (EHS) program. (See the article by Fenichel and Mann in this journal issue.) Soon after, the 1994 congressional elections shifted additional responsibility and authority for social policy toward the states, and welfare reform legislation was enacted. Cognizant of these policy trends, Carnegie Corporation developed the Starting Points Initiative, which used both national and site-specific strategies to:

1. Promote better understanding among policymakers, parents, and the public of the importance of the early childhood years;
2. Encourage and monitor program and policy innovations in the field of early childhood; and
3. Support emerging state and local leaders in early childhood education, health, and parent support.

This article offers a brief overview of the initiative and the lessons that have emerged from it.
Research and Public Education

On the national level, the Starting Points Initiative brought key research evidence about the needs of young children to the attention of policymakers and the public. Evidence from neuroscience, and developmental and cognitive psychology focused on the early years of life, was showcased at a national conference and in a report called *Rethinking the Brain: New Insights into Early Development*, while other reports highlighted practical lessons about successful community mobilization from public health and community education campaigns. The Starting Points Initiative forged partnerships with governors, mayors, legislators, and other state and local policymakers to advance early childhood reforms and collaborated with the Clinton administration in the planning of two White House conferences on early childhood development held in 1997.

Carnegie Corporation and a consortium of more than a dozen philanthropies and corporations also supported the national public awareness campaign, *I Am Your Child*, led by Hollywood film actor-director Rob Reiner and the New York City-based Families and Work Institute. The campaign disseminated research reports, community planning guides, videotapes, and a CD-ROM for parents of young children on early childhood and brain development; and it helped shape a special edition of *Newsweek* magazine titled *Your Child: Birth to Three*. As a complement to these national activities, state-based coalitions carried early childhood messages and materials to parents and practitioners in local communities.

State and Community Partnerships for Young Children

In selected states and cities, the Starting Points Initiative sought to turn research and public awareness into action by building state and city leadership networks for program and policy improvements. In 1996, Carnegie Corporation launched a program of competitive grants called the Starting Points State and Community Partner-
Starting Points

Starting Points State and Community Partnerships for Young Children

Major Project Components

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<th>Sites</th>
<th>Goal 1: Promote Responsible Parenthood</th>
<th>Goal 2: Guarantee High-Quality Child Care Choices</th>
<th>Goal 3: Ensure Good Health and Protection</th>
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<td>Expand comprehensive family resource centers</td>
<td>Develop parenting education and/or leadership training programs</td>
<td>Build high-quality child care systems</td>
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<td>Create professional development and standard-setting systems</td>
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<td>Strengthen public/private partnerships for planning and sustainability</td>
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Summary by the authors of the activities undertaken by the Starting Points sites during full implementation of the initiative, circa 1999–2000.

ship for Young Children. Initial funding supported alliances in 10 states and 6 cities that sought to implement the reforms called for in Starting Points. In 1998, seven of those states and four cities received grants to continue their work for two more years.

The initiative was designed to be catalytic, so the grants it provided were modest in size. A total of approximately $10 million in private funding was allocated over the four years, from Carnegie Corporation and local funding partners. Local foundation, business, media, university, and community leaders joined policymakers, parents, and professionals in attempting to design and sustain useful innovations and chart progress toward meeting the needs of families and young children. (See Table 1 for an overview of the major components of each project.) A forthcoming study by the National
Starting Points Centers offer health screening and care, parent and preschool education, information and referral services, employment counseling, home visiting outreach programs, and developmental screening.

Center for Children in Poverty highlights the progress in the sites and the major challenges to sustaining meaningful reforms.9

The accomplishments and the challenges that define this work are illustrated here in the work of two sites: Rhode Island and West Virginia. The Rhode Island effort illustrates how comprehensive legislation can create a framework for improving early childhood programs and policies statewide, while West Virginia’s effort has created and expanded community-level programs for families with young children.

Rhode Island

Rhode Island’s Starting Points project brings together an unusual public-private partnership involving the Governor’s Office; the Rhode Island Departments of Health, Human Services, and Elementary and Secondary Education; the Rhode Island Foundation; the United Way of Southeastern New England; and Rhode Island KIDS COUNT, a statewide children’s policy and advocacy organization. This leadership group came together in 1996, when comprehensive reforms in child care and health care for young children and families were being crafted by the Governor’s Office and state legislative leaders.

Strengthening Child Care for Low-Income Families

In 1997, Rhode Island passed the Family Independence Program, model welfare reform legislation that emphasized the need for child care for parents returning to work by establishing entitlements to child care subsidies for low-income families. To improve the availability of good child care, the state also sought to increase the professionalism of the entire child care workforce. The legislation turned a spotlight on the critical role that family child care providers play in Rhode Island, as they do elsewhere, recognizing that child care providers constitute a significant subgroup within the ranks of the working poor. In response, Rhode Island became the first state in the nation to provide health care coverage to licensed family child care providers and their children.

Building on that beginning, in 1998, the state legislature passed comprehensive legislation that promoted the availability and affordability of high-quality child care. The program, Starting RIght, expanded the eligibility guidelines for child care subsidies to include families earning up to 225% of the federal poverty level and established child care networks to provide high-quality child care, health, mental health, and other social services to low-income children. To strengthen the child care system overall, Starting RIght extended health insurance coverage to staff working in child care centers, raised the rate the state pays to child care providers, and expanded funding for child care career development activities.

Broader Policy Reforms

These investments to improve child care were one aspect of broader efforts to use federal Medicaid and welfare funding in innovative ways. For instance, Rhode Island’s health care program, RIte Care, significantly increased the number of children receiving health insurance. RIte Care produced rapid positive health results, including increased access to prenatal care, a decrease in smoking during pregnancy, and increased birth intervals.7,8

Rhode Island has emerged as a national leader in the development of public policies that serve low-income families with young children.9 A key factor is the potent combination of people who worked on the reforms, including the skillful advocates at Rhode Island KIDS COUNT, leaders from the foundation sector and United Way, and insiders at all levels of state government.

Challenges Ahead

As Starting RIght and RIte Care are being implemented statewide and enrollments grow, the state must find financing streams to sustain these initiatives, even when an economic downturn hits. Governor Lincoln Almond, the legislature, and other groups are working...
to ensure that the state’s increased investments in early care and education will continue. With the new investments has come an increased commitment to measuring results, particularly with regard to school readiness. Rhode Island is developing reliable indicators to track child and family outcomes. The consensus built by leaders in the state brightens hopes that they can sustain the progress they have made in advancing a comprehensive early childhood initiative.

**West Virginia**

West Virginia has been a pioneer in developing cost-effective, innovative programs for children over the past decade. Its Governor’s Cabinet on Children and Families, the first in the nation when it was established by former Governor Gaston Caperton in 1990, was created to reduce program fragmentation through a new system of family supports capable of responding flexibly to community priorities. In 1991, the cabinet established Family Resource Networks, which are local hubs that promote the planning, coordination, and improvement of comprehensive health, education, and social services. In 1996, with support from foundations and federal and state agencies, these networks began to provide expanded programs and services from the prenatal period through school entry through Starting Points Centers.

**Starting Points Centers**

Comprehensive centers were established within the Family Resource Networks in 18 of West Virginia’s most isolated communities, where families often travel long distances to access basic health and education services. Reflecting the *Starting Points* report’s recommendation that communities mobilize to create neighborhood family and child supports, the Starting Points Centers offer health screening and care, parent and preschool education, information and referral services, employment counseling, home visiting outreach programs, and developmental screening. Preliminary evaluation data show strong participation by low-income families; improvements in child health insurance coverage, immunization rates, and parenting skills; and increased use of nutrition and other community services.

In July 1997, West Virginia’s Starting Points Centers received a National Governors’ Association award for outstanding design and innovation. Governor Cecil...
New options for balancing public-private sector responsibilities are needed, as are new financing strategies and new mechanisms for governing and monitoring statewide and citywide children’s initiatives.

Underwood, a Republican who assumed office in 1997, championed the establishment of centers in each of the state’s 55 counties, gaining funding from the state legislature for an initiative that began under a Democratic administration. With the skillful leadership of entrepreneurial staff members and support from the legislature and community and parent groups, the governor’s cabinet is developing innovative financing strategies to sustain and expand the centers.

Challenges Ahead
In West Virginia, a rural state with a very modest tax base and widespread intensive need for parenting and income supports, it will not be easy to secure the long-term viability of the Starting Points Centers. Challenges include finding resources to establish centers to reach all of West Virginia’s counties, while improving the quality of the services provided at the centers. Tough choices must be made to keep the momentum for early childhood program and policy reforms moving forward, especially given the election of a new governor in 2000 and turnover among supportive state legislators who face term limits. As in Rhode Island, legislators have demanded information on the effects of their early childhood investments on young children, yet little reliable outcome data exists.

The West Virginia team must also provide local program leaders with dependable information and guidance about programs that work, while paying attention to the need for local decision making and innovation. This tension between state and local control is not unique to West Virginia; rather it is a balancing act that states and communities, that are engaged in early childhood program and policy planning, confront on a daily basis.

Sustaining the Momentum
In considering how the reform efforts stimulated by the Starting Points Initiative may unfold over the next several years, a few themes stand out.

Sustaining Public Awareness
Public understanding of the importance of the early years has grown substantially over the past five years, as measured by public opinion surveys and analyses of legislation and business sector activities. To build on the momentum stimulated by Starting Points and related early childhood initiatives, the sustained attention of policymakers, elite opinion leaders, and the general public will be critical. The public’s attention span can be short, however. New generations of policymakers, media, business, and community leaders, as well as new parents, must be engaged in the cause.

Relying on Public-Private Partnerships
The heightened interest in early childhood at the national, state, and local levels since 1995 is in large part due to alliances among government, philanthropy, and the private sector, and these alliances have been an important feature of many of the Starting Points’ state and city projects. Some notable policy and program innovations have helped galvanize this approach, but such partnerships face challenges as well. New options for balancing public-private sector responsibilities are needed, as are new financing strategies and new mechanisms for governing and monitoring statewide and city-wide children’s initiatives.

Keeping Quality Programs at the Center
Parent education, child care, and health programs are all under substantial pressure to adjust to changing community circumstances. As the pressure to keep parents of young children in the labor market continues and the demand for child care rises, the quality of many child care programs may suffer. Many sites, for example, report a crisis-level need for infant care of reasonable quality. Teachers and caregivers often receive low pay, face increasing demands, and are not informed of evidence-based best practices. Improving program quality while increasing supply is a daunting challenge. Even so, in the long run, an emphasis on high-quality services is essential to sustaining public understanding and support for new investments in early childhood.
Developing New Measures to Track Progress

States and localities across the nation face demands to demonstrate child and family outcomes as quickly as possible. However, successful program improvement and policy reform efforts must be viewed as part of larger systemic reforms needed in education and health that will take time. Moreover, few appropriate and reliable indicators of young children’s progress exist. As one response, many states are now developing and testing new interim indicators to track child and program results, which must now be synthesized in a “ready-to-use” format and disseminated widely.

Starting Points: A Comprehensive Blueprint

The Starting Points report introduced a new conceptualization of the needs of families and very young children from the prenatal period through the critical early years that focused on the interplay between healthy development, learning, and parenting behavior. The Starting Points vision of preparation for responsible parenthood, improved preventive health care and quality child care, and stronger community planning and supports for young families, still provides a solid blueprint for action.14

A variety of policy, program, and public education innovations are now being disseminated to share the best practices stimulated by the Starting Points Initiative. The strategies developed by these sites, and insights into the challenges they face, can guide the planning of private- and public-sector initiatives across the nation that respond to the needs of young children and their families.15

ENDNOTES

1. The authors were formerly with Carnegie Corporation of New York, respectively as Senior Program Officer and Deputy Chair, Education Division; and Program Associate, Education Division. They were responsible for the development and implementation of the Starting Points Initiative.


15. A complete list of Starting Points products, including those prepared by national, state, and city partners, can be obtained by contacting Carnegie Corporation of New York at http://www.carnegie.org or (212) 371-3200, or The Finance Project at http://www.financeproject.org or (202) 628-4200.