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002. memo	re: Home Visitation Event and Roundtable Discussion [partial] (2 pages)	02/10/1998	b(6)
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Child Care for Young Children: Quality

"Recent brain research suggests that warm, responsive child care is not only comforting for an infant; it is critical to healthy development."

- Rethinking the Brain: New Insights into Early Development
Families and Work Institute (1997)

● **Higher quality child care for very young children (0 to 3) was consistently related to high levels of cognitive and language development.** "Mother-Child Interaction and Cognitive Outcomes Associated with Early Child Care", NICHD Early Child Care Research Network (1997)

● **Studies have raised concerns about the quality of care:**

- A four-state study of quality in child care centers found **only one in seven (14%) were rated as good quality.** *Cost, Quality and Child Outcomes in Child Care Centers, (Executive Summary)* University of Colorado at Denver (1995)
- **Thirteen percent of regulated and 50 percent of nonregulated family child care providers offer care that is inadequate.** *The Study of Children in Family Child Care and Relative Care*, Families and Work Institute (1994)
- **"The quality of services provided by most centers was rated as barely adequate."** *The National Child Care Staffing Study* (Executive Summary), National Center for the Early Childhood Workforce (1989)

● **"[M]any children living in poverty receive child care that, at best, does not support their optimal development and, at worst, may compromise their health and safety."** *New Findings on Children, Families, and Economic Self-Sufficiency*, National Research Council, Institute of Medicine (1995)

What Works to Improve the Quality of Child Care

● **Children who receive warm and sensitive caregiving are more likely to trust caregivers, to enter school ready and eager to learn, and to get along well with other children**. . . To ensure that child care settings nurture children, protect their health and safety, and prepare them for later school success, better qualified staff are essential." *Starting Points: Meeting the Needs of Our Youngest Children*, Carnegie Task Force on Meeting the Needs of Young Children (1994)

● **"[S]maller group sizes, higher teacher/child ratios and higher staff wages result in quality child care.** Outcomes for children are also better when they attend programs that include a curriculum geared to young children, well prepared staff and where parents are involved in programming." *Early Childhood Care and Education: An Investment That Works*, National Conference of State Legislatures (1997)

● **Any child care setting will benefit from a health consultant**. . . to advise on potential infectious diseases, explain symptoms and treatments to families, plan health alert procedures when infectious disease occurs, and assist with public health reporting requirements. *Caring for Infants and Toddlers in Groups*, Zero to Three: National Center for Infants, Toddlers and Families (1995)

● **States with stronger licensing requirements had a greater number of good-quality centers** according to recent research. *Cost, Quality and Child Outcomes in Child Care Centers*, University of Colorado at Denver (1995)

● **Voluntary conformity to higher standards through professional center accreditation or through meeting another set of quality standards also increased the likelihood of higher classroom quality.** *Cost, Quality and Child Outcomes in Child Care Centers*, University of Colorado at Denver (1995)

For additional information, contact the National Child Care Information Center at (800) 616-2242 or visit the Web site at ***http://ericps.crc.uiuc.edu/nccic/nccichome.html***

A Profile of the Child Care Work Force

Approximately three million child care teachers, assistants, and family child care providers in the U.S. care for 10 million children each day.

Who are the child care teaching staff?

97% are female
41% have children
10% are single parents

● Child care teaching staff earn an average of $6.89 per hour or $12,058 per year (based on 35 hours per week and 50 weeks per year) (data from *Cost, Quality and Child Outcomes in Child Care Centers*, Technical Report 1995, salary data are in 1993 dollars).

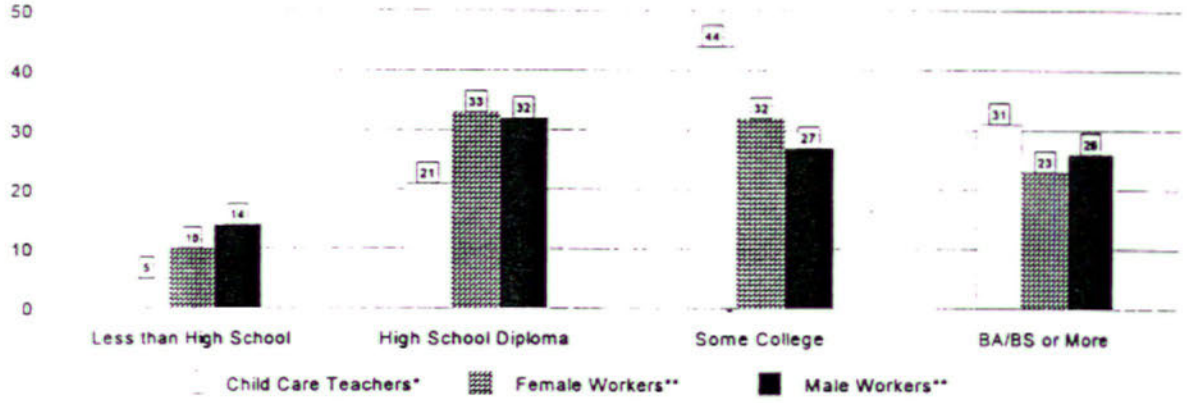
● Only 18 percent of child care centers offer fully paid health coverage to teaching staff.

● Although they earn lower wages, child care teachers are better educated than the general population.

● One-third of all child care teachers leave their centers each year.

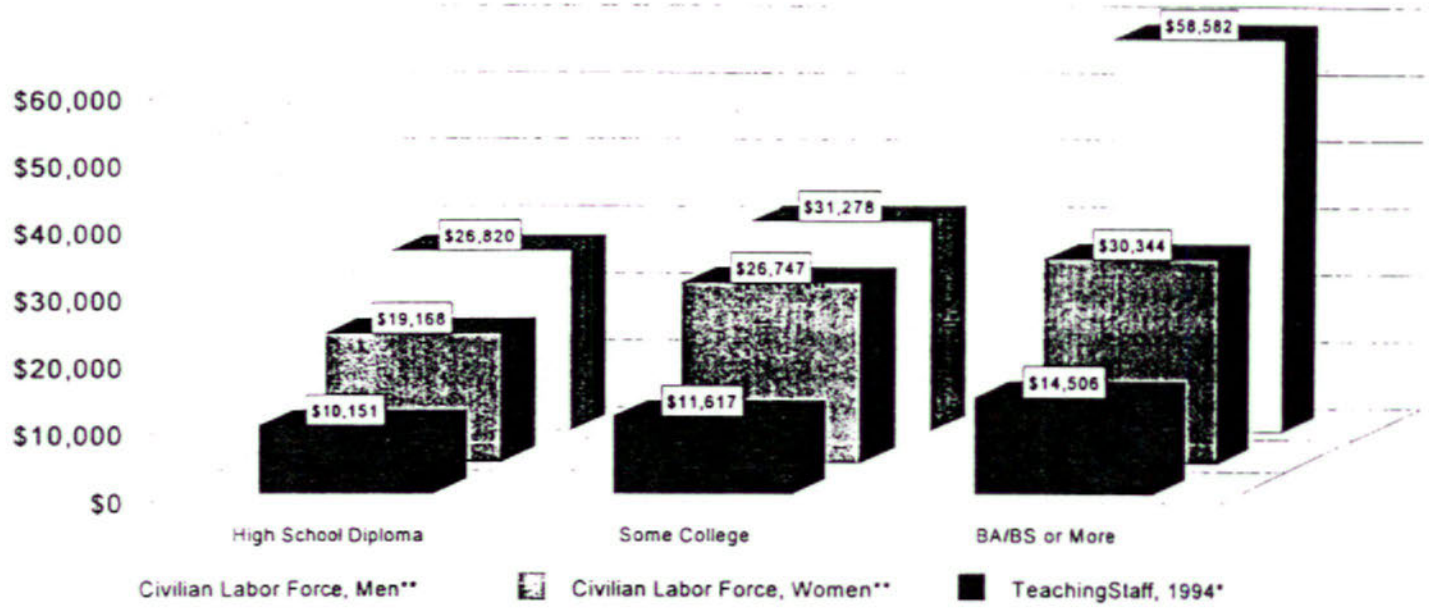
● Family child care providers who care for and educate young children in their homes also have very low earnings. Providers earn $9,528 annually after expenses (data from *The Economics of Family Child Care Study*, a forthcoming publication from Wheelock College, earnings in 1996 dollars). Unregulated providers, who care for fewer children and are offered fewer supports; earned just $5,132 after expenses.

Education of Child Care Teaching Staff Versus All Workers***



*National Child Care Staffing Study **Current Population Surveys, 1995. Bureau of Labor Statistics, U.S. Department of Labor

Annual Wages of Child Care Teaching Staff Versus All Workers***



*National Child Care Staffing Study, wages in 1996 dollars **Current Population Surveys, 1996 Bureau of Labor Statistics, U.S. Department of Labor

****These charts only provide information on center-based teaching staff.*

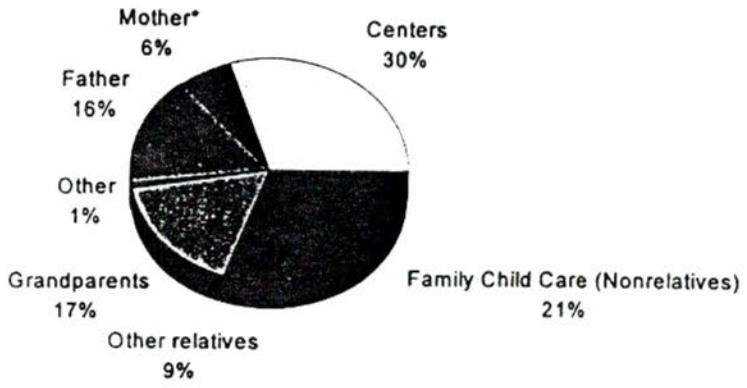
This fact sheet is primarily excerpted from materials developed by the National Center for the Early Childhood Work Force (NCECW). (phone: 202-737-7700; E-mail: **ncecw@ncecw.org**).

Child Care for Young Children: Demographics

- According to the National Center for Education Statistics, in 1995 there were approximately 21 million infants, toddlers, and preschool children under the age of six in the U.S., more than 12.9 million of these children were in child care.†
- Forty-five percent of children under age one were in child care on a regular basis.†
- While use of center-based care increased from 1988 to 1993, most young children are still in a home-based setting, including family child care.**

Primary Child Care Arrangements Used by Families with Employed Mothers for Preschoolers: 1993

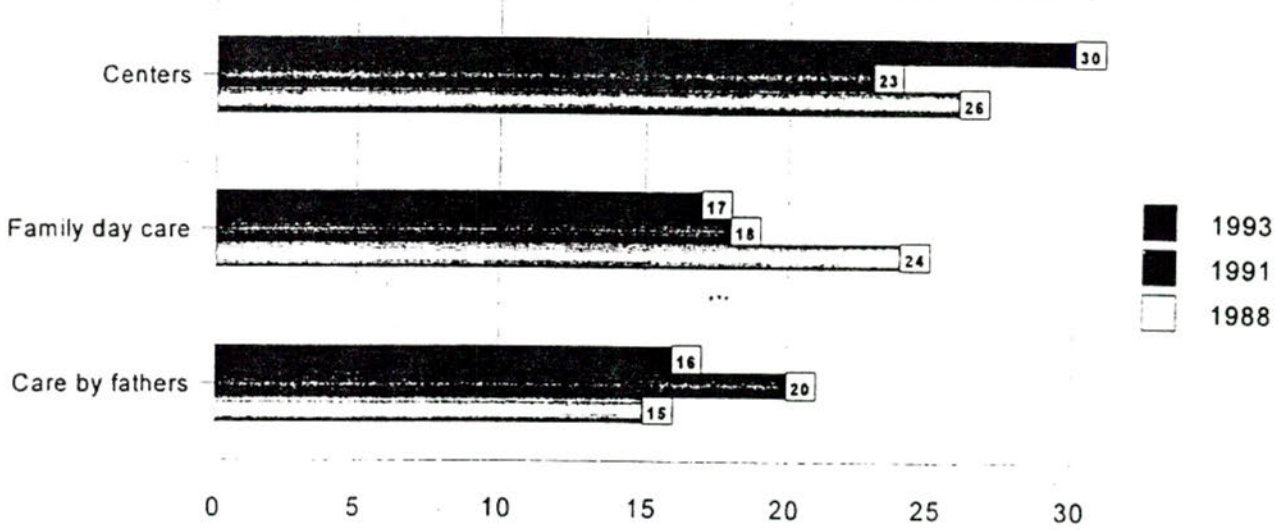
(Percent of preschoolers of working mothers in selected arrangements)



* Includes mothers working at home or away from home. Source: Casper, L.M. *Who's Minding Our Preschoolers?* U.S. Bureau of the Census, Current Population Reports, P-70, no. 53, Washington, DC 1996

Changes in Selected Child Care Arrangements: 1988 to 1993

(Percent of preschoolers of working mothers in selected arrangements)



Source: Casper, L.M. *Who's Minding Our Preschoolers?* U.S. Bureau of the Census, Current Population Reports, P-70, no. 53, Washington, DC 1996

This profile of child care demographics has been excerpted from information provided by the † National Center for Education Statistics, U.S. Department of Education and the **U.S. Bureau of the Census.

For additional information, contact the National Child Care Information Center at (800) 616-2242 or visit the Web site at ***http://ericps.crc.uiuc.edu/nccic/nccichome.html***

Out-of-School Time
School-Age Care

According to the Bureau of the Census, in 1997 there were 38.8 million children between the ages of 5 and 14 years living in the U.S. There are approximately 24 million school-age children with parents in the workforce or pursuing education (based on 1993 SIPP data from the Bureau of the Census).

Care Arrangements of School-Age Children

● Experts estimate that **nearly 5 million school-age children spend time as latchkey kids without adult supervision during a typical week.**

● **Approximately 1.7 million children in kindergarten through grade 8 were enrolled in 49,500 formal before- and/or after-school programs in 1991,** according to the National Study of Before and After School Programs.

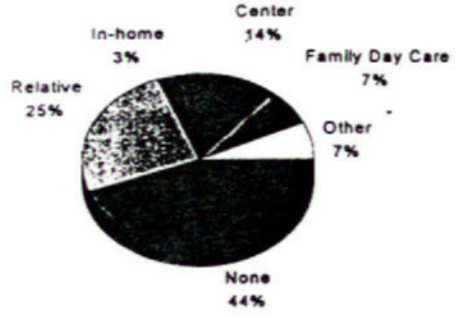
● In 1993-94, according to the National Center for Education Statistics, there were 18,111 before- or after-school programs in public schools--70% of public schools did not offer extended learning programs.

● School-age children are likely to spend time in many different care arrangements. According to the National Child Care Survey (1990), **76 percent of school-age children with an employed mother spend time in at least two child care arrangements during a typical week, in addition to their time in school.**

● According to the National Child Care Survey, children aged 5 to 12 with employed mothers use the following types of supplemental care: 7% are in family day care; 14% are in centers, 3% are cared for by in-home providers, 25% are cared for by relatives and 44% do not use supplemental care.

Use of Supplemental Care,

Children 5 to 12 with Employed Mothers



The Effects of Out-of-School Time on Children

● Children under adult supervision in a formal program during after-school hours have demonstrated improved academic achievement and better attitudes toward school than their peers in self- or sibling care. Miller and Marx, 1990 in *Supplement o the National Assessment of Chapter 1*

● Youth are at greatest risk of violence after the regular school day. Youth between the ages of 12 and 17 are most at-risk of committing violent acts or being victims between 2:00 pm and 6:00 pm--a time when they are not in school. *Fight Crime: Invest in Kids*, 1997

The most frequently mentioned barrier to participation is the parents' inability to pay the tuition and fees charged by programs. Other barriers include availability, quality of activities, inadequate facilities, transportation, high staff turnover, hours of the program and lack of resources.

Components of Successful Before- and After-School Programs include: linkages between after-school and regular school programs, children's participation in age appropriate learning activities, hiring of qualified staff, low student-staff ratio, involvement of parents, program evaluation and coordination with the schools and other community organizations.

For information on what states and communities are doing to meet the need for school-age care, contact the National Institute on Out of School Time (formerly the School-Age Child Care Project), Center for Research on Women, Wellesley College at (617) 283-2547 or visit the World Wide Web site at: http://www.wellesley.edu/WCW/CRW/SAC/. For additional information on extended learning in after-school programs in schools, contact the U.S. Department of Education, please call (800) USA-LEARN or visit the World Wide Web site at: http://www.ed.gov/PFIE.

Economics of Child Care

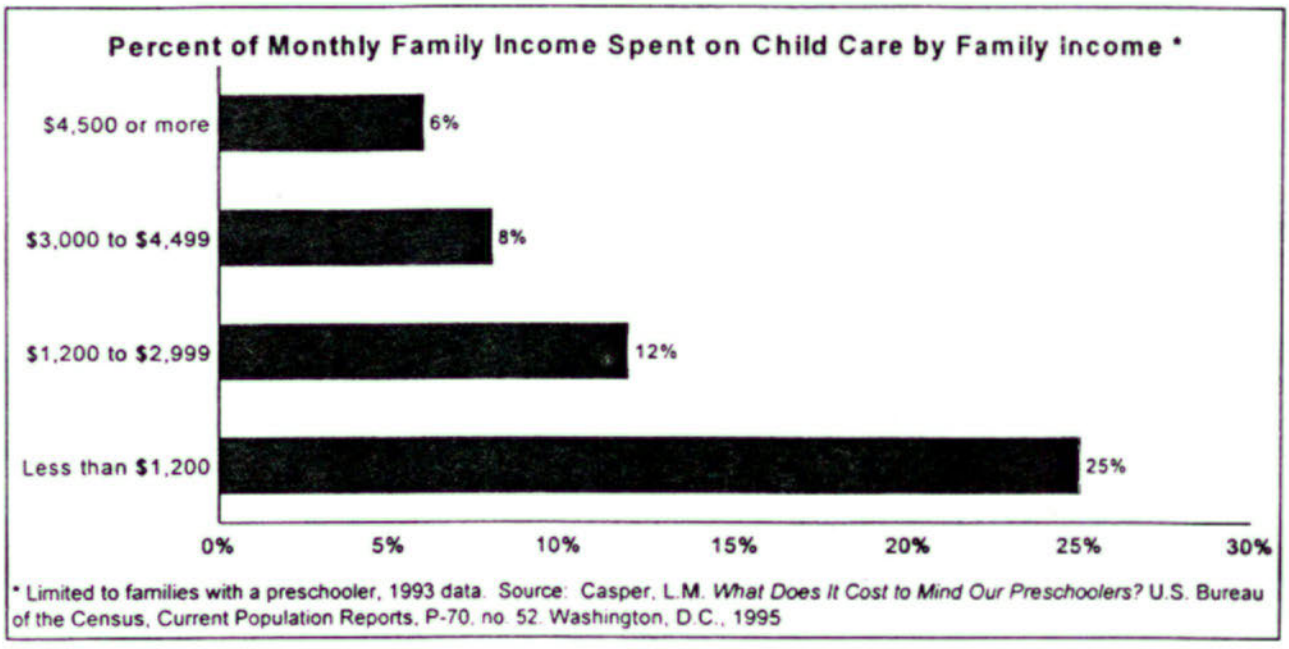
● In 1994, 62% of married mothers with a child under age six were in the workforce, compared with 30% in 1970.†

● The increased employment of mothers outside the home has led to a sharp increase in the use of child care over the past several decades. Eight of 10 employed mothers with children under six are likely to use some form of nonparental child care arrangement.†

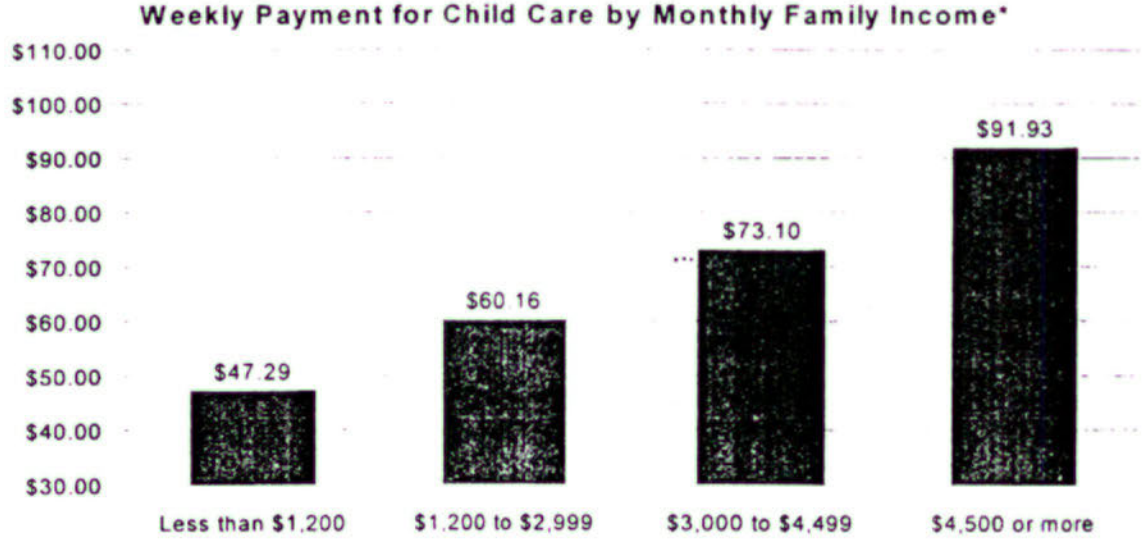
● In 1990, 7.2 million mothers with 11.7 million children under age 15 worked full or part time during nonstandard hours.**

● In 1993, the average family with an employed mother and a child under age five spent about $74 per week for child care for all preschoolers in the family.*

● Families with annual incomes under $14,400 that paid for care for children under five spent 25% of their income on child care, compared with 6% for families with incomes of $54,000 or more.*



* Limited to families with a preschooler, 1993 data. Source: Casper, L.M. *What Does It Cost to Mind Our Preschoolers?* U.S. Bureau of the Census, Current Population Reports, P-70, no. 52. Washington, D.C., 1995



*Limited to families paying for child care for preschoolers, 1993 data. Source: Casper, L.M. *What Does It Cost to Mind Our Preschoolers?* U.S. Bureau of the Census. Current Population Reports, P-70, no. 52. Washington, D.C., 1995

Information in this fact sheet is excerpted from † Sandra L. Hofferth, "Child Care in the United States," *The Future of Children*, vol. 6, no. 2 Summer/Fall 1996, with additional information from: National Center for Education Statistics, U.S. Department of Education; *U.S. Bureau of Census; **Women's Bureau, U.S. Department of Labor.

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EARLY CHILDHOOD DEVELOPMENT CONFERENCE

INCLUDES:
Early Childhood Development & Learning Conference Book
Early Childhood Development & Learning Conference Fact Sheet

WHITE HOUSE CONFERENCE ON EARLY CHILDHOOD DEVELOPMENT AND LEARNING: WHAT NEW RESEARCH ON THE BRAIN TELLS US ABOUT OUR YOUNGEST CHILDREN

> *"Learning begins in the first days of life. Scientists are now discovering how young children develop emotionally and intellectually from their very first days, and how important it is for parents to begin immediately talking, singing, even reading to their infants....We already know we should start teaching children before they start school."*
>
> --President Bill Clinton, State of the Union Address, February 4, 1997

On April 17, the President and First Lady hosted ***The White House Conference on Early Childhood Development and Learning: What New Research on the Brain Tells Us About Our Youngest Children***. The day-long conference highlighted new scientific findings on brain development in very young children and pointed to the importance of children's earliest experiences in helping them get off to a strong and healthy start and reach their full potential.

Applying New Findings on Brain Development in the Earliest Years. New scientific research shows that experiences after birth -- particularly in the first three years of life -- have a dramatic impact on brain development. That means that nurturing, talking to, singing to and reading to our youngest children will improve their ability to learn and develop throughout their lives. The White House Conference focused on the practical applications of the latest scientific research on the brain, particularly for parents and caregivers. The conference was also a call to action to all members of society -- including the health, business, media and faith communities, child care providers and government -- to use this information to strengthen America's families.

Clinton Administration Commitment to Young Children. This conference builds on the Clinton Administration's investment in children and families. The Administration has invested heavily in research to help us better understand the importance of the first few years of life to child development and learning. Between 1993 and 1997, funding for NIH children's research increased 25%, from $1.3 billion to $1.6 billion.

President Clinton has also strengthened efforts to support families with young children. To take just a few examples, the Administration raised funding for Head Start -- providing low-income children and their families with comprehensive education, health services, and nutrition -- by 43% over the last four years and created the Early Head Start program to support families with children ages zero to three. The President's FY 1998 Budget further increases participation to reach 122,000 more children in FY 1998 than when he took office. The Administration also dramatically increased participation in the WIC Supplemental Nutrition Program, providing 7.4 million pregnant women, infants, and children with nutrition packages and information and health referrals -- 1.7 million more than when President Clinton took office. And his FY 1998 Budget would achieve his goal of full participation in the WIC program by the end of FY 1998.

Conference Program and Participants. During the morning session of the conference, leading researchers and child development experts discussed the new research and what it means for parents and caregivers. The panelists for this session were: Dr. David Hamburg, Carnegie Corporation of New York (moderator); Dr. Carla Shatz, University of California, Berkeley; Dr. Donald Cohen, Yale Child Study Center; Dr. Patricia Kuhl, University of Washington; Dr. Ezra Davidson, Drew University of Medicine, Dr. T. Berry Brazelton, Harvard University; and Dr. Deborah Phillips, National Research Council. The afternoon session highlighted model community efforts to support parents and enhance early childhood development. The panelists included: Avance Family Support and Education Program, San Antonio, TX; the CEO and Chairman of the Board, The Kellogg Company, Battle Creek Michigan; and Ounce of Prevention, Chicago, IL.

Broad Participation Across the Country. The morning session of the conference was broadcast by satellite to over 80 locations across the country. The satellite conferences were co-hosted by regional federal agencies, local officials, and children's and other organizations.

WHITE HOUSE CONFERENCE ON
EARLY CHILDHOOD DEVELOPMENT AND LEARNING
POLICY ANNOUNCEMENTS

Today, the President and First Lady are hosting ***The White House Conference on Early Childhood Development and Learning: What New Research on the Brain Tells Us About Our Youngest Children***. The day-long conference highlights new scientific findings on brain development in very young children and points to the importance of children's earliest experiences in helping them get off to a strong and healthy start and reach their full potential.

Clinton Administration Commitment to Young Children. The Clinton Administration has invested heavily in research to help us better understand the importance of the first few years of life to child development and learning. President Clinton has also strengthened efforts to support families with young children by investing in Head Start and Early Head Start, the WIC Supplemental Nutrition Program, immunization and other early childhood programs.

At the conference, the President will make a series of policy announcements that build on the Clinton Administration's commitment to young children:

Improving the Quality of Child Care By Learning from the Military. Child care experts believe that the military child care system is now the best in the country. The President is issuing an executive memorandum directing the Secretary of Defense to use the Department's expertise to help improve child care across the nation. The memorandum urges the Department to consider: (1) creating partnerships with civilian child care centers in the community to help them improve quality; (2) providing training courses for civilian child care providers; (3) sharing the materials and models for worker training, accreditation and evaluation, facility design, financing, and other ingredients of the military's success; and (4) working with States and local governments to enable military child care facilities to serve as training sites for welfare recipients moving from welfare to work.

Providing Health Coverage for Children. The President's fiscal year 1998 budget includes a children's health initiative that will extend coverage to up to 5 million uninsured children by the year 2000 by strengthening Medicaid for poor children, building innovative State programs to provide coverage for working families, and continuing health coverage for children of workers who are between jobs. Today, the Association of American Medical Colleges issued a letter of support for the Clinton Administration's children's health proposal.

Importance of Early Education. The President recognizes that children must be nurtured and stimulated in the earliest years. That is why he is announcing two initiatives geared toward early learning.

- **Expanding Early Head Start.** The Department of Health and Human Services is requesting proposals for new Early Head Start programs to expand Early Head Start enrollment by one-third next year. Created by the Clinton Administration in 1994, the Early Head Start program brings Head Start's successful comprehensive services to families with children ages zero to three and to pregnant women.

- **Giving Parents and Caregivers Early Childhood Tools**. The President's America Reads Challenge is releasing "Ready*Set*Read" early childhood development activity kits. The kits

offer suggestions to families and caregivers about developmentally appropriate activities for children ages zero to five. They will be distributed in May to early childhood programs across the country and to callers to the Department of Education's 1-800-USA-LEARN hotline.

Safe Start. The Department of Justice is establishing "Safe Start" to change the way law enforcement officers respond to children who are the victims of or witnesses to violence. The program will provide training on early childhood development to community police officers, prosecutors, probation and parole officers, school personnel and mental health providers. It will better prepare law enforcement officials to respond to young children exposed to violence and can help prevent today's children from turning into tomorrow's criminals. The initiative is built on the successful partnerships between community police officers and mental health providers funded by DOJ in New Haven, Connecticut and three other communities.

CLINTON ADMINISTRATION EFFORTS TO SUPPORT THE DEVELOPMENT OF AMERICA'S YOUNGEST CHILDREN

"Learning begins in the first days of life. Scientists are now discovering how young children develop emotionally and intellectually from their very first days, and how important it is for parents to begin immediately talking, singing, even reading to their infants....We already know we should start teaching children before they start school."

-- President Bill Clinton, State of the Union Address, February 4, 1997

Recent scientific research has demonstrated that experiences during the earliest years of life -- before children reach school age -- are critical to their cognitive, emotional, and physical development. Nurturing and stimulating children in the first years of life actually help their brains develop and prepare them for the challenges of school and later life. President Clinton is committed to giving America's children the opportunity to live up to their God-given potential by investing in research, supporting parents and caregivers, and strengthening programs that provide early intervention to disadvantaged families.

PROTECTING OUR CHILDREN'S HEALTH

Supported Over 90% of all Children's Research. In fiscal year 1995, the federal government spent an estimated $2 billion on research and development directly related to children and youth -- over 90% of all funding of children's research. Spending on children's health research at The National Institutes of Health (NIH) increased 25% between 1993 and 1997, and this year NIH will spend $904 million on research on young children alone. This research has contributed to the recent advances in understanding early learning and language development.

Increased participation in WIC program. WIC Supplemental Nutrition Program provides nutrition packages, nutrition education, and health referrals to low-income pregnant women, infants, and children. Over the past four years participation has expanded by 1.7 million from 5.7 to 7.4 million women, infants, and children. The increase in the President's budget proposal fulfills his commitment to achieving full participation in WIC by the end of 1998. Research shows that WIC prenatal services save Medicaid much more than they cost by reducing health care expenses in the first 60 days after birth.

Raised Childhood Immunization Rates to an All-Time High. The President's Childhood Immunization Initiative focuses on five areas: 1) improving the quality and quantity of vaccination delivery services; 2) reducing vaccine costs for parents; 3) increasing community participation, education and partnerships; 4) improving systems to monitor diseases and vaccinations; and 5) improving vaccines and vaccine use. This initiative has achieved notable

success. In 1995, 75% of two-year olds were fully immunized -- an historic high. Funding for childhood immunization has doubled since fiscal year 1993.

Protected the Medicaid Guarantee for 9 Million Children Under 6 Years Old. This Administration has protected and, preserved -- and now will improve on -- the guarantee of Medicaid coverage for 36 million Americans, including 9 million children under the age of 6. In 1995, the President vetoed the Republican Medicaid block grant proposal that would have ended the guarantee of coverage for up to 4 million children by 2002. At the same time, the President worked with states by granting 15 comprehensive Medicaid waivers and approving many more state plan amendments that improve and expand coverage for children.

Seeks to Extend Health Coverage to Up to 5 Million Children. Although this Administration has made great strides in protecting the health of America's neediest children, there is still much to be done. In 1995, more than 10 million American children, 80% of whom have working parents, had no health insurance. The President's budget takes three important steps to address the problem of children who lack health insurance coverage:

1) Provides annual grants to states to cover health insurance premiums for families of workers who are in-between jobs;
2) Utilizes state partnership grants to help working families who are not eligible for Medicaid to purchase private insurance for their children; and
3) Expands Medicaid coverage by allowing states to continue Medicaid coverage for up to one year even if family income changes, intensifying outreach to children who are currently eligible but not enrolled, and continuing current law expansions of coverage to reach poor children between the ages of 13 and 18.

Fighting Pediatric AIDS. In 1994, the National Institutes of Health released new research showing that the use of the drug AZT by HIV-infected pregnant women can reduce the risk of transmission from mother to child by two-thirds. In response, the Food and Drug Administration quickly approved changes in labeling indications for AZT to include HIV-infected pregnant women and, in 1995, the Centers for Disease Control began recommending routing HIV counseling and voluntary HIV testing for all pregnant women. In addition, the President has consistently supported investment through Title IV of the Ryan White CARE Act, which provides grants for coordinated HIV services and access to research for children, women and families. Since 1994, $113 million has been appropriated under Title IV, with 59 organizations in 26 states, Puerto Rico and the District of Columbia receiving support.

Protecting Mothers and Children. Due to the Clinton Administration's comprehensive strategy to increase access to prenatal care, the preliminary estimate for the U.S. infant mortality rate (the rate at which babies die before their first birthday) is at an historic low of less than 8 deaths per 1,000 live births in 1995, and the proportion of mothers getting early prenatal care is at a record high of 81%. In addition, the President spearheaded legislation requiring insurance companies to cover at least 48 hour hospital stays following childbirth. In 1970, the average length of stay for an uncomplicated delivery was four days, but by 1992 it had declined to two days. This legislation ensures that mothers and babies do not leave the hospital before they and their doctors decide they are ready. The Administration is ensuring that the health needs of mothers and

children are met by providing over $1 billion in FY 97 for Title V Maternal and Child Health Programs. The Maternal and Child Health Block Grant, one of the Title V programs, serves approximately 17 million women, infants and children, in partnership with states. In addition, Title V programs provide comprehensive care for children with special health needs, meet nutritional and development needs of mothers and children and help reduce infant mortality.

Preventing Sudden Infant Death Syndrome (SIDS). The Clinton Administration launched the Back to Sleep public education campaign to send the message to parents and health professionals that putting babies to sleep on their backs can reduce the risk of Sudden Infant Death Syndrome. Largely as a result of this campaign, SIDS deaths dropped by 30% between 1992 and 1995.

PROMOTING EARLY LEARNING

Increased participation in Head Start, created Early Head Start for 0-3 year olds, and improved program quality. For more than thirty years, Head Start has been one of our nation's best investments. President Clinton has made improving and expanding Head Start a priority because Head Start ensures that low-income children start school ready to learn. Over the past five years, funding for the program has increased by 80%, and in fiscal year 1997 Head Start will serve 800,000 low-income children five years old and younger. Initiated in 1994, there are now 143 *Early Head Start* programs across the country, expanding the proven benefits of Head Start to low-income families with children under three. Over the last three years, the Clinton Administration has also invested significantly in improving program quality and providing local programs with the resources they need to attract and retain high quality teachers. The President's 1998 budget proposal provides a $324 million increase in Head Start's budget so that it will remain on course to serve 1 million children by 2002.

Improved Support for Infants and Toddlers with Special Needs. Under the Individuals with Disabilities Education Act (IDEA), the Infants and Families Program supports the continuing efforts of states to implement high quality statewide early intervention services for infants and toddlers with disabilities. Over the past four years, funding for the program has increased by 48% or $102.5 million. During the same period, the number of children served increased by 21.5%. An estimated 191,000 children will be served in fiscal year 1998.

Enhanced Family Literacy Program. Even Start Family Literacy is a family-focused grant program to improve the educational opportunities for children and their parents in low-income areas by integrating family literacy activities, including early childhood education, adult education, and parenting education. Since 1993, funding for Even Start has increased by over 40% to support programs in every state and the District of Columbia.

Providing Funding for Parent Resource Centers in 42 States. In addition to involving parents in the development of state and local education plans, the President's Goals 2000 program provides funding to establish parent resource centers that help parents learn how to help their children meet high standards. The centers provide training, distribute resource materials, and support a variety of programs that strengthen family involvement in education. In fiscal year 1997, funding is available for support centers in 42 states, 14 more than in 1996.

Promoting Parents as First Teachers. The President's America Reads Challenge, a campaign to ensure that every child can read well by the end of the third grade, includes Parents as First Teachers Challenge Grants to fund proven local, regional and national programs that provide assistance to parents to help their children become successful readers. The grants can be used to expand successful programs such as the Home Instruction Program for Preschool Youngsters (HIPPY) and the Parents as First Teachers (PAT) program. They will also fund national and regional networks to share information on how parents can help children to read.

IMPROVING CHILD CARE

Increased Child Care Funding. Since 1993 federal funding for child care has increased by $1 billion, providing services for over 660,000 children -- 65% of whom are under 5 years of age. The newly established Child Care and Development Fund (CCDF) has made available $2.9 billion to states. The new fund, authorized and expanded by the new welfare law, will assist low-income families working their way off welfare to obtain child care so they can work or attend school.

Improved Child Care in Public Housing. The Early Childhood Development Program helps to provide quality child care for families living in public housing communities, as well as families who are homeless or at risk of becoming so. The program allows parents or guardians who live in public housing to get and keep jobs by ensuring that their children are cared for. In 1996, $21 million was awarded to public housing sites across the country -- three times more than in 1994.

Providing High Quality Child Care for Military Families. Under the Clinton Administration, the Department of Defense has made important strides to improve the quality of child care for the children of the men and women who serve our country. Since 1992, the number of military child care facilities that are accredited by the independent National Association for the Education of Young Children has risen from 55 to 466. Currently, 72% of military child care programs are accredited, as compared to only 7% of other child care facilities nationwide.

SAFEGUARDING THE ENVIRONMENT

Controlling Childhood Lead Poisoning. The Administration has launched a major new effort to control childhood lead poisoning. The program requires landlords and sellers of older homes to notify prospective tenants and buyers about lead-based paint hazards, provides grants to states to control lead-based paint hazards in low-income privately-owned homes, and offers technical assistance to ensure that lead hazard control work is done safely and efficiently. The 1997 interim report evaluating the HUD Lead-Based Point Hazard Control grant program shows that median dust levels on interior window sills were reduced by 85 %. In addition, the number of children suffering from lead poisoning dropped from 1.7 million in the late 1980s to about 930,000 in the mid-1990s.

Protecting Our Children's Environment. Because their bodies are still developing, children are among the most vulnerable to pollution in the air, water and soil. In 1995, the Clinton Administration began requiring that children receive first consideration when EPA assesses

environmental hazards and sets public health standards. In addition, the Clinton Administration has strengthened environmental protections for children by: proposing to strengthen air quality standards for soot and smog to protect children from air pollution, particularly those with asthma; speeding the clean-up of two-thirds of the nation's toxic waste sites to protect the 10 million children under age 12 who live within four miles of a toxic waste dump; strengthening drinking water protections to ensure that drinking water is free of microbial contaminants; expanding families' right to know about environmental health risks that infants and children face to help them make informed decisions about their children's exposure to these risks; issuing advisories about contaminated fish so parents can protect children from cancer-causing PCBs; and educating parents about the effects of second-hand smoke, which annually results in 7,500 to 15,000 hospitalizations of infants and children under 18 months of age.

STRENGTHENING FAMILIES

Passed Family and Medical Leave. The President fought for the passage of the Family and Medical Leave Act (FMLA) that allows workers to take up to 12 weeks unpaid leave to care for a newborn or adopted child, to attend to their own serious health needs, or to care for a seriously ill parent, child or spouse. In June 1996, President Clinton proposed expanding FMLA to allow workers to take up to 24 unpaid hours off each year for school and early childhood education activities, routine family medical care, and additional activities related to caring for an elderly relative. Last week, the President asked Federal agencies to implement his expanded leave policy immediately for Federal workers.

Improved Children's Television. The President announced a breakthrough agreement with the media and entertainment industry to develop a television ratings system to enable parents to protect their children from violence and adult content. In addition, the Administration has given parents greater control over what their children watch on television by requiring the installation of anti-violence screening chips ("V-chips") in all new televisions.

Reducing Child Abuse and Domestic Violence. The Administration created the Safe Streets/Safe Kids initiative to make community responses to child abuse and neglect more comprehensive and coordinated in an effort to break the cycle of early childhood victimization and later delinquency. The Administration also put in place a nurse home visitation program for low-income first-time mothers. Studies have shown that home visitation programs are successful -- for example, reducing cigarette smoking during pregnancy by 25% and reducing mistreatment of children from birth to age 2 by 80 percent. The Clinton Administration has also taken significant steps to reduce domestic violence. For example, the Rural Domestic Violence and Child Victimization Enforcement Grant Program helps law enforcement agencies, courts community organizations and businesses to work toward early identification, intervention and prevention of domestic violence and child victimization in rural areas. Finally, the President is committed to finding stable and permanent homes for children who cannot remain safely at home. As a result, the Administration announced Adoption 2002, a plan to double the number of children adopted or placed in permanent homes each year by the year 2002.

DEPARTMENT OF HEALTH & HUMAN SERVICES

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DEMOCRATIC CAUCUS
U.S. HOUSE OF REPRESENTATIVES

Vic Fazio, Chairman
Barbara B. Kennelly, Vice Chair

NEWS

For Immediate Release

Contact: Steven Maviglio 226-0741

HOUSE DEMOCRATS UNVEIL CHILD CARE PROPOSAL

Quality, Cost, Availability Focus of Sweeping Initiative

Washington, D.C. – Joined by First Lady Hillary Rodham Clinton, Secretary of Health and Human Services Donna Shalala, and working families, House Democrats today unveiled legislation designed to double the number of families receiving assistance to pay for child care.

House Democratic Whip David Bonior (D-Mich.), Caucus Chairman Vic Fazio (D-Calif.), Vice-Chair Barbara B. Kennelly (D-Conn.), Rep. Ellen Tauscher (D-Calif.), and more than 100 Democratic cosponsors say the comprehensive bill is targeted at middle- and lower-income families faced with soaring child care costs and limited availability. The legislation:

- Increases tax credits for three million additional working families to help them pay for child care;
- Provides after-school care for up to half a million children per year;
- Establishes a business tax credit for companies providing child care services;
- Creates a child care provider scholarship fund to train child care workers;
- Establishes a tax credit for stay-at-home parents with children under the age of four; and
- Improves child care safety and quality and enhances early childhood development.

"For millions of American families, nothing is more important than quality child care that is safe and affordable," said Fazio. "This legislation is a blend of initiatives that addresses costs, availability, quality, and safety."

-more-

Child Care 222

Many of the provisions in the bill are tax related. These include an increase in the dependent care tax credit for families with less than $60,000 combined income that would result in an average tax cut of $330 for three million families. Savings would be similar for stay-at-home parents with children under the age of four.

Businesses that provide child care services for their employees by building or expanding child care facilities or training child care workers would receive a 25 percent credit towards those costs up to $150,000 per year. A matching fund grant program for business also would be created to expand the number of child care facilities, with small businesses receiving priority funding.

The bill also has a strong focus on after-school programs to help parents bridge the gap between the hours when schools adjourn to when they return from work. The Child and Adult Care Food Program would be extended to those from 13 to 18 years old. In addition, new emphasis on after-school prevention programs will be required in juvenile justice programs.

The Democratic Caucus proposal also calls for the establishment of a $3 billion fund over five years to provide challenge grants to communities to improve the delivery of child care services (including funds for improving child care provider training, lowering child/staff ratios, and providing for comprehensive background checks on child care workers). Another new $500 million fund over five years also would be created to step up enforcement of health and safety standards. Building on the military's model child program, this initiative is designed to help states improve their licensing systems.

Other components of the bill include:

- Creation of a Child Care Provider Scholarship Fund proposed by President Clinton that will enable states to provide 50,000 scholarship funds to students working toward child care credentials each year for the next five years;
- Amending the National Housing Act to authorize the Secretary of Housing and Urban Development to ensure mortgages for child care facilities; and
- Establishment of a child care hotline to connect parents with local agencies to help them identify quality care for their children.

The bill builds on President Clinton's child care proposal as well as those from Rep. Kennelly, Rep. Tauscher, Rep. Hoyer (D-Md.), Rep. Lowey (D-N.Y.), Rep. Woolsey (D-Calif.), Rep. Maloney (D-N.Y.), Rep. Moran (D-Va.), Rep. Allen (D-Maine), and Rep. Slaughter (D-N.Y.).

The $23.3 billion costs of the bill are designed to fall within the context of a balanced budget legislation.

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DEMOCRATIC CAUCUS
U.S. HOUSE OF REPRESENTATIVES

Vic Fazio, Chairman
Barbara B. Kennelly, Vice Chair

NEWS

For Immediate Release

Contact: Steven Maviglio 226-0741

HOUSE DEMOCRATIC CHILD CARE PROPOSAL
FACT SHEET

- Increases tax credits for three million additional working families to help pay for child care;
- Provides after-school care for up to half a million children per year;
- Establishes a business tax credit for companies providing child care services;
- Creates a child care provider scholarship fund to train child care workers;
- Establishes a tax credit for stay-at-home parents with children under the age of four; and
- Improves child care safety and quality and enhances early childhood development.

Child Care Block Grant (CCDBG)

Doubles the number of working families, including families with children under age three, that will receive child care subsidies by FY 2003 through an increase in mandatory funding for CCDBG and the increase provided in the Welfare Reform Bill. Cost: $7.5 billion over five years.

Dependent Care Tax Credit (DCTC) Reform

- Increases the Dependent Care Tax Credit for all families with less than $60,000 in income. The new DCTC would be a 50 percent credit for families with less than $30,000 in income slowly phasing down to a 20 percent credit for families earning more than $60,000. The provision provides an average tax cut of $330 for eligible families or three million families a year. Cost: $5.1 billion over 5 years.
- Establishes a tax credit for stay-at-home parents with children under the age of four. The credit would be equivalent to the average increase in tax relief provided to families with a young child through the expansion of the DCTC. Estimated Cost: $3.5 billion over five years.
- Prevents the Alternative Minimum Tax (AMT) from reducing the DCTC.

-more-

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Assistance for Businesses

- Establishes a tax credit for businesses that provide child care services for their employees by building or expanding child care facilities, operating existing facilities, or training child care workers. The credit covers 25% of qualified costs, but may not exceed $150,000 per year. Cost: $500 million over five years.
- Grants to Businesses -- Authorizes grants to business consortia to improve access to affordable, local, quality child care services through the states to start child care centers. The consortium must be no fewer than five businesses and must match $2 for every $1 of Federal funds and $1 of state funds. Small businesses have priority funding. Cost: $75 million a year for five years.

After School Program

Provides after school care for up to half a million children per year by expanding the 21st Century Community Learning Center Program to provide funds to school-community partnerships to establish or expand programs for school-aged children. Cost: $800 million over five years.

- **After School Snacks** -- Expands the number of programs and students eligible to participate in the Child and Adult Care Food Program (CACFP) at after-school programs. Current law only allows low-income kids up to age 13 to get subsidized snacks. This bill would extend that to age 18 and allow new programs to participate. Costs: $46 million/1st year. $200 million over five years.
- **Full-Service Community Schools** -- A full-service school integrates the delivery of quality education with whatever health, social and cultural services that are required in that community. No net cost.
- **Juvenile Justice** -- Would direct existing juvenile justice funds to after-school prevention programs in areas with high crime or significant numbers of at-risk youth.

Quality Fund/Early Learning Fund

Establishes a new Model State's Early Learning Fund which provides challenge grants to communities (distributed to eligible states through CCDBG) to support programs to improve early learning and the quality and safety of child care for children up to five years old. States may use the funds in a variety of activities including providing training to providers, improved child-staff ratios, pay for comprehensive background checks, expand parent education activities, and to improve the availability of care for children with special needs. Cost: $3 billion over five years.

Standards Enforcement Fund

- Steps up enforcement of state health and safety standards. Building on the military's model child care program, this proposed initiative will fund state efforts to improve licensing systems and enforce child care health and safety standards, including by increasing unannounced inspections of child care settings. Cost: $500 million over five years.

-more-

Child Care Provider Scholarship Fund

- Increases scholarships and training for child care providers. The President proposed establishing a Child Care Provider Scholarship Fund to enable states to provide Scholarship funds to students working toward a child care credential. Eligible child care workers must commit to remaining in the field for at least one year for each year of assistance. Cost: $250 million over five years which will support 50,000 scholarships per year.

Research and Evaluation Fund

Provides funding for data collection, research, and evaluation. The research fund will also support a National Center on Child Care Statistics and a child care hotline that connects parents with local resource and referral agencies to help them identify appropriate, quality child care for their children. Cost: $150 million over five years.

Additional Proposals

- **Child and Adult Food Program** -- Amends the National School Lunch Act to increase reimbursement rates for family or group day care homes under the child and adult care food program. Costs: $225 million over 5 years. (First section on Tier 2 program -- $40 million a year, second section on sponsor payments -- $5 million a year.)

- **Children's Development Commission Act** -- Amends the National Housing Act to authorize the Secretary of Housing and Urban Development to insure mortgages for: (1) new or rehabilitated child care and development facilities, including mortgage insurance for fire safety equipment loans; and (2) purchase or refinance of existing child care and development facilities. Establishes the Children's Development Commission which shall: (1) issue facility standards and compliance certifications; and (2) make loans not in excess of $50,000 for facility rehabilitation or renovation. Authorizes appropriations. Directs the Secretary of the Treasury to conduct a study of the availability of child care facility secondary mortgage markets. Costs: $10 million one-time capped allocation of funds.

Sense of Congress

- It is the Sense of Congress that the funds appropriated under this bill will occur within the context of a balanced budget and be fully funded.

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DEMOCRATIC CAUCUS
U.S. HOUSE OF REPRESENTATIVES

Vic Fazio, Chairman
Barbara B. Kennelly, Vice Chair

NEWS

WHO BENEFITS FROM THE DEMOCRATIC CHILD CARE PROPOSAL?

John Brandon (speaker) of Fairfax, Va. is a single parent, the father of eight-year-old Amanda and five-year old Johnny. A financial analyst, Brandon says "I have had to shuffle debts around to pay bills and use my credit card for everyday items like groceries to pay for child care. I'm not rich and I'm not poor, but I'm struggling to make ends meet." The search for a child care center wasn't easy for him either. "Some of the centers I observed were too small and overcrowded or the teachers were not properly trained." He finally has found one that is helping him with costs "but they can only do so much," he says. "Something more needs to be done at a national level."

Dawn Mason-Affinito is the owner/director of Friends and Family Day Care, a family day care program in East Haven, Conn., who has worked in the early childhood field for 16 years. The program, which has 13 children ranging in age from six weeks to five years, specializes in educational activities for children with disabilities. "We pay an immeasurable price when we place a child in mediocre child care during these precious and formative years," she says. Low-income families have Head Start and school readiness grants, while wealthy families can afford the high tuition rates of fine programs. But where does that leave the middle-class family? Too often they have to settle for mediocre care at best." Friends and Family's high standards recently won praise from the National Association for Family Childcare. Mason-Affinito also travels throughout the state to provide training for other family day care providers. She is a guest of Congresswoman Rosa DeLauro (D-Conn.).

JC Stamps is a 29-year veteran of the District of Columbia Police Department. A detective in the First District, JC has a long-time interest in juvenile justice. From the time Stamps started his career as an undercover narcotics officer, he has worked to reduce crimes made by children. He knows how important it is to ensure that children have options for them after school so they are not tempted by illegal activities. The after-school component of the Democratic child care legislation, he says, will offer options to thousands of kids nationwide who otherwise would be spending time on the street.

-more-

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DEMOCRATIC CAUCUS
U.S. HOUSE OF REPRESENTATIVES

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INTERNATIONAL UNION OF POLICE ASSOCIATIONS AFL-CIO

THE ONLY UNION FOR LAW ENFORCEMENT OFFICERS

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ARTHUR J. REDDY
International Vice President
Legislative Liaison
RICHARD A. ESTES
International Secretary-Treasurer

THE INTERNATIONAL UNION OF POLICE ASSOCIATIONS, AFL-CIO, ENDORSES THE DEMOCRATIC CHILD CARE PROPOSAL OF 1998

On behalf of the Executive Board and the 80,000 rank and file law enforcement officers of the International Union of Police Associations, AFL-CIO, we are proud to endorse and support the Democratic Child Care Proposal of 1998

Preventive juvenile crime programs are the most efficient use of resources for at-risk youth. The Democratic Child Care Proposal expands and establishes after school programs by funding school/community partnerships and directing funds to areas with significant numbers of at-risk youth, improves child care safety and quality, and enhances early childhood development.

In the first year after the Baltimore Police Department opened an after school program, crime in that neighborhood dropped 42 percent. The peak time for crimes committed by juveniles occurs on school days, after school. In fact, data from the FBI's National Incident-Based Reporting System show that 1 in 5 violent crimes committed by juveniles occur in the four hours following the end of the school day, i.e., between 2 p.m. and 6 p m. Investing in after-school programs, which is an investment in quality child care and our community, will save U.S. taxpayers money. It has been estimated that for every high risk youth that is prevented from adopting a life of crime, there is a savings of $1.7 to $2.3 million. There is no better investment the federal government can make than in the safety and development of our children.

Our law enforcement officers on the front lines know that there will be a victory over crime when the commitment to putting criminals in jail is matched by the commitment to investing in children to keep them from becoming criminals in the first place. This is why the International Union of Police Associations is proud to endorse the Democratic Child Care Proposal and we support Hillary Rodham Clinton for her leadership on this issue.

CONGRESSWOMAN
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FOR IMMEDIATE RELEASE
DATE: June 9, 1998

CONTACT: Dave Lemmon (202) 225-1880
http://www.house.gov/tauscher/

Tauscher & Kennelly Introduce Comprehensive Child Care Legislation

Tauscher's "Model States" legislation is major component of new bill -- also includes the President's block grant proposal, expanded after-school care, and tax credits for individuals, businesses and stay-at-home moms

WASHINGTON--**Rep. Ellen Tauscher (D-CA)** and **Rep. Barbara Kennelly (D-CT)** will hold a Capitol Hill press conference *today at 1:45 PM in Room 344 of the Cannon House Office Building* with **First Lady Hillary Rodham Clinton** and the **Secretary of Health and Human Services, Donna Shalala**, to launch the introduction of their new comprehensive child care bill which is intended to be the primary House Democratic Child Care Initiative. The bill incorporates most of the legislation that Rep. Tauscher previously introduced in her "Model States Child Care Enhancement Act", key portions of President Clinton's child care initiative, as well as new tax credits for individuals, businesses and stay-at-home parents.

"If we want widespread, affordable, and quality child care to be readily available, we must begin to address many of the problems affecting our current child care system in this country. This new comprehensive legislation will go a long way to solving many of the child care problems that parents are facing on a daily basis," Tauscher began. "It is absolutely imperative that we begin to do more to provide better child care and stability in the lives of our young children."

Briefly, the Kennelly\Tauscher child care proposal would:

- *Double the number of children receiving child care assistance.
- *Improve child care safety and quality, and enhance early childhood development.
- *Provide new tax credits for three million working families to help them pay for child care.
- *Provide after-school care for up to one million children per year.
- *Create a Stay at Home Tax Credit for stay-at-home parents with children under 4 years of age.

The bill would incorporate most of Rep. Tauscher's "Model States" legislation that is designed to challenge states to improve the quality of child care in their state and would reward those states with additional block grant funds for meeting the goal of improving the quality of child care in their respective states. The bill will provide $3 billion over 5 years for challenge grants to local communities to support programs to improve early learning and the quality and safety of child care for children ages 0-5.

The bill would also incorporate most of President Clinton's expanded Child Care Block Grant proposal by providing an additional $7.5 billion in mandatory funding over 5 years to increase the child care subsidies available to working families and double the number of children currently being served by the program. In addition, the Kennelly\Tauscher bill would create a Child Tax Credit (CTC) for stay at home parents with children under 4. The credit would be equivalent to the current $500 tax credit plus an additional amount equal to the average increase in tax relief provided to two-worker families with a young child through the expansion of the Dependent Care Tax Credit (DCTC).

The Kennelly\Tauscher proposal would also provide vital assistance to American businesses by incorporating most of the President's earlier proposal to provide a 25% tax credit to businesses that provide child care services for their employees as well as including Rep. Tauscher's earlier small business consortium proposal from her "Model States" legislation. Under her "Model States" legislation, small businesses would be eligible to receive grants to start a child care center if they formed a consortium of at least 5 businesses to provide quality child care for their employees.

Finally, the bill incorporates Rep. Kennelly's proposal to provide greater assistance for the expansion of after-school child care programs. Specifically, the bill would expand the already established 21st Century Community Learning Center Program to provide after-school care for up to half a million children per year.

"Our primary objective in introducing this legislation is to provide accessible, affordable and quality child care to more of America's working families. Passage of this comprehensive legislation is a critical step to achieving that goal," Tauscher concluded.

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U.S. CONGRESSWOMAN
ROSA DELAURO
REPRESENTING CONNECTICUT'S 3RD CONGRESSIONAL DISTRICT

NEWS RELEASE

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FOR IMMEDIATE RELEASE
Tuesday, June 9, 1998

Contact: Stacy Beck
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MAJOR PROVISIONS OF DELAURO CHILD CARE BILLS INCLUDED IN DEMOCRATIC CAUCUS INITIATIVE

WASHINGTON, DC -- A major provision of Congresswoman Rosa DeLauro's child care bills was included in the Democratic Child Care Proposal unveiled today at a Capitol Hill press conference. DeLauro was an active Member of the task force that developed the legislation, and she also successfully pushed for more funding for child care subsidies and after-school care and additional funding for children ages zero to three.

"Nobody has to tell parents that safe, reliable, affordable, quality child care is important, or that it's expensive, or that it's hard to find," said DeLauro. "If this Congress is serious about making life easier for America's working families, we need to enact this important legislation."

Joining DeLauro at the event were First Lady Hillary Rodham Clinton, Secretary of Health and Human Services Donna Shalala, Connecticut Congresswoman Barbara Kennelly, other Members of Congress and several people who work in the child care industry including Dawn Mason-Affinito, the owner and director of Friends Are Family Day Care in East Haven, CT. DeLauro met Mason-Affinito when she visited Friends are Family to highlight the program and talk about the importance of good educational child care, and invited her to Washington for today's press conference.

"We pay an immeasurable price when we place a child in mediocre child care during these precious and formative years," said Mason-Affinito, who has worked in the early childhood field for sixteen years. "Who knows which child, if given that optimal chance for growth, might have been the scientist who discovers a cure for cancer or the artist who creates a world-renowned body of work."

The Democratic proposal includes a $3 billion "Early Learning" fund to improve the quality of care for infants, toddlers and preschoolers. The fund is modeled after the competitive grant included in both DeLauro's Early Learning and Opportunity Act and bi-partisan Early Learning and Opportunity State Grants Act.

DeLauro also successfully fought for the Democratic bill to include an expansion of after-school care and child care block grants. The bill provides after-school care for up to half a million children per year by expanding the 21st Century Community Learning Center Program to provide funds to school-community partnerships to establish or expand programs for school-aged children. It also doubles the number of working families, including families under the age of three, that will receive child care subsidies through an increase in mandatory funding for Child Care Development Block Grants.

(more)

A strong advocate of the importance of early childhood development and education, DeLauro also made sure the bill included funds earmarked for children ages zero to three. Much of the recent research about the importance of the first three years on later development has been done at Yale University which is located in DeLauro's district.

"The exciting research going on at Yale and other facilities has proven what parents and grandparents have long suspected -- that the first few years of life are a critical time for intellectual, emotional, and social development," said DeLauro. The bill includes a provision DeLauro fought for requiring states to ensure that at least 40 percent of their child care funds are dedicated to children between the ages of zero to three.

The Democratic Child Care Initiative also provides new tax credits for three million working families to help them pay for child care and establishes a tax credit for stay-at-home parents with children under the age of four.

"Nobody can replace parents in raising children, but this proposal will give working families the tools they need to help their kids grow up healthy and ready to learn" said DeLauro.

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b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

JC STAMPS
BIOGRAPHY

[001]

JC Stamps was born in (b)(6) and relocated to the District of Columbia where he attended American University. While attending American University he became interested and studied in Criminal Justice I, Juvenile Justice and Labor Relations training programs. JC Stamps has 29 years of law enforcement experience with the Metropolitan Police Department. He also has broad labor management experience, administrative and union abilities.

Mr. Stamps began his career as an undercover narcotics officer in 1969, graduated from the Metropolitan Police Academy in 1971. From there he served as a Uniformed Patrol Officer and a Casual Clothes Officer for 1 year. Soon after, he was sent to Criminal Investigation and the FBI Academy/Homicide School. He was assigned to the First Districts Detective Unit in 1971, where he spent 21 years.

Mr. Stamps was elected the Chairman of the Fraternal Order of Police in 1994, and served for two years. He was then assigned to the Public Information Office of the Metropolitan Police Department for two years and is now the Spokesperson and Detective for the First District Detectives, Public Information Office.

Mr. Stamps was appointment as one of the first Equal Employment Opportunity Counselors for the Police Department. He was one of the first appointed to the District of Columbia Civilian Complaint Review Board, and he also assisted in writing the guidelines and regulations.

Outside of the Police Department, Mr. Stamps has, for the past 18 years, served as a union representative. He left office as a union leader and proceeded with his own labor consulting company, and is currently working as a field administrator for the International Union of Police Associations.

Statement of John Brandon

Good afternoon ladies and gentleman. My name is John Brandon, and these are my two children -- Amanda who is 8, and Johnny who is 5. We live in Fairfax, Virginia.

I am here today to briefly describe to you my personal experiences and struggles in dealing with the high cost of quality childcare.

I'm a single parent and have full custody of Amanda and Johnny. I have been sending them to a child development center near my home for six years. For four years, I received a subsidy to help pay for their care while I was putting myself through college. This year, I started a new job as a Financial Analyst. My salary increased - I'm happy to say - but my childcare subsidy ended. I'm not rich and I'm not poor -- but I am struggling to make ends meet. As you can imagine, it's not cheap to raise two kids. I spend thirty-five percent of my salary on childcare alone. Even when I was married and had two incomes my family was strapped with childcare expenses.

I have had to shuffle debts around in order to pay bills and use my credit card to pay for everyday items like groceries and gas. I had a close friend move in to help me out financially, but he was called away and now I'm back to wondering where I'm going to find the money to pay for childcare.

The search for a center that I was comfortable with was a very difficult and lengthy process. I visited many different centers until I found one that I felt was suitable for my children and also within my budget. Some of the centers I observed were too small and overcrowded or the teachers were not properly trained.

The child development center that my daughter used to attend and my son currently attends is a high-quality, accredited center that has done more than their fair share in helping parents struggling with financial issues such as mine. But, they can only do so much with their limited funding and staff support. Something needs to be done at the national level.

Johnny starts kindergarten this fall and I had hoped that my childcare expenses would decrease significantly, but that is not the case. I still have to pay for a before-and-after school childcare program and the money I owe at the child development center. Sometimes I think my kids will have graduated from college before I get their childcare paid off!!

I commend all the legislators here today for coming up with a plan that will help families like mine across the country. Working parents and their children desperately need help. Thank you.



U.S. REPRESENTATIVE

GREGORY W. MEEKS

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Release On:
June 9, 1998

CONGRESSMAN GREGORY W. MEEKS CO-SPONSORS CHILD CARE BILL PROMISES TO HELP WORKING FAMILIES PAY FOR CHILD CARE

Washington, D.C.- June 9, 1998- U.S. Representative Gregory W. Meeks (D-NY) of the Sixth Congressional District, today announced his co-sponsorship of the Democratic Child Care Proposal. In response to parents' call to make child care safer and more affordable for working families. "This landmark bill will help working families' pay for child care, increase the number of quality after-school programs, improve the safety and quality of care and promote learning," Congressman Meeks stated.

The Democratic Child Care Bill will:

- Increase tax credits for three million working families to help them pay for child care.
- Establish a tax credit for stay-at-home parents with children under the age of four.
- Double the number of children receiving child care assistance.
- Provide after-school care for up to one million children per year.
- Improve child care safety and quality and enhance early childhood development.

"Working parents need to know their children are in good hands during the work day. Quality day care and after-school care can make a difference in children's lives and give parents a real peace of mind," Congressman Meeks said. "That's why I am pleased to co-sponsor this bill that will provide better child care for the residents of southeast Queens."

"This bill will provide the relief America's working families are desperately seeking. I look forward to working with the President and the First Lady and my colleagues in Congress to pass meaningful child care legislation. We must raise the quality of child care and make it safer and more affordable. I am committed to that." Congressman Meeks concluded.



News from Congresswoman Jane Harman

FOR IMMEDIATE RELEASE
JUNE 9, 1998

CONTACT: MARIA ALONGI
WASHINGTON: (202) 225-8220
TORRANCE: (310) 783-8220

HARMAN JOINS FIRST LADY IN PROPOSING BILL TO EXPAND CHILD CARE OPTIONS

WASHINGTON -- Congresswoman Jane Harman (D-Torrance) joined First Lady Hillary Rodham Clinton, Secretary of Health and Human Services Donna Shalala, and other key Democratic leaders in sponsoring legislation to help working families afford quality child care, expand after-school programs, and promote early childhood learning.

"As I traveled around California over the last several months, I met many working families who told me about the juggling act they face each day as they head to work: putting in a full day to provide for their families, and ensuring that their kids are taken care of as they do," said Harman. "The last thing a parent needs to worry about is the safety and care of a child while at work. Our bill gives parents peace of mind by providing a wide array of child care alternatives."

Harman also pointed out the measure will give children a leg up on life. "Children develop dramatically in the first five years of life," Harman said. "With this legislation, we are enhancing early-learning programs and preparing our children to succeed in school and in life."

The legislation will:

- Increase tax credits for three million working families to help them pay for child care;
- Establish a tax credit for stay-at-home parents with children under the age of four;
- Double the number of children receiving child care assistance;
- Provide after-school care for up to one million children per year;
- Improve child care safety and quality and enhance early childhood development.

"We must improve the quality of child care and we must make it affordable to those working families who need it the most. I will work with the President and the First Lady, and my Congressional colleagues, to pass meaningful child care legislation. Now is the time to act," concluded Harman.

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CITY OF BUFFALO
DEPARTMENT OF POLICE

OFFICE OF THE COMMISSIONER
R. Gil Kerlikowske
Police Commissioner

74 Franklin Street
Buffalo, New York 14202

Telephone: 716-851-4444

A New Consensus Among Law Enforcement Leaders: To Fight Crime, Invest in Child Development and After-School Programs

Statement of R. Gil Kerlikowske,
Commissioner of Police, Buffalo, New York
and President, Police Executive Research Forum
June 8, 1998

I have been on the front lines of America's fight against crime for the past 26 years. Like police across America, my officers and I struggle every day to see that dangerous criminals are behind bars. But we also know that our nation will never win the battle against crime with more police and more prisons alone. Indeed, this is a war we cannot win until we cut the enemy's most important supply line: its ability to turn kids into criminals.

America's commitment to punishing criminals must be matched by a "front-end" commitment to ensuring that fewer children become criminals in the first place. That's why over the past 17 weeks, hundreds of law enforcement leaders — including the Police Executive Research Forum, whose police chief members serve 40 percent of the American population; the Major Cities Chiefs organization, made up of the chiefs of police from 51 of America's largest metropolitan areas; the National District Attorneys Association; and the more than 300 police chief, sheriffs, prosecutors and crime victims who lead FIGHT CRIME: INVEST IN KIDS (www.fightcrime.org) — have called on elected officials to ensure the availability of quality child care and after-school programs to *all* American children and youth.

By making sure that all kids have access to quality child care and after-school programs, Congress would be taking a powerful step to fight crime.

Indeed, if there is one point that no American can afford to miss, it is this: *If we want our own families to be safe,* we all have a stake in making sure that every working family has access to quality educational child care at a price parents can afford, and that all school-age kids get the after-school programs that offer them positive alternatives to the street.

My colleague George Sweat, Chief of Police in Winston-Salem, North Carolina, puts it best when he says: "We need to start fighting crime in the high chair, not wait for the electric chair."

Quality Early Childhood Care Cuts Crime Down the Road,
But Is Largely Unavailable to the Kids Most At-Risk

Scientific research shows that these investments are among the most powerful weapons in America's entire anti-crime arsenal.

In Ypsilanti, Michigan, for example, the High/Scope Educational Research Foundation randomly admitted half the at-risk three and four year old applicants to its quality pre-school center, and provided their parents with in-home coaching in parenting skills for an hour and a half each week. Twenty-two years after the High/Scope services ended, these children were *just one-fifth as likely* as kids denied the services to be chronic law-breakers.[1]

In a similar study in Syracuse, at-risk kids who were provided early childhood services and a high-quality preschool program were only *one-tenth as likely* as kids denied those services to be delinquent by age 16.[2]

New scientific research vividly shows that when parents are at work, trying to make ends meet, the quality of their children's preschool experience from birth to age five is permanently shaping their little ones' tender intellectual, emotional, social and moral development. Nurturing, stimulating early education not only helps kids start school ready to succeed, but helps parents teach kids right from

wrong, self-discipline, to get along with others and to treat people with respect, concern and decency. When millions of struggling parents are forced to leave their kids in inadequate child care — often little more than "child storage" — we all pay a terrible price.

Yet today, with quality child care for two children now costing upwards of $12,000 per year — a real budget buster for the one-third of young families that make less than $25,000 annually — millions of parents *are* forced to make do with care that undermines their children's development of the intellectual capacity, values and skills on which our safety and our nation's prosperity depend. Child care block grants help less than one in ten of families who are eligible — the families who most need help paying for good quality child care.

After-School Programs Have An Immediate Impact on "Prime Time for Juvenile Crime"

A FIGHT CRIME: INVEST IN KIDS report presented to Attorney General Janet Reno last fall shows that after-school programs for school-age kids could also cut crime dramatically. Based on FBI data compiled by the National Center for Juvenile Justice, the report shows that the peak hours for violent juvenile crime are from 2:00 to 8:00 p.m. — from school dismissal until parents get home for dinner. That's when half of each day's juvenile crime occurs. When the final school bell rings, leaving millions of young people without adult supervision or constructive activities, violent juvenile crime suddenly *triples* and prime time for juvenile crime begins.[3]

Being unsupervised after school also doubles kids' chances of experimenting with alcohol and drugs and getting hooked on tobacco.[4] Research indicates that teen sex is also at its most prevalent during the hours just after school.[5]

With intensive recruiting, after-school programs have cut crime by as much as 75 percent in some high-crime neighborhoods.[6]

After-school programs also help young people develop important skills and good moral values. Participants in after-school programs are more likely to do well in school, to treat adults with respect, and to resolve conflicts without violence.[7]

But after-school programs are unavailable to most of America's five to seven million latchkey kids.

Police Leaders Support Crime-Preventing Investments in Children and Youth

The resolutions passed over the last 17 weeks by the Police Executive Research Forum, the Major Cities Chiefs, and the National District Attorneys Association reflect an emerging unanimity among anti-crime leaders.

In a Northeastern University poll, 92 percent of police chiefs nation-wide agreed that "America could sharply reduce crime if government invested more" in "fully funding Head Start for infants and toddlers" and "providing after-school programs and mentoring" for older kids. Nine out of ten chiefs also agreed that "if America does not pay for greater investments to help children and youth now, we will all pay far more later in crime, welfare and other costs."[8]

And when asked to identify the "most effective" long-term crime prevention strategy, the chiefs chose "increasing investment in programs that help all children and youth get a good start" nearly four-to-one over "trying more juveniles as adults" or even "hiring additional police officers."[9]

From hard experience on the front lines, we know that when our leaders fail to invest in quality early childhood care and after-school programs, they force police to fight crime with one hand tied behind our backs.

Saving Money, As Well As Lives

These crime-preventing investments don't just save lives, *they save millions of tax dollars.* The RAND Corporation, an independent economic research and analysis group, recently released a study showing that when targeted to serve at-risk young families, quality early childhood programs can actually produce *savings* for the government — from decreased crime and welfare costs, better academic outcomes and higher earnings later on — far greater than their cost.[10]

Economist Steven Barnett found the High/Scope Perry Preschool project saved *more than seven dollars in later crime costs for every dollar invested* in its preschool and parental home-visiting program. Barnett estimates that the cost — including increased crime and welfare costs, among others — of failing to provide at least two years of quality early childhood care and education to low-income children is approximately $100,000 per child. That's a total of about $400 billion for all poor children now under five.[11]

In other words, the federal treasury would actually have *more* money — to "save Social Security," to cut taxes, or to put to other uses — a few years from now if we invest *today* in effective early childhood programs.

"The question is not whether we can afford these programs," says former U.S. Attorney General Elliot L. Richardson, one of FIGHT CRIME: INVEST IN KIDS' co-founders. "It's whether we can afford to jeopardize the safety of millions of Americans by ignoring them. When child care and after-school programs save dollars and cut crime, why shouldn't Congress and state legislatures provide the funding that will enable communities to get the job done?

"Indeed, it is hard to imagine any other investment we can make which will so substantially reduce budgetary demands on state and federal governments in the years to come — while beginning to save thousands of innocent lives almost immediately."

Ramifications for Public Policy in 1998 and Beyond

Everyone knows delivery of services for kids must take place not in Congress or state capitols but in our communities, through partnerships of schools, parents, businesses and volunteer groups. But there is no more fundamental government responsibility than protecting the public safety — and that means governments must provide the funds that will enable communities to see that every kid has access to quality child care and after-school programs.

"If we pretend that building more prisons to punish criminals *after* people are hurt is a substitute for investing in the programs we know can help kids become good neighbors instead of criminals, we'll always be too late to undo shattered lives and broken hearts," warns Marc Klaas of Sausalito, Calif., whose daughter Polly was abducted and murdered in 1993. "No punishment for her killer can bring Polly back. But we could be saving thousands of lives — and sparing thousands of families unimaginable heartbreak — by investing up front in the programs proven to turn kids away from crime."

Today, 48 states and the federal government have budget surpluses, but every American family is threatened by a deficit as severe as any we have faced. It is a *crime prevention deficit* — the gaping shortfall in our investment in helping kids get the right start.

To meet its responsibility to protecting public safety, Congress should use budget surpluses and new tobacco revenues to shrink this crime prevention deficit by:

- Providing communities with the funds to ensure that every child has access to quality early childhood education and care at a price their parents can afford.

- Providing Head Start — and Early Head Start or other quality programs for kids under three — with the resources to offer top quality, full-day, year-round programs for all the children who need them.

- Assuring that all children have access to quality after-school programs that help keep them safe from violence, pregnancy and drugs, and help them develop the values and skills they need to become responsible adults.

- Protecting their plan from becoming yet another high-sounding but never-funded platitude by earmarking permanent revenues to pay for these investments.

As individuals, we are all accustomed to investing in the future — in pension plans, in our kids' college funds, in the things we own. Police, prosecutors and crime victims are now stepping forward to say that as a nation, we must do not less: We can make ourselves and our children safer by investing in America's most vulnerable kids, instead of waiting to spend far more — in money and lives — on those who become 'America's Most Wanted' adults.

Thank you.

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[1] Schweinhart, L.J., H.V. Barnes and D.P. Weikart, *Significant Benefits: The High/Scope Perry Preschool Study Through Age 27* (Ypsilanti, MI: High-Scope Press, 1993).

[2] Lally, J.R., P.L. Mangione and A.S. Honig, "The Syracuse University Family Development Research Program: Long-Range Impact of an Early Intervenion with Low-Income Children and Their Families" in D.R. Powell, ed., *Parent Education as Early Childhood Intervention: Emerging Directions in Theory, Research and Practice* (Norwood, NJ: Ablex Publishing, 1988).

[3] Fox, J.A. and S.A. Newman, *After-School Programs or After-School Crime* (Washington, D.C.: Fight Crime: Invest In Kids, September 1997).

[4] Richardson, J.L. et al., "Relationship Between After-School Care of Adolescents and Substance Use, Risk Taking, Depressed Mood and Academic Achievement," *Pediatrics* 92, 32-38; and Richardson, J.L. et al., "Substance Use Among Eighth-Grade Students Who Take Care of Themselves After School," *Pediatrics* 84 (3), 556-566.

[5] In "Sexual and Contraceptive Experience of Young Unmarried Women in the United States" (*Family Planning Perspectives* 9, April 1977), M. Zelnik and J.F. Kantner found that a majority of sexually active teen-age girls reported their first and most recent episodes of intercourse occurred in their home or the partner's home. When will teens have the privacy to engage in sex at home? The most likely answer is during the unsupervised hours between the end of the school day and the end of parents' work days.

[6] Jones, M.A. and D.R. Offord, "Reduction of Antisocial Behavior in Poor Children by Nonschool Skill Development," *Journal of Child Psychology and Psychiatry and Allied Disciplines* 30 (1989), 737-750.

[7] Miller, B.M., *Out-of-School Time: Effects on Learning in the Primary Grades* (Wellesley, MA: School-Age Child Care Project [now called the National Institute on Out-of-School Time], Center for Research on Women, Wellesley College, 1995); and Posner, J.K. and D.L. Vandell, "Low-Income Children's After-School Care: Are There Beneficial Effects of After-School Programs," *Child Development* 65 (Society for Research in Child Development, 1994), 440-456.

[8] "Police Chiefs Say More Government Investments in Kids are Key to Fighting Crime" (Washington, D.C.: Fight Crime: Invest In Kids, 1996). This poll of 548 police chiefs, representing towns and cities of all sizes across the United States, was conducted by Northeastern University's Center for Criminal Justice Policy Research, under the direction of Professor Jack McDevitt.

[9] Ibid.

[10] Karoly, L.A. et al. *Investing In Our Children: What We Know and Don't Know About the Costs and Benefits of Early Childhood Interventions* (Santa Monica, CA: RAND, April 1998). This report is available on the Internet at http://www.rand.org/HOT/index.html.

[11] Barnett, W.S., "Cost Benefit Analysis" in Schweinhart, L.J., H.V. Barnes and D.P. Weikart, *Significant Benefits: The High/Scope Perry Preschool Study Through Age 27* (Ypsilanti, MI: High-Scope Press, 1993).

Child Care for Young Children: Quality

"Recent brain research suggests that warm, responsive child care is not only comforting for an infant; it is critical to healthy development."

- Rethinking the Brain: New Insights into Early Development
Families and Work Institute (1997)

● **Higher quality child care for very young children (0 to 3) was consistently related to high levels of cognitive and language development.** "Mother-Child Interaction and Cognitive Outcomes Associated with Early Child Care", NICHD Early Child Care Research Network (1997)

● **Studies have raised concerns about the quality of care:**

- A four-state study of quality in child care centers found **only one in seven (14%) were rated as good quality.** *Cost, Quality and Child Outcomes in Child Care Centers, (Executive Summary)* University of Colorado at Denver (1995)
- **Thirteen percent of regulated and 50 percent of nonregulated family child care providers offer care that is inadequate.** *The Study of Children in Family Child Care and Relative Care*, Families and Work Institute (1994)
- **"The quality of services provided by most centers was rated as barely adequate."** *The National Child Care Staffing Study* (Executive Summary), National Center for the Early Childhood Workforce (1989)

● **"[M]any children living in poverty receive child care that, at best, does not support their optimal development and, at worst, may compromise their health and safety."** *New Findings on Children, Families, and Economic Self-Sufficiency*, National Research Council, Institute of Medicine (1995)

What Works to Improve the Quality of Child Care

● **Children who receive warm and sensitive caregiving are more likely to trust caregivers, to enter school ready and eager to learn, and to get along well with other children**. . . To ensure that child care settings nurture children, protect their health and safety, and prepare them for later school success, better qualified staff are essential." *Starting Points: Meeting the Needs of Our Youngest Children*, Carnegie Task Force on Meeting the Needs of Young Children (1994)

● **"[S]maller group sizes, higher teacher/child ratios and higher staff wages result in quality child care.** Outcomes for children are also better when they attend programs that include a curriculum geared to young children, well prepared staff and where parents are involved in programming." *Early Childhood Care and Education: An Investment That Works*, National Conference of State Legislatures (1997)

● **Any child care setting will benefit from a health consultant**. . . to advise on potential infectious diseases, explain symptoms and treatments to families, plan health alert procedures when infectious disease occurs, and assist with public health reporting requirements. *Caring for Infants and Toddlers in Groups*, Zero to Three: National Center for Infants, Toddlers and Families (1995)

● **States with stronger licensing requirements had a greater number of good-quality centers** according to recent research. *Cost, Quality and Child Outcomes in Child Care Centers*, University of Colorado at Denver (1995)

● **Voluntary conformity to higher standards through professional center accreditation or through meeting another set of quality standards also increased the likelihood of higher classroom quality.** *Cost, Quality and Child Outcomes in Child Care Centers*, University of Colorado at Denver (1995)

For additional information, contact the National Child Care Information Center at (800) 616-2242 or visit the Web site at ***http://ericps.crc.uiuc.edu/nccic/nccichome.html***

A Profile of the Child Care Work Force

Approximately three million child care teachers, assistants, and family child care providers in the U.S. care for 10 million children each day.

Who are the child care teaching staff?

97% are female
41% have children
10% are single parents

● Child care teaching staff earn an average of $6.89 per hour or $12,058 per year (based on 35 hours per week and 50 weeks per year) (data from *Cost, Quality and Child Outcomes in Child Care Centers*, Technical Report 1995, salary data are in 1993 dollars).

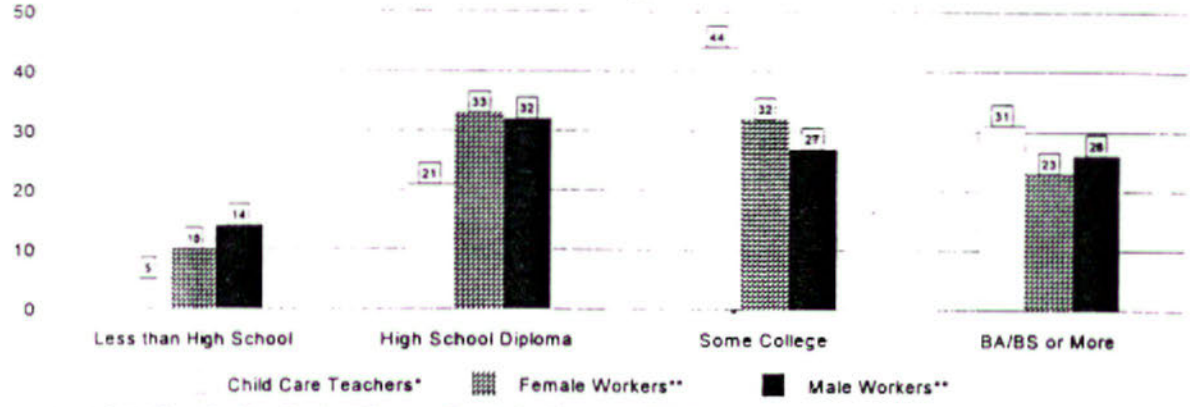
● Only 18 percent of child care centers offer fully paid health coverage to teaching staff.

● Although they earn lower wages, child care teachers are better educated than the general population.

● One-third of all child care teachers leave their centers each year.

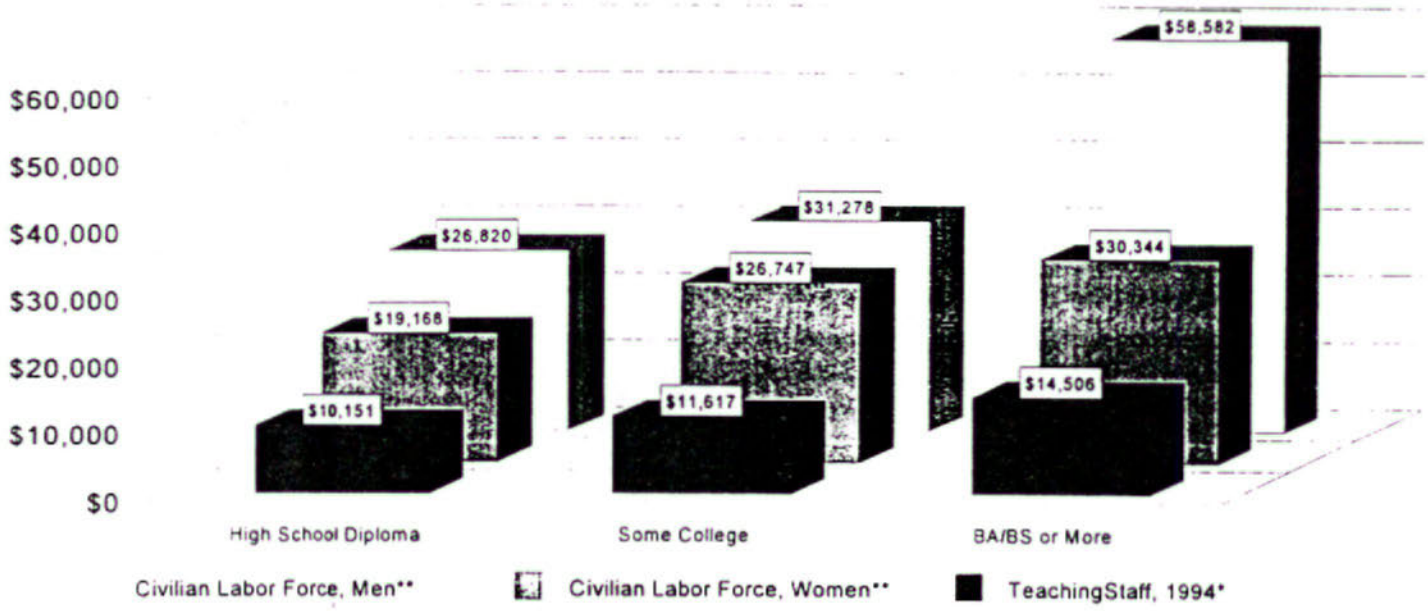
● Family child care providers who care for and educate young children in their homes also have very low earnings. Providers earn $9,528 annually after expenses (data from *The Economics of Family Child Care Study*, a forthcoming publication from Wheelock College, earnings in 1996 dollars). Unregulated providers, who care for fewer children and are offered fewer supports; earned just $5,132 after expenses.

Education of Child Care Teaching Staff Versus All Workers***



*National Child Care Staffing Study **Current Population Surveys, 1995. Bureau of Labor Statistics, U.S. Department of Labor

Annual Wages of Child Care Teaching Staff Versus All Workers***



*National Child Care Staffing Study, wages in 1996 dollars **Current Population Surveys, 1996. Bureau of Labor Statistics, U.S. Department of Labor

****These charts only provide information on center-based teaching staff.*

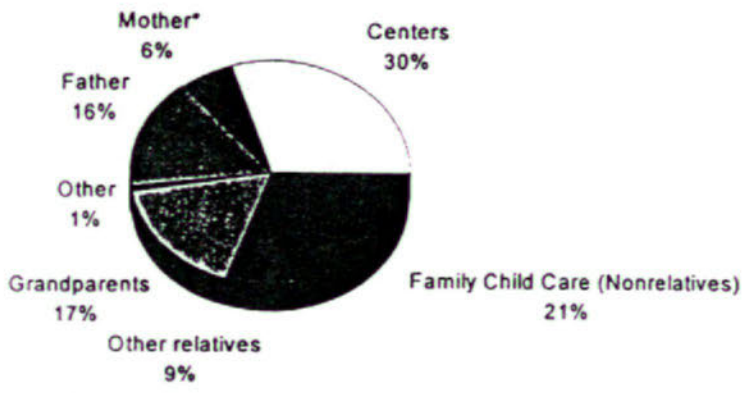
This fact sheet is primarily excerpted from materials developed by the National Center for the Early Childhood Work Force (NCECW). (phone: 202-737-7700; E-mail: **ncecw@ncecw.org**).

Child Care for Young Children: Demographics

- According to the National Center for Education Statistics, in 1995 there were approximately 21 million infants, toddlers, and preschool children under the age of six in the U.S., more than 12.9 million of these children were in child care.†
- Forty-five percent of children under age one were in child care on a regular basis.†
- While use of center-based care increased from 1988 to 1993, most young children are still in a home-based setting, including family child care.**

Primary Child Care Arrangements Used by Families with Employed Mothers for Preschoolers: 1993

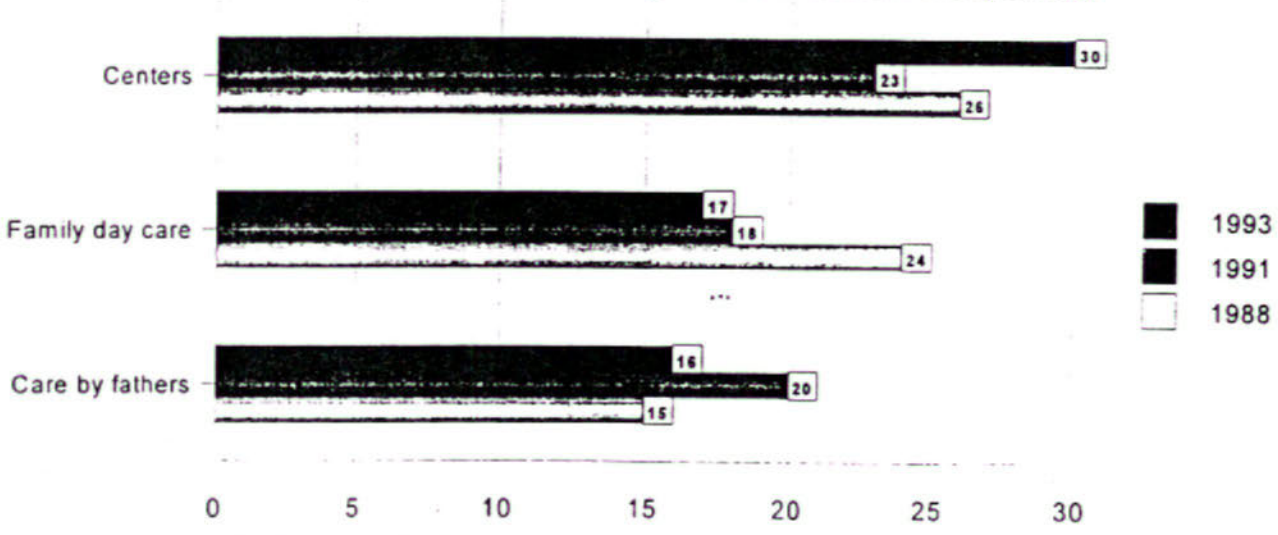
(Percent of preschoolers of working mothers in selected arrangements)



* Includes mothers working at home or away from home. Source: Casper, L.M. *Who's Minding Our Preschoolers?* U.S. Bureau of the Census, Current Population Reports, P-70, no. 53, Washington, DC 1996

Changes in Selected Child Care Arrangements: 1988 to 1993

(Percent of preschoolers of working mothers in selected arrangements)



Source: Casper, L.M. *Who's Minding Our Preschoolers?* U.S. Bureau of the Census, Current Population Reports, P-70, no. 53, Washington, DC 1996

This profile of child care demographics has been excerpted from information provided by the † National Center for Education Statistics, U.S. Department of Education and the **U.S. Bureau of the Census.

For additional information, contact the National Child Care Information Center at (800) 616-2242 or visit the Web site at ***http://ericps.crc.uiuc.edu/nccic/nccichome.html***

Out-of-School Time
School-Age Care

According to the Bureau of the Census, in 1997 there were 38.8 million children between the ages of 5 and 14 years living in the U.S. There are approximately 24 million school-age children with parents in the workforce or pursuing education (based on 1993 SIPP data from the Bureau of the Census).

Care Arrangements of School-Age Children

● Experts estimate that **nearly 5 million school-age children spend time as latchkey kids without adult supervision during a typical week.**

● **Approximately 1.7 million children in kindergarten through grade 8 were enrolled in 49,500 formal before- and/or after-school programs in 1991,** according to the National Study of Before and After School Programs.

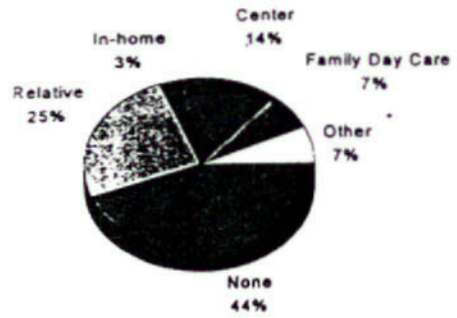
● In 1993-94, according to the National Center for Education Statistics, there were 18,111 before- or after-school programs in public schools—70% of public schools did not offer extended learning programs.

● School-age children are likely to spend time in many different care arrangements. According to the National Child Care Survey (1990), **76 percent of school-age children with an employed mother spend time in at least two child care arrangements during a typical week, in addition to their time in school.**

● According to the National Child Care Survey, children aged 5 to 12 with employed mothers use the following types of supplemental care: 7% are in family day care; 14% are in centers, 3% are cared for by in-home providers, 25% are cared for by relatives and 44% do not use supplemental care.

Use of Supplemental Care,

Children 5 to 12 with Employed Mothers



The Effects of Out-of-School Time on Children

● Children under adult supervision in a formal program during after-school hours have demonstrated improved academic achievement and better attitudes toward school than their peers in self- or sibling care. Miller and Marx, 1990 in *Supplement o the National Assessment of Chapter 1*

● Youth are at greatest risk of violence after the regular school day. Youth between the ages of 12 and 17 are most at-risk of committing violent acts or being victims between 2:00 pm and 6:00 pm—a time when they are not in school. *Fight Crime: Invest in Kids*, 1997

The most frequently mentioned barrier to participation is the parents' inability to pay the tuition and fees charged by programs. Other barriers include availability, quality of activities, inadequate facilities, transportation, high staff turnover, hours of the program and lack of resources.

Components of Successful Before- and After-School Programs include: linkages between after-school and regular school programs, children's participation in age appropriate learning activities, hiring of qualified staff, low student-staff ratio, involvement of parents, program evaluation and coordination with the schools and other community organizations.

For information on what states and communities are doing to meet the need for school-age care, contact the National Institute on Out of School Time (formerly the School-Age Child Care Project), Center for Research on Women, Wellesley College at (617) 283-2547 or visit the World Wide Web site at: http://www.wellesley.edu/WCW/CRW/SAC/. For additional information on extended learning in after-school programs in schools, contact the U.S. Department of Education, please call (800) USA-LEARN or visit the World Wide Web site at: http://www.ed.gov/PFIE.

Economics of Child Care

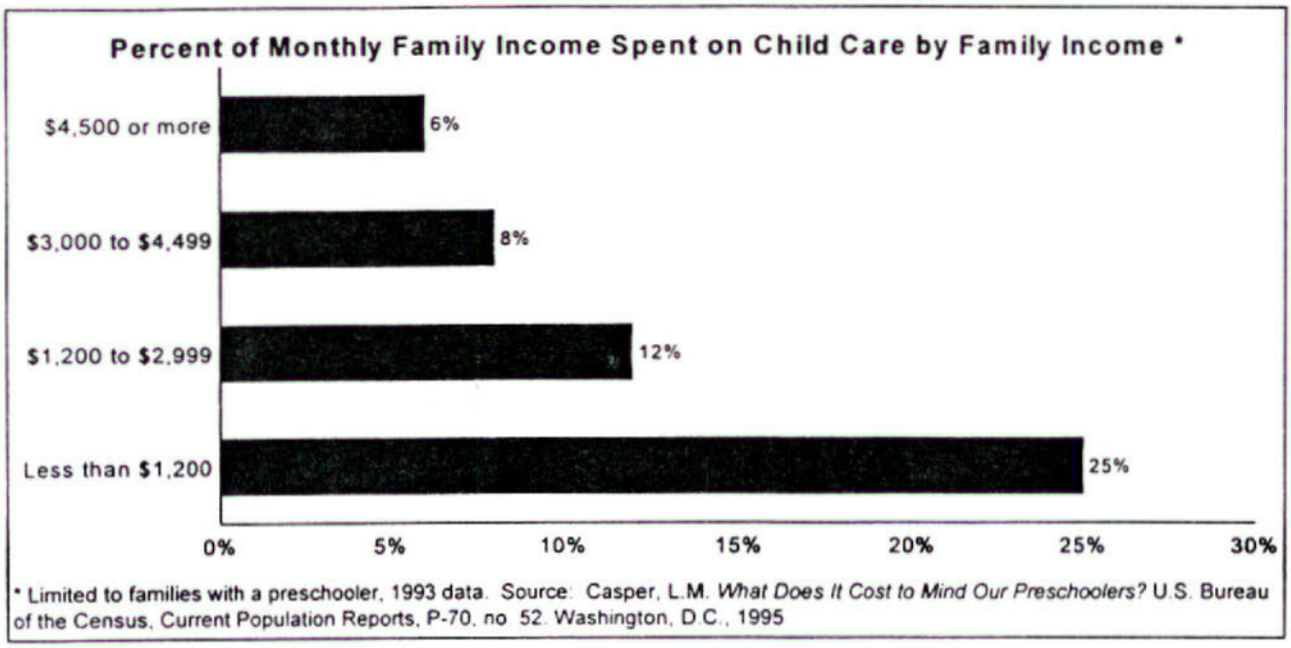
● In 1994, 62% of married mothers with a child under age six were in the workforce, compared with 30% in 1970.†

● The increased employment of mothers outside the home has led to a sharp increase in the use of child care over the past several decades. Eight of 10 employed mothers with children under six are likely to use some form of nonparental child care arrangement.†

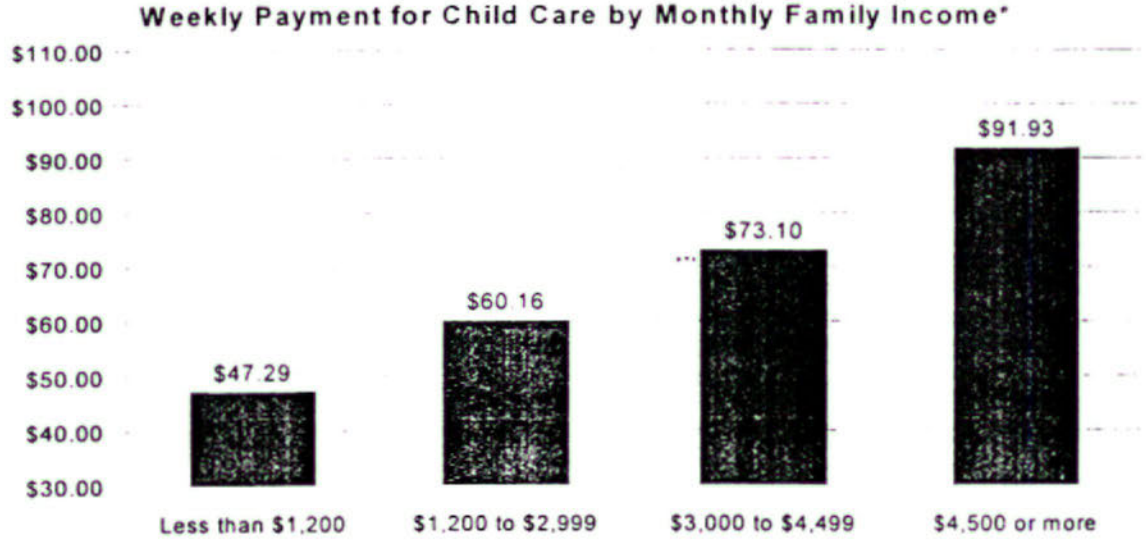
● In 1990, 7.2 million mothers with 11.7 million children under age 15 worked full or part time during nonstandard hours.**

● In 1993, the average family with an employed mother and a child under age five spent about $74 per week for child care for all preschoolers in the family.*

● Families with annual incomes under $14,400 that paid for care for children under five spent 25% of their income on child care, compared with 6% for families with incomes of $54,000 or more.*



* Limited to families with a preschooler, 1993 data. Source: Casper, L.M. *What Does It Cost to Mind Our Preschoolers?* U.S. Bureau of the Census, Current Population Reports, P-70, no. 52. Washington, D.C., 1995



*Limited to families paying for child care for preschoolers, 1993 data. Source: Casper, L.M. *What Does It Cost to Mind Our Preschoolers?* U.S. Bureau of the Census, Current Population Reports, P-70, no. 52. Washington, D.C., 1995

Information in this fact sheet is excerpted from † Sandra L. Hofferth, "Child Care in the United States," *The Future of Children*, vol. 6, no. 2 Summer/Fall 1996, with additional information from: National Center for Education Statistics, U.S. Department of Education; *U.S. Bureau of Census; **Women's Bureau, U.S. Department of Labor.

For additional information, contact the National Child Care Information Center at (800) 616-2242 or visit the Web site at ***http://ericps.crc.uiuc.edu/nccic/nccichome.html***

PRESIDENT CLINTON'S PROPOSAL: CHILD CARE THAT STRENGTHENS AMERICAN FAMILIES

"I am proud to propose the single largest child care investment in the history of our nation. It is a comprehensive and fiscally-responsible plan to make child care more affordable and accessible, to raise the quality and assure the safety of care for millions of American families. This is an issue that touches nearly every family, one that should rise above politics and partisan interests."

President Bill Clinton
January 7, 1998

President Clinton announced an historic initiative to improve child care for America's working families. The initiative proposes $21.7 billion over five years for child care, to **help working families pay for child care, build a good supply of after-school programs, improve the safety and quality of care, and promote early learning.**

Ensuring affordable, accessible, safe child care. The President's child care initiative responds to the struggles our nation's working parents face in finding child care they can afford, trust and rely on. The new initiative:

- **Makes child care more affordable for working families.** To help working families struggling to meet the costs of child care, the initiative invests $7.5 billion over five years to double the number of children receiving child care subsidies to more than two million by the year 2003. The initiative also invests $5.2 billion over five years to increase tax credits for child care for three million families and provides a new tax credit for businesses that offer child care services to their employees.

- **Increases access to and promotes early learning and healthy child development.** To improve early learning, the initiative includes $3 billion over five years to establish an Early Learning Fund that helps local communities improve the quality and safety of child care for children ages zero to five. The initiative also increases investment in Head Start and doubles the number of children served by Early Head Start to 80,000.

- **Improves the safety and quality of child care.** To help ensure safe, quality child care, the initiative: steps up enforcement of state health and safety standards in child care settings, facilitates background checks on child care providers, increases scholarships and training for child care providers, and invests in child care research and evaluation.

- **Expands access to safe after-school care.** To help create safe, positive learning environments for American school-age children who lack adult supervision during a typical week, the initiative increases the 21st Century Learning Center Program by $800 million over five years to provide after-school care for up to half a million children a year. The initiative will also improve coordination of federal after-school initiatives to help communities.

Child Care Block Grant Increase	$7.5 billion over five years
Child and Dependent Tax Credit Reform	$5.2 billion over five years
Tax Credit for Businesses	$500 million over five years
After-School Program	$800 million over five years
Early Learning Fund	$3.0 billion over five years

Head Start Increase	$3.8 billion over five years
Standards Enforcement Fund	$500 million over five years
Child Care Provider Scholarship Fund	$250 million over five years
Research and Evaluation Fund	$150 million over five years
TOTAL:	**$21.7 billion over five years**

ZERO TO THREE

INCLUDES:
Home Visiting Programs
Healthy Families
20th Anniversary Salute, Kennedy Center
Zero to Threee Press Contacts

FOR IMMEDIATE RELEASE
FEBRUARY 9, 1998

CONTACT: MARSHA BERRY
STEVEN COHEN
JULIE MASON
202-456-2960

FIRST LADY HILLARY RODHAM CLINTON'S SCHEDULE FOR TUESDAY, FEBRUARY 10, 1998

Washington, D.C. - - First Lady Hillary Rodham Clinton will spotlight the important role home-visiting programs play in strengthening families and in promoting healthy development in a child's earliest years. Specifically, Mrs. Clinton will highlight the home-visiting program *Healthy Families Alexandria*, a part of the national home-visiting effort *Healthy Families America*. After observing a routine home-visit, Mrs. Clinton will participate in a roundtable discussion with parents and experts in the fields of home-visiting and child development. Home-visiting is one important activity which will be supported through the Early Learning Fund, a central proposal of the President Clinton's child care initiative. The Early Learning Fund will benefit families by providing challenge grants to communities for programs that promote early learning and improve the quality and safety of child care for children age five or under.

Later in the day, Mrs. Clinton will participate in "An Evening of Conversation, Entertainment, and Inspiration", a gala to salute the 20th anniversary of *Zero to Three*. *Zero to Three* is a nonprofit national organization dedicated to promoting the social, emotional, cognitive, and physical development of children from birth through age three.

EVENT:	**Discussion on Home-Visiting Programs**
TIME:	2:30 p.m.
DATE:	February 10, 1998
LOCATION:	Function Room Mark Center Club 5708 Merton Court Alexandria, Virginia

PRESS NOTE
This event is open to the press.

Preset:	12:00 p.m. - 12:30 p.m.
Final access:	1:45 p.m. - 2:00 p.m.

Throw is approximately 30' - 35". A mult will be provided.

CREDENTIALING INFORMATION
No pre-credentialing is required. Reporters will be asked to show standard press identification to gain access to the event. Press should enter via side entrance to Mark Center Club. The on-site contact is Eileen Parise.

EVENT:	**"An Evening of Conversation, Entertainment, and Inspiration"**
TIME:	7:30 p.m.
DATE:	February 10, 1998
LOCATION:	Terrace Theater Kennedy Center Washington, DC

PRESS NOTE

This event is open to the press. A mult will be provided.

Pre-set	6:15 p.m. - 6:45 p.m.
Final access:	7:15 p.m.

CREDENTIALING INFORMATION

No pre-credentialing is required. Reporters will be asked to show standard press identification to gain access to the event. The on-site contact is Julie Demeo.

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First Name	Last Name	Title	Institution/Periodical/Station	Address	Town	State	Zip Code	Phone Number	
NEWSPAPERS									
Sally	Squires	Health Reporter	WASHINGTON POST	1150 15th St. NW	Washington	DC	20071	202-334-5018	
Sandy	Rovner	Health Reporter	WASHINGTON POST	1150 15th St. NW	Washington	DC	20071	202-334-6039	
David	Brown	Health Editor	WASHINGTON POST	1150 15th St. NW	Washington	DC	20071	202-334-5049	
Barbara	Vobejda	Parenting Reporter	WASHINGTON POST	1150 15th St. NW	Washington	DC	20071	202-334-7430	
Bob	Price	Parent Child Editor	WASHINGTON POST	1150 15th Street, NW	Washington	DC	20071	202-334-5031	202-334-6471
Liz	Castor	Lifestyle Editor	WASHINGTON POST	1150 15th Street, NW	Washington	DC	20071	202-334-6281	202-334-6471
Judy	Mann	Metro Columnist	WASHINGTON POST	1150 15th Street, NW	Washington	DC	20071	202-334-6109	202-334-6471
Tom	Diamond	Business (Medical/Health) Editor	WASHINGTON POST	1150 15th Street, NW	Washington	DC	20071	202-334-7320	202-496-3936
	Stolberg		NEW YORK TIMES	1627 I Street, NW 7th FL	Washington	DC	20006	202-862-0300	
Cheryl	Price	Medical/Health Reporter	WASHINGTON TIMES	3600 New York Ave., N.E.	Washington	DC	20002	202-636-3160	
Joyce	Bradford	Health Editor	WASHINGTON TIMES	3600 New York Ave., N.E.	Washington	DC	20002-1947	202-636-4890	
Allen	Carlson	Calendar Editor	WASHINGTON TIMES	3600 New York Ave., N.E.	Washington	DC	20002-1947	202-636-3230	
Kristy	Oden	Editor	WALL STREET JOURNAL	1025 Connecticut Ave., NW #800	Washington	DC	20036	202-862-9607	
Henry	Greenberger	Business Columnist : Washington Insight	WALL STREET JOURNAL	1025 Connecticut Ave., NW #800	Washington	DC	20036	202-862-9212	
Robert									
			CHRISTIAN SCIENCE MONITOR	910 16th St., NW	Washington	DC	20006	202-785-4000	
Ann	Tyson	Staff Writer	FAIRFAX JOURNAL	2720 Prosperity Avenue	Fairfax	VA	22031	703-646-8343	
Kristen	Patterson	Health Editor	PRINCE GEORGE'S JOURNAL	9410 Annapolis Road	Lanham	MD	20706-3026	301-459-3131	
Maryann	Mulligan	N/A	PRINCE GEORGE'S JOURNAL	9410 Annapolis Road	Lanham	MD	20706-3026	301-459-3131	
Claudia	Rosenbaum	N/A	ROCKVILLE MONTGOMERY JOURNAL	2 Research Court	Rockville	MD	20850-3211	301-670-1400	
Peter	Kelly	Health Reporter							
			NEWSPAPER MAGAZINES						
			WASHINGTON POST MAGAZINE	1150 15th St. NW	Washington	DC	20071	202-334-4172	
Larry	Fox	Calendar/Events Columnist							
			WEEKLIES						
			CITY PAPER	2390 Champlain Street NW	Washington	DC	20009	202-332-2100	
Jack	Shafer	Editor	CAPITAL SPOTLIGHT NEWSPAPER	2112 New Hampshire Avenue NW, Suite B2	Washington	DC	20009	202-966-5200	
Mary	Shorter	Health Editor	WASHINGTON CITIZEN	4101 River Road N.W.	Washington	DC	20016	202-966-5575	
Sarah	Blumenthal	Medical/Health Columnist	THE CURRENT NEWSPAPERS	5125 MacArthur Blvd., N.W. #10	Washington	DC	20016	202-244-7223	
Chris	Kain	Managing Editor	THE CURRENT NEWSPAPERS	5125 MacArthur Blvd., N.W. #10	Washington	DC	20016	202-244-7223	
Barbara	Langdon	Features Editor	THE GEORGETOWNER	PO Box 3528	Washington	DC	20007	202-338-4677	
Robert	Devaney	Health Editor	THE WASHINGTON CITIZEN	4101 River Road N.W.	Washington	DC	20016	202-966-5575	
Vanessa	Lord	Medical/Health Editor "Making Rounds on the Medical Beat"							
			PRINCE GEORGE'S SENTINEL	9458 Lanham Severn Road, Suite 203	Seabrook	MD	20706-2642	301-306-9500	
James	McCormick	Editor	WASHINGTON BLADE	1408 U Street, NW 2nd Floor	Washington	DC	20009-3916	202-797-7000	
Mark	Sullivan	Managing Editor	WASHINGTON AFRO-AMERICAN	1612 14th Street, NW	Washington	DC	20009-4307	202-332-0080	
LaWanza	Spears	Editor	WASHINGTON INFORMER	3117 Martin Luther King Avenue, SE	Washington	DC	20032-1537	202-561-4100	
Alvin	Peabody	Assignment Editor							
Television									
Brad	Bell	Reporter	WJLA-TV (ABC)	4461 Connecticut Avenue, N.W.	Washington	DC	20008	202-364-7777	
Jennifer	Donaldson	N/A	"Working Woman Magazine" WJLA-TV (AE	4461 Connecticut Avenue, N.W.	Washington	DC	20008	N/A	
Rea	Blakey	Health Reporter	WJLA-TV (ABC)	4461 Connecticut Avenue, N.W.	Washington	DC	20008	202-364-7700	
Gary	Wordlaw	News Director	WJLA-TV (ABC)	4461 Connecticut Avenue, N.W.	Washington	DC	20008	202-364-7700	
Dennis	Lortz	Producer	WJLA-TV (ABC) Morning Show	4461 Connecticut Avenue, N.W.	Washington	DC	20008	202-364-6808	
Natalie	Joost	Assignment Editor	NEWS CHANNEL 8	7600 D Boston Boulevard	Springfield	VA	22153	703-912-5300	
Bill	Albert	Assignments Editor	WTTG-TV (FOX)	5151 Wisconsin Avenue NW	Washington	DC	20016	202-244-5151	
Sandra	Young	Features Assignments Editor	WTTG-TV (FOX)	5151 Wisconsin Avenue NW	Washington	DC	20016	202-244-5151	

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Tom	Young	N/A	WTTG-TV (FOX) "Fox Morning News"	5151 Wisconsin Avenue NW	Washington	DC	20016	202-895-3131	
Phil	Mellin	News Director	WTTG-TV (FOX)	5151 Wisconsin Avenue NW	Washington	DC	20016	202-244-5151	
Paul	Irvin	Managing Editor	WRC-TV (NBC)	4001 Nebraska Avenue, N.W.	Washington	DC	20016	202-855-4000	
Dick	Reingold	News Director	WRC-TV (NBC)	4001 Nebraska Avenue, N.W.	Washington	DC	20016	202-855-4000	
Maria	Checchia	Medical Producer	WUSA-TV (CBS)	4100 Wisconsin Ave., N.W.	Washington	DC	20016	202-895-5999	
Jack	Heinbaugh	Producer, 4:00 News	WUSA-TV (CBS)	4100 Wisconsin Ave., N.W.	Washington	DC	20016	202-895-5999	
Sandra	Butler-Jones	Broadcast House Live	WUSA-TV (CBS)	4100 Wisconsin Ave., N.W.	Washington	DC	20016	202-895-5750	
Andrea	McCarren	Reporter	ABC	3007 Tilden Street, N.W.	Washington	DC	20008	202-364-7715	202-362-1124
Eugenia	Halsey	Producer/Healthcare	CNN/DC	820 First St. NE	Washington	DC	20002	202-898-7631	202-898-7604
Radio									
Kathy	Merritt	News Director	WAMU-FM	4400 Massachusetts Ave., NW	Washington	DC	20016-8082	202-885-3825	
Elaine	Bole	Producer, "The Derek McGinty Show"	WAMU-FM	4400 Massachusetts Ave., NW	Washington	DC	20016-8082	202-885-1200	
Darcy	Bacon	Producer, "The Diane Rehm Show"	WAMU-FM	4400 Massachusetts Ave., NW	Washington	DC	20016-8082	202-885-1200	
Fred	Fiske	Producer, "The Fred Fiske Show"	WAMU-FM	4400 Massachusetts Ave., NW	Washington	DC	20016-8082	202-885-1200	
Herman	Waston	Assignment Editor	WHUR-FM, CBS	529 Bryant, NW	Washington	DC	20059	202-806-3500	
Tyron	Stanley	"Horizons"	WHUR-FM, CBS	529 Bryant, NW	Washington	DC	20059	202-806-3500	
Mike	Elston	News Director	WJFK-FM	10800 Main Street	Fairfax	VA	22030	703-691-1900	
Robb	Spewak	Producer, "The Washington Weekly"	WJFK-FM	10800 Main Street	Fairfax	VA	22030	703-691-1900	
Kelly	Wheeler	News Director	WKYS-FM	4001 Nebraska Avenue, N.W.	Washington	DC	20016-2733	202-686-9300	
John	Matthews	News Director	WMAL-AM, ABC	4400 Jennifer Street, NW	Washington	DC	20015-2113	202-686-3100	
John	Butler	News Director	WMAL-AM, ABC	4400 Jennifer Street, NW	Washington	DC	20015-2113	202-686-3100	
Gloria	Mynott	News Director	WPFW-FM	702 H Street, N.W.	Washington	DC	20001-3748	202-588-0999 X336	
Barbara	Britt	News Director	WRQX-FM	4400 Jennifer Street, NW	Washington	DC	20015-2113	202-686-3100	
Michelle	Komas	News Director	WTOP-AM, CBS	3400 Idaho Avenue NW	Washington	DC	20016-3046	202-895-5000	
Bob	Madigan	News Anchor, "Issues"	WTOP-AM, CBS	3400 Idaho Avenue NW	Washington	DC	20016-3046	202-895-5000	
Kate	Ryan	News Director	WASH-FM (CBS)	3400 Idaho Avenue NW	Washington	DC	20016-3046	202-895-5000	
Ernest	White	Assignment Editor	WDCU-FM	4200 Connecticut Ave., NW	Washington	DC	20008-1174	202-274-5090	
Richard	Peters, MD	Producer, "The Medical Record"	WDCU-FM	4200 Connecticut Ave., NW	Washington	DC	20008-1174	202-282-7588	
Dan	Gawthrop	Public Service Director	WETA-FM	PO Box 2626	Washington	DC	20013	703-998-2790	
Shelly	Bowers	News Director	WMMJ-FM	400 H Street, NE	Washington	DC	20002-4336	202-675-4800	
WIRES									
Lauren	Neergaard	Medical/Health Business Correspondant	ASSOCIATED PRESS	2021 K. St. NW #606	Washington	DC	20006	202-776-9467	
Laura	Meckler	Medical/Health Correspondant	ASSOCIATED PRESS	2021 K. St. NW #606	Washington	DC	20006	202-776-9502	
Simeon	Margolis	Medical/Health - "On Health Call"	LA TIMES - WASHINGTON POST NEWS SERVICE	1150 15th St. NW	Washington	DC	20071	410-332-6000	
Rachel	Jones	Family Living Correspondent	KNIGHT-RIDDER/TRIBUNE INFORMATION SERVICES/CHILD WIRE, INC.	529 14th Street N.W. #700	Washington	DC	20045-1707	202-383-6035	202-383-6075
Walter K.	Veazey	Lifestyle Editor	SCRIPPS HOWARD NEWS SERVICE	1090 Vermont Avenue, NW Suite 1000	Washington	DC	20005	202-408-2736	202-408-5950
PHOTO DESK									
Joe	Elbert	Photo Asst. Managing Editor	WASHINGTON POST	1150 15th St - NW	Washington	DC	20071	202-334-7382	
Glen	Stubbe	Photo Director	WASHINGTON TIMES	3600 New York Ave., NE	Washington	DC	20002	202-636-3095	
INVITED TO EVENT									
Abigail	Trafford	Health Editor	THE WASHINGTON POST	1150 15th Street N.W.	Washington	DC	20071	202-334-7678	
Beth	Frerking		NEWSHOUSE NEWS SERVICE	1101 Connecticut Ave. NW Suite 300	Washington	DC	20036	202-383-7890	
NEWS MAGAZINES									

Doug	Podolsky	Health Editor	U.S. NEWS AND WORLD REPORT	2400 N. Street, NW	Washington DC 20037	202-955-2235	202-955-2056
Rita	Ruben	Medical/Health Senior Editor	U.S. NEWS AND WORLD REPORT	2400 N. Street, NW	Washington DC 20037	202-955-2615	202-955-2478

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National									
Linda	Kanas	Health & Behavior Reporter	USA TODAY	1000 Wilson Blvd.	Arlington Heights	VA	22209	703-276-3786	703-247-3134
Dennis	Kelly	Health and Life Editor	USA TODAY	1000 Wilson Blvd.	Arlington Heights	VA	22209	703-276-3400	
Karen	Peterson		USA TODAY	1000 Wilson Blvd.	Arlington Heights	VA	22209	703-276-3400	
Tamala	Henry	Education Reporter	USA TODAY	1000 Wilson Blvd.	Arlington Heights	VA	22209	703-276-3400	
John	Hillkirk	Business - Managing Editor	USA TODAY	1000 Wilson Blvd.	Arlington Heights	VA	22209	703-276-3728	703-558-3831
Patricia	Edmonds	Associate Editor	USA WEEKEND	1000 Wilson Blvd.	Arlington Heights	VA	22209	703-276-5979	703-276-5979
Elyse	Tanouye	Health Care Staff Reporter	WALL STREET JOURNAL	200 Liberty Street	New York	NY	10281	212-416-2110	212-416-2653
Sue	Schellenberger	Freelance Writer	WALL STREET JOURNAL		(fax only)			503-636-6851	503-636-6951
Scott	Billings	Business Editor	WALL STREET JOURNAL	200 Liberty Street	New York	NY	10281	212-416-2505	
Jane E.	Brody	Personal Health Columnist	NEW YORK TIMES	229 West 43rd Street	New York	NY	10036	212-556-7486	212-556-7306
		Science and Health Desk							
Glenn	Kramon	Business Editor	NEW YORK TIMES	229 West 43rd Street	New York	NY	10036	212-556-4173	212-556-4007
Lynde	McCormick	Business Editor	CHRISTIAN SCIENCE MONITOR	One Norway Street	Boston	MA	02115	617-450-2416	
Marilyn	Gardner	Parenting	CHRISTIAN SCIENCE MONITOR	One Norway Street	Boston	MA	02115	617-450-2468	617-450-2575
Laurel	Walters	Freelance Writer	CHRISTIAN SCIENCE MONITOR	2336 Maybrook Dr.	St. Louis	MO	63122	314-984-8223	
WIRES									
Patricia	Bibby	Features Editor	ASSOCIATED PRESS	50 Rockefeller Plaza	New York	NY	10020	212-621-1500	212-621-1679
Tracey	Lee-Petri	Family Living: "With the Kids"	AVANTI NEWS FEATURES	29106 Palomino Drive	Warren	MI	48093-3505	810-573-2755	810-573-2755
Jennifer	Poyen	Features Editor	COPLEY NEWS SERVICE	P.O. Box 190	San Diego	CA	92112	619-293-1818	619-293-2322
Sylvia	Rimm	Sylvia Rimm on Raising Kids	CREATORS SYNDICATE	5777 W. Century Blvd. #700	Los Angeles	CA	90045-5677	310-337-7003	N/A
Richard	Whitmire	Family Living Correspondent	GANNETT NEWS SERVICE	1000 Wilson Blvd.	Arlington	VA	22209-3901	703-276-5236	703-558-3813
Arlene	Vigoda	Lifetime Reporter	GANNETT NEWS SERVICE	1000 Wilson Blvd., 10th Floor	Arlington	VA	22229-0001	703-276-5457	703-558-3813
Marian	Michaels	Parenting Plus	MICHAELS NEWS	W 10236 Vaudreil Road	Black River Falls	WI	54615-5416	715-284-5636	N/A
Glen	Doman	Kids/On Better Babies	NATIONAL NEWS BUREAU	P.O. Box 43039	Philadelphia	PA	19129-3039	215-546-8088	N/A
Helen	Lee	Acquisitions Director & "Parenting" Column	SINGER MEDIA CORPORATION	1030 Calle Cordillera, #106	San Clemente	CA	92673-6234	714-498-7227	N/A
W.	Griffin	Medical/Health: "Dr. Griffin's Child Care"	SINGER MEDIA CORPORATION	1030 Calle Cordillera, #106	San Clemente	CA	92673-6234	714-498-7227	714-498-2162
Kent	DeLong	Your Child's Health	SINGER MEDIA CORPORATION	1030 Calle Cordillera, #106	San Clemente	CA	92673-6234	714-498-7227	N/A
Margeurite	Kelly	Family Living: "The Family Almanac"	TRIBUNE MEDIA SERVICES	435 N. Michigan Avenue, #1500	Chicago	IL	60611-4003	312-222-4444	312-222-8630
Allan	Brucherheim	The Family Doctor	TRIBUNE MEDIA SERVICES	435 N. Michigan Avenue, #1500	Chicago	IL	60611-4003	312-222-4444	N/A
NATIONAL BROADCAST									
Meg	Parsons	New Products/Health	GOOD MORNING AMERICA	147 Columbus Ave.	New York	NY	10023	212-456-6385	N/A
Patty	Neger	Producer	GOOD MORNING AMERICA	147 Columbus Ave.	New York	NY	10023	212-456-6157	N/A
Susan	Schiller	Health Producer	CBS THIS MORNING	524 W. 57th St.	New York	NY	10019	212-975-5173	N/A
Margaret	Pool	Senior Producer	SUNDAY THIS MORNING	524 W. 57th St.	New York	NY	10019	212-975-6708	N/A
Linda	Fairelle		NBC NIGHTLY NEWS & TODAY SHOW	30 Rockefeller Center	New York	NY	10012	212-664-7385	212-664-2914
Robert	Bazell	Medical Correspondant	NBC	30 Rockefeller Center	New York	NY	10012	212-664-4691	N/A
Max	Gomez	Reporter	NBC	30 Rockefeller Center	New York	NY	10012	212-664-2026	N/A
Lynn	Brown	Medical/Health Reporter	FOX NEWS CHANNEL	205 E. 67th St.	New York	NY	10021	212-452-3800	212-249-1182
Susan	Drucher	Health Producer	TODAY SHOW	30 Rockefeller Plaza	New York	NY	10012	212-664-4249	N/A
Rita	Brewer	Senior White House Correspondent	CBS	524 W. 57th St.	New York	NY	10019	212-975-4321	212-975-3247
Brittany	Zucker	Assignment Editor	ACCESS HOLLYWOOD	10 Rockefeller Plaza - St. 620	New York	NY	10020	212.332.3140	
Steven	Lange	Executive Producer	EXTRA	1271 Ave. of the Americas	New York	NY	10020	212-522-3000	212-522-6400
Cano	Wong	News Contact	ENTERTAINMENT TONIGHT	5555 Melrose Ave., MAE W. Bldg.	Los Angeles	CA	90038	213-956-4900	213-862-4954
Sean	Reid	Assignment Editor	E! NEWS DAILY	5670 Wilshire Blvd.	Los Angeles	CA	90036	213-954-2487	213-954-2621
Barry	Nugent	News Assignment Editor	E! ENTERTAINMENT NEWS NETWORK	5670 Wilshire Blvd.	Los Angeles	CA	90036	213-954-2422	213-954-2621
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Jim	Forkin	Assignment Editor	CNBC	2200 Fletcher Ave.	Fort Lee	NJ	07024	201-585-6350	201-585-6205
Gina	Jones	Assistant Producer	AMERICA'S HEALTH NETWORK	2500 Universal Studios	Orlando	FL	32819	407-354-6900	407-354-6870
Barbara	Reiser	Medical/Health Reporter	MACNEIL-LEHRER NEWS HOUR/PBS	2700 S. Quincy St.	Arlington	VA	22206	703-998-2170	703-998-5787

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NEWS MAGAZINES								
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Brian	O'Reilly	Medical/Health Editor	FORTUNE	1271 Ave. of the Americas	New York	NY	10020	212-522-6818	N/A
Geoffrey	Cowley	Medical Writer	NEWSWEEK	251 W. 57th St.	New York	NY	10019	212-445-4360	212-445-5439
Mary	Hager		NEWSWEEK	251 W. 57th St.	New York	NY	10019	212-445-4000	
Christine	Gorman	Medical/Health Ass. Editor	TIME	Time-Life Bldg. - Rockerfeller Center	New York	NY	10020	212-522-3685	212-522-4799
Alice	Park	Senior Editor	TIME	Time-Life Bldg. - Rockerfeller Center	New York	NY	10020	212-522-1212	212-522-4799
Shannon	Brownlee	Correspondent	U.S. NEWS AND WORLD REPORT	1030 Sandpiper Lane	Annapolis	MD	21403	write only	
Mary	Brophy-Marcus	Medical Editor	U.S. NEWS AND WORLD REPORT	2400 N. Street, NW	Washington	DC	20037	202-955-2609	202-955-2049
Robert	Friedman	Medical/Health Editor	LIFE MAGAZINE	Time-Life Bldg. - Rockerfeller Center	New York	NY	10020	212-522-2202	215-522-0504
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Glenn	Gordon	Editor(forwarded by Elizabeth Hall, As	CHILD-FIRST YEAR PLANNER	375 Lexington Ave.	New York	NY	10017	212-499-2004	212-499-2038
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Robbie	Schiff	Editor-in-Chief	FAMILY CIRCLE	444 Park Ave. South #402	New York	NY	10016	212-252-0698	212-686-9066
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Jean	McGuire	Medical/Health Editor	FAMILY LIFE	110 Fifth Ave.	New York	NY	10011	212-499-2930	212-499-1987 (fa
Laura	Flynn McCarthy	Editor	FAMILY SAFETY & HEALTH	1633 Broadway Ave., 41st Fl	New York	NY	10019	Write Only	212-489-4561
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Irene	Dana	Parenting Editor	WOMAN'S WORLD	270 Sylvan Ave.	Englewood Cliffs	NJ	7632	201-569-0006 ext 463	201-569-3584
Nina	Alberts	Health Editor	WOMAN'S WORLD	270 Sylvan Ave.	Englewood Cliffs	NJ	7632	201-569-0006 ext. 465	201-569-3584
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Theresa	Walker	Family Editor	ORANGE COUNTY REGISTER	625 N. Grand Avenue	Santa Ana	CA	92701	714-835-1234	714-565-3681
Marla	Krause	Woman News	CHICAGO TRIBUNE	435 N. Michigan Avenue 5th Floor	Chicago	IL	60611	312-222-4530	312-222-0234
Tom	Valeo	Health and Beauty Editor	PADDOCK PUBLICATIONS-DailyHerald	P.O. Box 280	Arlington Heights	IL	60006	847-427-4516	847-427-1301
Lori	Eickman	Parenting Editor	SAN JOSE MERCURY NEWS	750 Ridder Park Drive	San Jose	CA	95190-0001	408-920-5579	408-920-5060
Gayle	Melvin	Family Editor	CONTRA COSTA TIMES	2640 Shadelands Drive	Walnut Creek	CA	94598-2578	510-943-8048	510-943-8362
Monica	Oyola	Family Editor	THE OAKLAND TRIBUNE	66 Jack London Square	Oakland	CA	94607	510-208-6489	510-208-6477
Barbara	Meltz	Parenting Childcare	BOSTON GLOBE	135 Morrissey Blvd.	Boston	MA	02107	617-929-2800	617-929-2813
Cassandra	Spratling	Childcare Parenting Editor	DETROIT FREE PRESS	321 W. Lafayette	Detroit	MI	48226	313-222-6400	313-222-5981
Ruby	Bailey	Parenting Editor	DETROIT FREE PRESS	615 W. Lafayette Blvd.	Detroit	MI	48226	313-222-6765	313-222-2451
Debbie	Myers	Lifestyle Editor	BATTLE CREEK ENQUIRER	155 W. Van Buren	Battle Creek	MI	49017	616-966-0689	616-964-0299
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Cindy	Heflin	Features Editor	THE ANN ARBOR NEWS	340 E. Huron Street	Ann Arbor	MI	48106	313-994-6820	313-994-6879
Alma	Hill	Parenting Childcare	ATLANTA JOURNAL CONSTITUTION	72 Marietta Street, NW	Atlanta	GA	30303	404-526-5358	404-526-5509
Harlin	Spector	Family Editor	THE PLAIN DEALER	1801 Superior Avenue, NE	Cleveland	OH	44114	216-999-4330	216-999-6269
Thrity	Umrigar	Staff Writer Reporter	AKRON BEACON JOURNAL	44 E. Exchange	Akron	OH	44328	330-996-3714	330-376-9235
H.J.	Cummins	Family Issues Reporter	STAR TRIBUNE	425 Portland Avenue, South	Minneapolis	MN	55488	612-673-4671	612-673-4359
Sue	Campbell	Family Editor	ST. PAUL PIONEER PRESS	345 Cedar Street	St. Paul	MN	55101	612-228-5326	612-228-5500
Martha	Dorrance	Arts Leisure Editor	TAMPA TRIBUNE	202 S. Parker Street	Tampa	FL	33606	813-259-7810	813-259-7676
Paul	Saltzman	Family Editor	MIAMI HERALD	One Herald Plaza	Miami	FL	33132	305-376-3665	305-376-1202
Kiki	Boehs	Parenting Childcare Managing Editor	SUN-SENTINEL	8323 NW 12th Street Suite 212	Miami	FL	33126	305-599-5319	305-599-5304
Karina	Bland	Childcare Editor	THE ARIZONA REPUBLIC & PHOENIX GAZ	P.O. Box 2245	Phoenix	AZ	85002	602-271-8614	602-253-3734
Carolyn	Olsen	Family Editor	ST. LOUIS POST-DISPATCH	900 N. Tucker Blvd.	St. Louis	MO	63101	314-340-8246	N/A
Maria	LaPuma Barreto	Family Editor	SACRAMENTO BEE	P.O. Box 15779	Sacramento	CA	95852	916-321-1842	916-321-1109
Michael	Walden	Family Editor	THE OREGONIAN	1320 S.W. Broadway	Portland	OR	97201	503-221-8518	503-294-4093
Jillyn	McCullough	Parenting Reporter	STATESMAN-JOURNAL	280 Church Street, NE	Salem	OR	97301-3762	503-399-6755	503-399-6706
Kathleen	Schockel	Family Childcare Editor	INDIANAPOLIS STAR/NEWS	307 N. Pennsylvania Street	Indianapolis	IN	46204	317-633-9105	317-630-9565
Joanne	Gua	Editor	BALTIMORE'S CHILD	11 Dutton Court	Baltimore	MD	21228	410-367-5885	410-719-9342
Sylvia Lee	Hasley	Editor	BIRTH TO THREE PARENTING NEWSLETTI	3875 Kincaid Street #15	Eugene	OR	97405-4554	541-484-5316	541-484-1649
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Pamela	Kesterson	Editor	THAT'S MY BABY MAGAZINE	P.O. Box	Lake Oswego	OR	97035-0508	503-620-9135	503-620-3800
Trisha	Thompson	Editor-in-Chief	BABY ON THE WAY	1325 Sixth Avenue, 27th Floor	New York	NY	10019	212-522-8989	212-522-8799
Jeanette	Zaichkin	Executive Editor	MOTHER BABY JOURNAL	1304 South Point #280	Petaluma	CA	94954-6861	707-762-2646	707-762-0401

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Cecilia	Goodnow	Reporter	SEATTLE POST INTELLINGENCER	101 Elliott Avenue, West	Seattle	WA	98119	206-448-8353	206-448-8216
Mary	Cronin	Health Reporter	SEATTLE TIMES	1120 John Street	Seattle	WA	98109	206-464-2246	206-464-2239
Kathy	Edwards	Features Editor	THE CAPITAL	2000 Capital Drive	Annapolis	MD	21401	410-280-5957	410-280-5953
Russ	Smith	Editor-in-Chief	NEW YORK PRESS	295 Lafayette Street	New York	NY	10012-2794	212-941-1130	212-941-7824
Irv	Randolph	Editor	PHILADELPHIA TRIBUNE	529 S. 16th Street	Philadelphia	PA	19146-1597	215-893-4050	215-735-3612
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Top-Ten/Suburban Newspapers (Health specific)

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Cindy	Schroeder	Health/Science Editor	CHICAGO TRIBUNE	435 N. Michigan Ave.	Chicago	IL	60611	312-222-2436	312-222-0234
Adam	Horvath	Health Editor	NEW YORK NEWSDAY	235 Pinelawn Road	Melville	NY	11747	516-843-2749	516-843-2953
Betty	Kwong	Health/Lifestyle Editor	LOS ANGLES DAILY NEWS	21221 Oxnard Street	Woodland Hills	CA	91367	818-713-3760	818-713-3545
Carolyn	Jones	Healthcare Reporter	OAKLAND TRIBUNE	66 Jack London Sq.	Oakland	CA	94607	510-208-6454	510-208-6477
Jim	Ritter	Medical Editor	CHICAGO SUN TIMES	401 N. Wabash Avenue	Chicago	IL	60611-3593	312-321-2539	312-321-3679
Lou	Chapman	Healthcare Editor	FORT WORTH STAR TELEGRAM	400 W. Seventh St.	Fort Worth	TX	76102	817-390-7257	817-390-7257
Joe	Gambaccinlo	Health Editor	PHILADELPHIA INQUIRER	400 N. Broad	PhiladelphiA	PA	19130	215-854-4335	215-854-4795
Bill	Carlson	Health Editor	SAN FRANCISCO CHRONICLE	901 Mission Street	San Francisco	CA	94103	415-777-1111	415-543-2482
Lisa	Krieger	Health Editor	SAN FRANCICSO EXAMINER	110 Fifth Street	San Francisco	CA	94103	415-777-7867	415-777-8933
Kathleen	Donnelly	Health Editor	SAN JOSE MERCURY NEWS	750 Ridder Park Drive	San Jose	CA	95190-0001	408-920-5989	408-920-3786
Julie	Appleby	Health Writer	CONTRA COSTA TIMES	2640 Shadelands Drive	Walnut Creek	CA	94598-2578	510-977-8463	510-943-8362
Leslie	Saowers	Health Editor	HOUSTON CHRONICLE	801 Texas Ave	Houston	TX	77002	713-220-7350	713-220-7410
Mary	Cronin	Health Reporter	SEATTLE TIMES	1120 John Street	Seattle	WA	98109	206-464-2246	206-464-2239
Craig	Palosky	Medical Editor	TAMPA TRIBUNE	202 S. Parker Street	Tampa	FL	33606	813-259-7633	813-259-7676
Nancy	McVicar	Health Editor	SUN-SENTINEL	200 E. Las Olas Blvd.	Fort Lauderdale	FL	33301	954-356-4703	954-356-4624
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John	Carlson	Health Editor	ST. LOUIS POST - DISPATCH	9966 Lin Ferry Drive	St. Louis	MO	63123	314-849-2331	314-842-5283
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Sally	Chenel	Health/Medical Editor	THE OREGONIAN	1320 S.W. Broadway	Portland	OR	97201	503-221-8304	503-294-4150
Virginia	Linn	Health Editor	PITTSBURGH POST-GAZETTE	34 Boulevard of the Allies	Pittsburgh	PA	15222	412-263-1662	412-391-8452
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Greg	Bean	Executive Editor	GREATER MEDIA NEWSPAPERS	7 Edgebore Road	East Brunswick	NJ	08816	732-254-7000	732-254-8486
Stephen	Clark	Editor	BERGEN COUNTY NEWSPAPERS	799 Franklin Ave.	Franklin Lakes	NJ	07417	201-847-0400	201-847-1844
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			Compendium of Resources for Teaching About the Nonprofit Sector, Voluntarism and Philanthropy	Independent Sector	1828 L St. N.W.	Washington	DC	20036	202-223-8100	N/A

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Date: February 10, 1998 **Contact:** Nicole Wayne (703) 533-2599

NEWS

For Immediate Release

FIRST LADY HILLARY RODHAM CLINTON SPOTLIGHTS HOME VISITING PROGRAMS

Alexandria, VA: The First Lady is visiting with participants and staff of **Northern Virginia Family Service's** ***Healthy Families*** programs to spotlight the importance of home visiting programs in strengthening families and promoting healthy development in children's earliest years of life. As a part of his ambitious child care initiative, President Clinton has proposed the creation of an Early Learning Fund to foster early childhood development through a variety of family support services, including home visiting.

Mrs. Clinton participates first in a ***Healthy Families*** home visit and then leads a roundtable discussion focused on the importance of investing in community-based early learning efforts to promote healthy childhood development. Roundtable participants include leading early childhood develoment experts Dr. David Olds, Matthew Melmed, Betsy Dew, Freddie Mac CEO Leland Brendsel, as well as a ***Healthy Families*** support worker and several program families.

Northern Virginia Family Service's ***Healthy Families*** division serves more than 525 Northern Virginia families per year in Alexandria, Arlington, Prince William Area, Fairfax and Loudoun County. In over 300 communities around the country, ***Healthy Families America*** programs offer support to vulnerable parents through long-term home visitation. Home visitors provide emotional support, teach basic child-rearing skills, model positive parenting, and link parents to health care and other resources. The **NVFS** ***Healthy Families*** programs have shown outstanding success in promoting good prenatal care, healthy births, up-to-date immunizations, appropriate child development milestones, parenting confidence and prevention of child abuse and neglect.

--MORE--

"Helping People Help Themselves"

Date: February 10, 1998 Contact: Nicole Wayne (703) 533-2599

Healthy Families is one of the many effective community programs of **Northern Virginia Family Service,** a private, non-profit organization, staffed by personnel professionally trained in social work, counseling and community organization. Since 1924, NVFS has been in the business of empowering individuals and families to improve and change their lives. NVFS is a member agency of Family Service America and is accredited by the Council on Accreditation of Services for Families and Children.

XXX

Matthew E. Melmed

Matthew Melmed assumed the leadership and management of ZERO TO THREE: National Center for Infants, Toddlers and Families in late 1994.

ZERO TO THREE is the nation's leading resource on the first three years of life. It is the only national nonprofit organization dedicated solely to promoting the social, emotional, cognitive, and physical development of children from birth through age three, and to supporting their families and caregivers. ZERO TO THREE focuses on the first three years because it is the time of greatest human growth and development. It is also the time of greatest opportunity for adults to positively influence a child's future.

ZERO TO THREE's urgent mission is to advance the healthy development of America's babies and young children. It strengthens and supports professionals, policymakers and parents by:

- Increasing *public awareness* of the critical importance of the first three years of life;
- Fostering *professional excellence* through training and related activities;
- Inspiring *tomorrow's leaders* by identifying and engaging promising young professionals;
- Promoting the *discovery and application of new knowledge, model approaches and "best practices"* concerning early childhood development;
- Stimulating *effective service approaches and responsive policies;* and,
- *Educating* parents and other caregivers about significant differences they can make in the lives of babies and young children.

Since joining ZERO TO THREE, Mr. Melmed has built on the organization's strong track record of success in promoting prevention and healthy development in early childhood. Since his arrival, ZERO TO THREE has successfully competed to establish the Early Head Start National Resource Center for the U.S. Department of Health and Human Services which provides training and technical assistance to the new Early Head Start Programs that are being established nationwide. Under his leadership, ZERO TO THREE has also initiated a national public awareness campaign aimed at parents, launched the *Business Leaders for Babies Alliance*--a corporate effort aimed to involve the business community in ZERO TO THREE's issues, and designed a long-term initiative to expand ZERO TO THREE's capacity to market information and materials to wider audiences. In addition, he has guided the growth of the organization's budget from two to three million dollars.

Mr. Melmed's responsibilities as Executive Director include: oversight of policy and program development; technical assistance to state and community-based organizations; speaking engagements before a wide array of audiences; and ongoing relations with business leaders, foundation executives, health and social services professionals, and the media.

Mr. Melmed's administrative responsibilities include: formulation and implementation of financial, administrative and personnel policies and procedures; personnel management; budget development and management; strategic planning; initiation and execution of fundraising strategies, and motivation and support of Board and volunteers.

Prior to ZERO TO THREE, Mr. Melmed served for 13 years as Executive Director of the Connecticut Association for Human Services. CAHS is an independent nonprofit education, research and policy development organization. CAHS generates innovative ideas, forms creative partnerships and advances realistic solutions on a broad range of social policy issues. During his tenure, CAHS stature and effectiveness grew and the organization was selected by the Peter F. Drucker Foundation for Nonprofit Management as one of four organizations nationwide to receive special recognition in its first Award for Innovation competition.

Mr. Melmed is a Phi Beta Kappa graduate of Harpur College, State University of New York at Binghamton where he graduated with highest honors. He received his Juris Doctor degree from the Faculty of Law and Jurisprudence at S.U.N.Y., Buffalo and was conferred with a *Special Faculty Commendation for Extraordinary Community Service.*

Prior to joining CAHS, Mr. Melmed worked for Connecticut Legal Services which he joined in 1978 as a staff attorney. He rose 18 months later to direct Project FEAD, a statewide advocacy and technical assistance project addressing hunger and malnutrition. He later became Managing Attorney of the program's largest office where he directed a 25-person legal staff.

Among the honors he has received are the *Child Advocacy Award* from the Collaboration for Connecticut's Children; the *Lewis Hine Award for Exceptional Service to Children and Youth* from the National Child Labor Committee; the *Ralph Gofstein, M.D. M.P.H. Award for Noteworthy Contributions to the Field of Public Health* from the Connecticut Association for Directors of Health; and, the *Community Leadership Award* from Connecticut Legal Services, and recognition by the Connecticut General Assembly for his leadership in human services in that state.

Mr. Melmed is a member of the Federal and Connecticut Bars. He serves as Vice Chair of the Board of Directors of the Food Research and Action Center (FRAC) in Washington, D.C.

Mr. Melmed and his wife, Deborah Rozell, are happily raising their two wonderful little boys, Andrew and Jeremy.



Spotlight on Alexandria

The Healthy Families Alexandria program adopted the Hawaii Healthy Start model by providing outreach and supportive services to prenatal women and first-time mothers. The City of Alexandria is an affluent area with more than 111,000 people. However, in 1993, disturbing trends were evident in available indices of children's health and social well-being. These indices included:

- one in four children living in poverty;
- among Virginia's highest rates in incidence of both child maltreatment and teen pregnancy;
- higher proportions of low birth weight babies born to non-white women;
- high rates of vaccine-preventable disease; and
- alarming increases in proportions of preschool children with developmental delays, handicapping conditions, and other difficulties.

Having been a founding partner of Healthy Families in adjacent Fairfax county, Northern Virginia Family Service (NVFS) designed Healthy Families Alexandria to address the needs of some of Alexandria's at-risk population.

Risk factors included teenage mothers (40 percent), single mothers (77 percent), low educational levels (average of 10.7 years) and physical risk conditions during pregnancy relating to alcohol, tobacco and other drug use, weight problems or anemia (70 percent). All women who enrolled in the program were at risk of poor parenting outcomes as measured by the C.H. Kempe Family Stress Checklist (FSC). Among the enrollees, 30 percent scored at severe high risk, 55 percent at moderate risk and 15 percent at low risk, but enrolled because of a partner's risk.

"We serve an ethnically diverse population", explains Sally Campbell, program manager. "Cultural competence is very important in our program. We provide extensive training in cultural practices related to pregnancy and child rearing and hire staff who are bilingual and bicultural. We teach each other." Non-Caucasians were 85 percent of the first 267 enrollees. Over 40 countries of origin are represented, with the largest representation being Hispanic (37 percent), African-American (30 percent), Black-African (14 percent) and Asian-Pacific Islander (5 percent).

"Our referrals come through the Alexandria Health Department prenatal clinic," says Campbell. "Very few refuse the voluntary services." Evaluation data shows that less than 12 percent declined services. Campbell relates that the program has four major evaluation goals: 1) ensuring adequate prenatal care; 2) ensuring preventative well-baby care; 3) improving the mother's knowledge and parenting skills, and; 4) preventing child abuse and neglect.

In March, 1997 the HFA completed a 42-month evaluation. The results were gratifying. For each of the following analyses, the sample includes only women enrolled in the program for 2 months or more prior to the tabulation of that objective. Thus, the sample size is different for each analysis. Almost 82 percent of 114 mothers attended the scheduled prenatal visits, reaching the target goal. Almost 98 percent of 169 mothers obtained a medical provider for the baby by two months after birth, meeting the target. Also, 91 percent of the 169 children received the recommended immunizations, exceeding the 80 percent target. Well-baby visits were not maintained at target rates at the 30 month evaluation (visits were completed at about a 75 percent rate, below the criterion of 80 percent) and these were dropped as a measureable outcome objective. Some local health providers felt it was difficult to motivate parents to keep a clinic appointment when the baby was healthy and no immunizations were scheduled.

At the 30-month evaluation, the Healthy Families Alexandria participants had a similar rate of low birthweight babies as a comparison group (7.7 and 7.2 percent respectively). Therefore, the objective of obtaining 50 percent less low birthweight babies was not met. At the 42-month evaluation, a similar percentage (8 percent) of low-birthweight babies were noted. Nationwide no study to date was found that documented a reduction in low birth weight babies due to home visiting (see main article). Regardless, the babies in Alexandria's project developed well, with over 96 percent exhibiting age-appropriate skills in all developmental areas.



Only eight percent of the mothers became pregnant again within the first postnatal year (far exceeding the 15 percent goal). The program adopted a goal of a 24-month interval between the first and subsequent births. Of 114 women, 87 percent did not give birth to another child during that time period, exceeding the 85 percent goal. Among the 15 enrollees who had a second child within 24 months, over half (54 percent) were teenagers.

Finally, data is being gathered on child abuse complaints. The goal is for 95 percent of enrolled families to have no findings of child abuse or neglect. This goal was exceeded with 98 percent of 186 enrollees lacking a founded complaint.

Those enrolled in the first or second trimester of pregnancy receive biweekly visits from their worker. Visits increase to weekly during the last trimester. After the baby's birth, weekly visits are maintained. When the family is ready, visits move to biweekly, then monthly, then quarterly. "Family needs and fulfilling the requirements of each program service level determines how long each family remains on a particular level," explains Campbell. "The average family will take 19 months to progress to monthly visits." Having a second child and lack of support systems are two variables which trigger a need for longer service.

Campbell is pleased with the program results. "The findings are very positive," she states. "The evaluation is one of the most comprehensive in the state!"

More information is available from: Sally Campbell, Program Manager, Healthy Families Alexandria, 5249 Duke Street, Suite 308, Alexandria, VA 22304, (703) 823-8153, Fax: (703) 751-5197

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wards the end of the 21 week class, she told us she had thrown away the spoon, because she no longer needed it. She had learned better discipline techniques." Russell adds, "The education is effective because parents learn from one another new ways to nurture their children."

Young Family Centers: This program is a family resource and lending library located in four public libraries and the bookmobile. Materials cover child growth and development, parenting and family management, life skills and home economics, adult health maintenance and disease prevention, child craft and activities books and children's stories. Russell stresses the importance of making the centers user-friendly. They are attractive places with bean bag chairs and play areas for children and comfortable seating for parents. Public use of the Young Family Centers has grown from 3000 checkouts in 1993 to over 6,000 checkouts in 1997.

The Healthy Teen Program: This program aimed at preventing teen pregnancy was developed by the staff of the Hampton Department of Social Services for 8th grade students. Healthy Families Partnership has overseen the development of curriculum

Continued on page 8

Healthy Families

Healthy Families Arlington | Healthy Families Alexandria | Healthy Families Prince William

FOR IMMEDIATE RELEASE

DATE: August 27, 1997

CONTACT: Nicole Wayne, Director of Development
Healthy Families Division
Northern Virginia Family Service
Phone: (703) 533-2599
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Parenting Program Helps Alexandria's Most Vulnerable Families Get Off To A Great Start

Alexandria, VA – Great news for children and families in Alexandria, Virginia! As you will learn from the attached report, ***Healthy Families Alexandria*** continues to prove beyond a doubt that its program of intensive, comprehensive and long-term support promotes healthy child development and ultimately prevents abuse and neglect. Consistent with previous evaluations, ***Healthy Families Alexandria*** has again achieved each of its eight outcome objectives designed to support vulnerable parents in our community. The recently released 42-month independent evaluation shows outstanding success in promoting good prenatal care, healthy births, up-to-date immunizations, appropriate child development milestones, parenting confidence, and prevention of child abuse and neglect.

Healthy Families Alexandria offers intensive support through long-term home visitation to vulnerable first-time parents. Home visitors provide emotional support, teach basic child-rearing skills, model positive parenting, and link parents to health care and other resources. This innovative program was launched in Alexandria, in 1993, by Northern Virginia Family Service in partnership with the City of Alexandria's Early Childhood Commission, and is now a leader among the 260 ***Healthy Families America*** sites across the country.

Based on two decades of research and the experiences of a successful statewide effort in Hawaii, this program has shown tremendous success in addressing such poor childhood outcomes as failure to thrive, lack of school readiness, neglect, and abuse. ***Healthy Families Alexandria*** recently became one of the first sites in the nation to receive the 4-year quality assurance credential awarded by the National Committee to Prevent Child Abuse, in partnership with the Council on Accreditation of Services for Families and Children, Inc.

–MORE–

Healthy Families **staff seek early identification of first-time pa rents and parents-to-be who would benefit from home visitor services, such as those who ar e socially isolated, unemployed or under-employed, single, have a substance abuse problem, have unrealistic child development expectations, or face multiple life stressors. Personal history o f abuse greatly increases risk for abusing ones own children. Seventy-two percent of enrollees h ad a personal history of childhood abuse, demonstrating that the program is indeed rea ching those most in need of parenting support services. Based on these risks, the evaluatio n results are truly impressive.**

Of all enrolled families:

- **82% of women attended all recommen ded prenatal medical appointments**
- **92% of infants born at healthy birthw eight**
- **98% of infants had a primary health c are provider within 2 months of birth**
- **93% of infants received recommended immunizations and well-care**
- **91% of children exhibited age-appropr iate skills in all developmental areas**
- **87% of mothers did not have another c hild within 24 months**
- **98% of enrolled families had no found ed reports of child maltreatment**

Northern Virginia Family Service (NVFS) is recognized on nati onal, state, and local levels as a committed leader in advancing the ***Healthy Families America*** p revention strategy and as a pioneer in establishing the first ***Healthy Families America*** prog rams in Virginia (Fairfax, 1991 and Alexandria, 1993.) NVFS was also selected as lead private agency to launch and manage new sites in Prince William County (in 1996) and Arlington (in 1997.) NVFS has partnered with a variety of public and private organizations to implement these ***Healthy Families America*** sites, and has received significant funding and guidance from the Fre die Mac Foundation of McLean, Virginia.

The effort we make to help new parents succeed shape s the future for their children and our community.

XXX

Healthy Families

Stopping Child Abuse Before It Starts.

In over 300 communities around the country, *Healthy Families America* programs offer intensive support through long-term home visitation to vulnerable parents. Through the program, highly trained, caring home visitors provide emotional support, teach basic child-rearing skills, model positive parenting, and link parents to health care and other resources. Founded by the *National Committee to Prevent Child Abuse*, with pioneering support from the Hawaii Family Stress Center, the Ronald MacDonald Children's Charities, the Freddie Mac, Carnegie, Kellogg, and Ford Foundations, *Healthy Families* is community-based and family-centered.

Based on two decades of research and the experiences of a successful statewide effort in Hawaii, this program has shown tremendous success in addressing such poor childhood outcomes as failure to thrive, lack of school readiness, neglect and abuse. The *Healthy Families* Division of Northern Virginia Family Service, with sites in Alexandria, Arlington, Fairfax, and the Prince William area, is no exception. In fact, *Healthy Families Alexandria*, our oldest site, launched in 1993, is now a leader among the 320 *Healthy Families America* sites across the country.

Healthy Families staff identify first-time parents and parents-to-be who would benefit from home visitor services, such as those who are socially isolated, unemployed or under-employed, single, have a substance abuse problem, have unrealistic child development expectations, were themselves abused as children, or face multiple life stressors.



Why do we need *Healthy Families*?

Local statistics vary, but share discouraging trends in a time of shrinking resources:

- More single parents, many of them in their teens
- Increasing numbers of children with developmental delays
- Alarming increases in child abuse and neglect leading to injury or death
- Disturbing news stories of young children dying from abuse or neglect
- 80% of the most severely abused under age 5
- 80% of prison inmates reportedly abused as children
- 90% of maltreating mothers abused as children

Whom has *Healthy Families* helped?



NVFS' *Healthy Families* programs have helped over 700 vulnerable families, beginning with the birth of their first child. Common risk factors identified have been:

- Difficulty in establishing parent-child bonding
- Poor self-esteem, depression, poor coping skills
- Multiple family stressors and crises
- Childhood history of physical abuse
- Teen parents

How does *Healthy Families* work?

- Family support workers make home visits to teach, listen and support -- from the prenatal period through age five.
- Regular screenings ensure healthy developmental progress.
- Parent peer groups decrease isolation and promote shared learning and support.
- Assistance with transportation, housing, nutrition, childcare, employment and medical referrals keep families healthy.
- Loaned toys enable young families to play together and meet rapidly changing developmental needs of their child.
- Special emphasis is placed on keeping teen parents in school.
- Tutoring in English as a second language and the translation of parenting materials for foreign born parents. Our staff is representative of the ethnic diversity of the communities we serve.





Has *Healthy Families* made a difference?

Yes! Each of our sites has consistently shown outstanding success in promoting good prenatal care, healthy births, up-to-date immunizations, appropriate child development milestones, parenting confidence, and prevention of child abuse and neglect. Results of a 42-month, independent evaluation of ***Healthy Families Alexandria***, our original pilot site- and the site used as a model for developing our other sites- show that of 267 enrollees, 39% scored at a high to severe risk for child abuse, 55% scored at moderate risk, and fully 72% had a personal history of childhood abuse. Based on these risk factors, the evaluation results are truly impressive:

- 82% of women attended all recommended prenatal medical appointments
- 92% of infants were born at a healthy birth weight
- 98% established a medical provider relationship within two months of birth
- 93% of infants received recommended immunizations and well-care
- 91% of children exhibited age-appropriate skills in all developmental areas
- 87% of the mothers did not have another child within 24 months
- 98% of enrolled families had no founded reports of child maltreatment
- 100% of children came to no harm

How is *Healthy Families* funded?

Each ***Healthy Families*** site is funded through a variety of public and private sources, including city, state, and federal governments, private foundations, hospitals, businesses, and individual donors. The Freddie Mac Foundation is among the most prominent supporters of ***Healthy Families***, providing funding on both the national and local levels.

What does the future hold for *Healthy Families*?

The future is bright! There are already 320 ***Healthy Families*** sites nationwide, with 17 in Virginia alone. Here in our area, The ***Healthy Families America National Capital Area Consortium***, convened in 1996, is comprised of existing and developing sites, as well as *National Committee to Prevent Child Abuse* chapters and affiliates. The Consortium's purpose is to strengthen and support sites across the region toward the common goals of ensuring ***Healthy Families*** quality assurance standards, and building region-wide support and partnerships for a universal, voluntary home visiting system for all new parents.



How can members of the community help?

- Volunteer to provide transportation, respite child care, tutoring, clerical help.
- Participate by "adopting" a family - at holiday time or throughout the year.
- Donate money and/or goods and services in-kind.
- Be an advocate for children - help us keep elected officials aware of the value of ***Healthy Families*** and the necessity of continued public funding.
- Invite a ***Healthy Families*** speaker to address your organization or congregation.
- Become an Annual Fund volunteer, host a fundraising event, approach your employer about corporate sponsorship and matching gift opportunities.



Selected Funders:
Freddie Mac Foundation
March of Dimes Foundation
Meyer Foundation
Philip L. Graham Foundation
United Way
U.S. Maternal and Child Health Bureau
Virginia Family and Children's Trust Fund
City of Alexandria's Early Childhood Commission
Arlington County Department of Human Services
The *Healthy Families Virginia* Initiative
CHIP of Virginia
American Academy of Pediatrics

Full list of funders

Healthy Families Alexandria ⁂ *Healthy Families/CHIP Arlington* ⁂ *Healthy Families Prince William Area*
are programs of Northern Virginia Family Service
100 N. Washington Street, Suite 400 Falls Church, VA 22046 703) 533-2599 FAX (703) 241-1310

MEDIA ALERT

CELEBRITIES AND POLITICIANS TOAST BABIES AT KENNEDY CENTER EXTRAVAGANZA

Early childhood organization announces initiative with Johnson & Johnson to improve training for professionals, increase parental awareness

WHAT: ZERO TO THREE, the nation's leading resource on the first three years of life, is celebrating its 20th anniversary with a celebrity - and politician - studded gala "An Evening of Conversation, Entertainment and Inspiration."

The evening will also celebrate the unveiling of an exciting new partnership between ZERO TO THREE and its long-time friend and primary gala sponsor, Johnson & Johnson. The far-reaching partnership focuses on delivering vital scientific and practical information on early childhood development to parents through pediatric healthcare professionals.

WHEN: Tuesday, Feb. 10th performance from 7:30 p.m. to 8:30 p.m. (Reception at 6:45 p.m., dinner following performance)

WHERE: The John F. Kennedy Center for the Performing Arts, Terrace Theater

PHOTO OPPORTUNITIES: Performances of favorite childhood stories, lullabies and adored children's stories by First Lady Hillary Rodham Clinton, Ron Silver, Avery Brooks, Jacques D'Amboise, Ann Reinking, Faith Prince and Kenny Loggins. In addition, Senators Edward M. Kennedy, D-Mass., John F. Kerry, D-Mass., Orrin G. Hatch, R-Utah, Christopher S. "Kitt" Bond, R-Mo., Christopher Dodd, D-Conn. and James M. Jeffords, R-Vt. will be honored for their dedication to early childhood development issues.

PR, zero to three

For Media Credentials: Please contact Lynette Ciervo at (202) 638-1144 or Enid Doggett at (202) 835-9487. Members of the media must have credentials to attend.

OPEN PRESS

CONTACT: Lynette Ciervo (202) 638-1144 or Jennifer Wadehra (212) 448-4324

CELEBRITIES AND POLITICIANS TOAST BABIES AT KENNEDY CENTER EXTRAVAGANZA

Early childhood organization announces initiative with Johnson & Johnson to improve training for professionals, increase parental awareness

WASHINGTON (February 9, 1998) - Entertainers Ron Silver, Avery Brooks, Ann Reinking, Jacques D'Amboise and Kenny Loggins will join First Lady Hillary Rodham Clinton and a host of Washington political figures Tuesday, Feb. 10 at the Kennedy Center to shift the spotlight onto America's infants and toddlers. The event salutes the 20th anniversary of ZERO TO THREE.

Celebrities, politicians and surprise guests will share favorite childhood stories, sing lullabies and act out children's stories as they dedicate an evening to recognizing that developing healthy, happy children early in life has far-reaching, beneficial implications for society.

Several members of Congress will be recognized at the gala for their contributions to child care and health issues including: Senators John Kerry, D-Mass., James Jeffords, R-Vt., Edward Kennedy, D-Mass., Orin Hatch, R-Utah, Christopher Dodd, D-Conn. and Christopher S. "Kitt" Bond, R-Mo. Also participating will be U.S. Secretary of Health and Human Services, Donna Shalala, comedian Mark Shields and television talk show host Janet Langhart (wife of Secretary of Defense William Cohen).

The anniversary celebration comes as ZERO TO THREE launches a new initiative with long-time partner Johnson & Johnson to develop training programs that build skills for pediatric healthcare professionals and provide parents with the latest information on early childhood development.

-more-

"We are very excited and honored to partner with ZERO TO THREE, whose multi-disciplinary commitment to promoting healthy babies has been unmatched for 20 years," said Julia Freedman, Johnson & Johnson, director of professional and educational services worldwide. "Together, we can provide substantive tools to child health professionals and better equip them to empower parents to create a nurturing, positive environment."

A recent ZERO TO THREE national survey found that half of all parents say they know what signs to watch for in their children when it comes to physical development. But fewer than half say they are aware of what to look for when it comes to intellectual or emotional development.

"Understanding that families need to create advantageous environments for their children, and then fulfilling those needs is what we are all about. We know Johnson & Johnson shares our commitment, and we look forward to reaching parents with this crucial information," said Matthew E. Melmed, ZERO TO THREE, executive director.

ZERO TO THREE was established 20 years ago by internationally renowned leaders in the fields of medicine, mental health, child development and research science to advance the healthy development of America's babies and young children.

For 100 years, Johnson & Johnson has been helping parents care for babies and children. The company is the world's largest and most comprehensive manufacturer of health care products serving consumer, pharmaceutical, diagnostic and professional markets. Johnson & Johnson has more than 170 operating companies in 50 countries around the world, selling products in more than 175 countries.

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Draft **February 10, 1998**

HOME VISITATION EVENT AND ROUNDTABLE DISCUSSION

Date:	**Tuesday, February 10, 1998**
Location:	**Alexandria, VA**
Time:	**2:00 - 2:30pm Home Visitation**
	3:00 - 3:45pm Roundtable Discussion
From:	**Nicole Rabner**

I. PURPOSE

The purposes of this event are: (1) to spotlight the success of home visitation in strengthening families and promoting healthy child development, and (2) to underscore the President's proposal -- as part of his child care initiative -- to create an Early Learning Fund to provide support for community-based home visitation efforts.

I. BACKGROUND

There are two pieces to this event: you will first accompany a home visitor on a routine home visitation and then participate in a Roundtable discussion on the promise of home visitation. The home visitation will provide an opportunity for you to learn firsthand about the *Healthy Families Alexandria* home visitation program; the roundtable will provide a forum to explore two approaches to home visitation (*Healthy Families America* and the Elmira, NY home visitation program), and explore the success of home visiting generally in strengthening families and promoting healthy child development.

Healthy Families Alexandria -- Healthy Families America

Healthy Families Alexandria services about 100 first-time mothers in the City of Alexandria who have risk factors that may predispose them to maltreat their children. Prenatal and first-time mothers with a child less than 2 months are eligible for voluntary referral, assessment, enrollment, and services until the child is 5 years old. Healthy Families Alexandria was modeled on Hawaii's "Healthy Start" program of comprehensive, intensive home visiting services -- which also was the primary model for the *Healthy Families America* initiative promoted by the National Committee to Prevent Child Abuse and serving 320 communities around the country. The *Healthy Families Alexandria* model provides (1) systematic, proactive early identification of at-risk families and (2) home visiting/case management services delivered by trained, largely paraprofessional Family Support Workers.

The program began in Alexandria in 1993 in response to troubling statistics in the Alexandria area: one in four children living in poverty; Virginia's highest rates of child maltreatment and teen pregnancy; higher proportions of low birth weight babies born to non-white women; high rates of vaccine-preventable disease; and alarming increases in proportions of preschool children

with developmental delays, handicapping conditions and other difficulties. *Healthy Families Alexandria* staff seek early identification of first-time parents and parents-to-be who would benefit from home visitor services, such as those who are socially isolated, unemployed or under-employed, single, have a substance abuse problem, have unrealistic child development expectations, or face multiple life stressors. Using "best practices" identified by over 20 years of research and referrals from its partners such as the local social services agencies and hospitals, *Healthy Families Alexandria* helps parents enhance their parenting skills, use needed community resources, and better manage their lives to reduce risks leading to child maltreatment.

In July, 1997, *Healthy Families Alexandria* released a 42-month outcome evaluation report. This independent evaluation showed promising results:

- 82% of women attended all recommended prenatal medical appointments
- 92% of infants were born at healthy birth weight
- 98% of infants had a primary health care provider within 2 months of birth
- 93% of infants received recommended immunizations and well-care
- 87% of mothers did not have another child within 24 months
- 98% of enrolled families had no founded reports of child maltreatment
- 96% of infants showed no developmental delays

Elmira, New York Pregnancy and Infancy Nurse Home Visitation Program

The Elmira study, called "Long Term Effects of Home Visitation on Maternal Life Course and Child Abuse and Neglect," is a fifteen-year follow-up of a randomized trial of home visiting in Elmira, New York. The results were published in the August 27, 1997, issue of *The Journal of the American Medical Association* (attached).

The results show that this early intervention is beneficial both in the short- and long terms. In this voluntary program, nurses begin to visit first-time mothers during pregnancy and continue home visits for two years after the child is born. Nurse home visitors work intensively with families to improve three broad domains of functioning: women's health behavior, including a reduction in substance use; family caregiving for infants and toddlers, including preventive health care and early intervention for emerging health problems; and maternal life-course development, including pregnancy planning, education achievement, and finding work.

The 15 year follow-up study of the low-income, unmarried women in the Elmira program found major program benefits, including:

- 79% fewer verified reports of child abuse or neglect
- 31% fewer subsequent live births
- over 2 years' greater interval between the birth of their first and second child
- 30 fewer months receiving welfare
- 44% fewer behavioral problems due to alcohol and drug abuse
- 69% fewer arrests among mothers
- 54% fewer arrests among their children by the children's 15th birthday (this finding has

Withdrawal/Redaction Marker
Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002. memo	re: Home Visitation Event and Roundtable Discussion [partial] (2 pages)	02/10/1998	b(6)

COLLECTION:
Clinton Presidential Records
First Lady's Office
Lissa Muscatine
OA/Box Number: 20079

FOLDER TITLE:
Background - Child Care [2]

2015-0275-S
rc1937

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

not yet been published -- it is the subject of a forthcoming paper)

Event Scenario

Home Visit:
You will first participate in a routine home visitation in the *Healthy Families Alexandria* model by visiting (b)(6) with her Family Support Worker, Lynn Kasonovich and Sally Campbell, the program director (bios attached). The home visitation will include exercises with toys designed to gauge the child's healthy development. [0027]

Roundtable Discussion:
After meeting with the program participants, you will proceed to the roundtable discussion. You will make opening remarks, introduce the discussion participants, and turn to Matthew Melmed, the Executive Director of the Zero to Three National Center for Infants and Toddlers, to discuss why the early years of a child's life are so important and describe home visitation generally. After Mr. Melmed makes his remarks, you will turn to Dr. David Olds, lead researcher of the Elmira study, to provide a brief overview of the Elmira program and its promising findings. After Dr. Olds makes his remarks, you will turn to Dr. Betsy Dew, one of the founders of Hawaii's "Healthy Start" program and leading architect of the *Healthy Families America* national program, who will talk about the program and its demonstrated success. Dr. Dew will then moderate the discussion with three parents and a Family Support Worker in the *Healthy Families Alexandria* program. Finally, you will turn to Mr. Leland Bresland, CEO of the Freddie Mac Corporation, which has heavily invested in home visitation programs and research, to make some remarks -- Mr. Bresland will emphasize that this effort demands public-private partnership and business leadership. You will conclude the discussion.

IV. PARTICIPANTS

Home Visitation
The First Lady
(b)(6), mother
3-month old son
Lynn Kasonovich, Family Support Worker
Sally Campbell, Healthy Families Alexandria program director

Roundtable Discussion
The First Lady
Dr. Matthew Melmed, Executive Director, Zero-to-Three National Center for Infants and Toddlers
Dr. David Olds, Director, Prevention Research Center for Families and Child Health and Lead Researcher of the Elmira Home Visitation program
Dr. Betsy Dew, Director and Senior Training Specialist, The Family Institute of Hawaii Family Support Center and a Founder of the Hawaii Healthy Start Program
Mr. Leland Bresland, CEO, Freddie Mac Corporation
(b)(6) Mother and Father served by the Healthy Families America

program

(b)(6) Single mother served by the Healthy Families America program

Valator Gilliespie-Ballah, Family Support Worker for Healthy Families Alexandria

V. SEQUENCE OF EVENTS

VI. PRESS PLAN

PRESIDENT CLINTON'S PROPOSAL:
CHILD CARE THAT STRENGTHENS AMERICAN FAMILIES

January 7, 1998

"No government can raise or love a child. Mothers and fathers do. But government can empower Americans with the tools they need to meet their most vital responsibilities as parents and as workers. So today, I am proud to propose the single largest child care investment in the history of our nation. It is a comprehensive and fiscally-responsible plan to make child care more affordable and accessible, to raise the quality and assure the safety of care for millions of American families. This is an issue that touches nearly every family, one that should rise above politics and partisan interests."

President Bill Clinton
January 7, 1998

President Clinton announces an historic initiative to improve child care for America's working families. The initiative proposes approximately $20 billion over five years for child care, including elements to **help working families pay for child care, build a good supply of after-school programs, improve the safety and quality of care, and promote early learning**.

ENSURING AFFORDABLE, ACCESSIBLE, SAFE CHILD CARE. The President's child care initiative responds to the struggles our nation's working parents face in finding child care they can afford, trust and rely on. The new initiative:

- **Makes child care more affordable for working families.** To help working families struggling to meet the costs of child care, the initiative invests $7.5 billion over five years to double the number of children receiving child care subsidies to more than two million by the year 2003. The initiative also increases tax credits for child care for three million families and provides tax credits to businesses that provide child care services to their employees.

- **Increases access to and promotes early learning and healthy child development.** To improve early learning, the initiative includes $3 billion over five years to establish an Early Learning Fund that helps local communities improve the quality and safety of child care for children ages zero to five. The initiative also increases investment in Head Start and doubles the number of children served by Early Head Start to 80,000.

- **Improves the safety and quality of child care.** To help ensure safe, quality child care, the initiative: steps up enforcement of state health and safety standards in child care settings, facilitates background checks on child care providers, increases scholarships and training for child care providers, and invests in child care research and evaluation.

- **Expands access to safe after-school care.** To help create safe, positive learning environments for the more than five million school-age children who lack adult supervision during a typical week, the initiative provides after-school care for up to half a million children a year and improves coordination of federal after-school initiatives to help communities.

BUILDING STRONGER FAMILIES FOR THE 21ST CENTURY. This initiative is an important part of the President's agenda to strengthen America's families. Because of the President's leadership: federal funding for child care has increased by nearly 70% since 1993; the 1996 welfare reform law increased child care funding by $4 billion over six years; the Healthy Child Care America Initiative is ensuring that children in child care are in safe and healthy environments; Head Start funding has increased more than 57% since 1993, serving more than 830,000 children and their families; and the first ever White House conferences on child care and early development were held in 1997.

Caring for America's Children

The Clinton Administration and Child Care

October 23, 1997

Over the past decade, the number of American families with working parents has expanded dramatically. Making high quality child care more affordable and accessible is critical to the strength of our families and to healthy child development and learning..... Each of us --from businesses to religious leaders to policy-makers and elected officials --has a responsibility and an important stake in making sure that children of all ages have the best possible care available to them. From infancy through adolescence, in child care settings and after-school programs, children can learn and thrive with the right care, attention, and education.

-- President Clinton, July 23, 1997

President Clinton is hosting the first-ever White House Conference on Child Care to focus the nation's attention on the importance of addressing the need for safe, affordable, quality child care. This Conference underscores and builds upon the President Clinton's commitment to strengthen the American family by giving parents the tools they need to fulfill their responsibilities and giving children the ability to reach their full potential.

STRENGTHENING AMERICA'S WORKING FAMILIES

- **Putting Families First.** Throughout his presidency, President Clinton has worked hard to help America's working families. That is why the President fought for the passage of the Family and Medical Leave Act (FMLA) to allow workers to take up to 12 weeks unpaid leave to care for a newborn or adopted child, to attend to their own serious health needs, or to care for a seriously ill parent, child or spouse. In June 1996, President Clinton proposed expanding FMLA to allow workers to take up to 24 unpaid hours off each year for school and early childhood education activities, routine family medical care, and caring for an elderly relative. The President also has fought for greater health security for America's families. He signed into law the Health Insurance Portability and Accountability Act which includes important new protections for an estimated 25 million Americans who move from one job to another, who are self-employed, or who have pre-existing medical conditions. And in August 1997, President Clinton signed the Balanced Budget Act which included $24 billion for the Children's Health Initiative -- the single largest investment in health care for children since 1965 -- to provide meaningful health care coverage to millions of uninsured children.

- **Providing Economic Opportunity.** In 1993, President Clinton put into place an economic strategy that invests in people and provides real opportunity. President Clinton has fought for policies that help working parents fulfill their responsibilities, including winning inclusion of a $500 per-child tax credit for children under age 17 in the Balanced Budget Act -- helping 27 million families with 45 million children. The new Child Tax Credit is in addition to the Earned Income Tax Credit and the Child and Dependent Care Tax Credit (tax credits President

Clinton protected during the balanced budget negotiations). President Clinton also expanded the Earned Income Tax Credit to give 15 million working families tax relief. In 1997, the average tax credit is $1,450 on family income up to $29,290. And the President proposed and signed into law an increase in the minimum wage from $4.25 to $5.15. For a full-time, year-round worker at minimum wage, this 90-cent increase raises yearly income by $1,800 -- as much as the average family spends on groceries over seven months.

INVESTING IN CHILD CARE

- **Increasing Child Care Funding.** Because of President Clinton's leadership, federal funding for direct child care subsidies has increased by nearly 70 percent since he took office, providing child care services for over one million children. The 1996 welfare law increased child care funding by $4 billion over six years, providing child care assistance to low-income working families and parents moving from welfare to work.

- **Increasing Participation in Head Start and Improving Program Quality.** For more than thirty years, Head Start has been one of our nation's best investments ensuring that low-income children start school ready to learn. President Clinton has made expanding and improving Head Start a priority of his Administration. Since 1993, funding for the program has increased by 43 percent -- in fiscal year 1997, Head Start will serve nearly 800,000 low-income children four years old and younger. The Balanced Budget continues the expansion of Head Start toward the President's goal of serving one million children in 2002. Over the last three years, the Clinton Administration has also invested significantly in improving program quality, providing local programs with the resources they need to attract and retain high quality teachers, and ensuring the safety of Head Start centers.

- **Created Early Head Start for 0-3 Year Olds.** Initiated by the President in 1994, there are now 143 *Early Head Start* programs across the country, expanding the proven benefits of Head Start to low-income families with children age three and under. The program provides early, continuous and comprehensive child development and family support services, preparing children for a lifetime of learning and development. In FY 1997, the program will have served nearly 25,000 children and their families.

- **Developed a Full-Day, Full-Year Head Start Initiative.** In March 1997, the Administration announced a new Head Start initiative that will expand Head Start services for children while also helping parents, including those moving from welfare to work. Under the new initiative, child care providers will be given priority for Head Start expansion funds to deliver full-day, full-year Head Start services in partnership with Head Start. Children will stay in one place all day rather than attending Head Start for half a day then moving to child care for the remainder of the day.

- **Expanding Child Care in Rural America.** Under the Clinton Administration, the Agriculture Department's Rural Housing Service's Community Facilities program is directing its efforts towards meeting the need for quality child care in rural areas. As a part of this effort, 31 child care centers were created in FY 1997 and the program will expand in FY 1998. In addition, the Rural Housing Service has been forming partnerships with other federal programs (including Head Start) and the private sector to help provide child care in rural America.

- **Providing Child Care in Urban Communities.** Under the Clinton Administration, the Department of Housing and Urban Development is supporting working families and those moving to work by providing both quality child care for their children and opportunities for parents to become self sufficient. Community Development Block Grants fund initiatives that include education/training opportunities, on-site after-school child care and construction of child care and youth centers. The Ounce of Prevention Program enhances efforts already underway in Empowerment Zones/Enterprise Communities with summer and after-school education/recreation activities and mentoring and tutoring programs. In 1997, the Department awarded $550 million in urban revitalization (HOPE VI) funds which will be used to physically revitalize communities and fund initiatives such as on-site day care centers and transportation services that provide access to employment centers and health care facilities. In 1997, the Administration funded $42 million for the Family Economic Development and Supportive Services (EDSS) program that will include child care services, youth leadership and mentoring skills and family/parental development counseling.

- **Serving Children with Special Needs**. Under the Clinton Administration, the Department of Justice has worked hard to make sure that children with disabilities have access to child care along with non-disabled children. For instance, the Justice Department has entered into agreements regarding children with disabilities with the two largest child care companies in the country -- KinderCare has agreed to do "finger-prick" tests as requested by doctors and parents for children with diabetes and, in another agreement with KinderCare, the company has agreed to develop a model policy to enable a child with mental retardation to attend one of its centers with a state-funded personal care attendant. In addition, La Petite Academy has agreed to do the same "finger-prick" tests, to keep epinephrine on hand for severe and possibly-life-threatening allergy attacks, and to make changes to some of its programs so that children with cerebral palsy can participate. The Justice Department also provides information through its ADA information hotline (1-800-514-0301, 1-800-514-0383 TDD) and produces *Commonly Asked Questions about Child Care Centers and the ADA* for distribution. Additionally, the HHS Child Care Bureau has launched a special initiative to assist ten states to develop and implement effective plans aimed at improving and expanding their child care service delivery system. The project, "Map to Inclusive Child Care," will expand to other states over the next three years.

- **Easing the Commuting Dilemma for Families**. The President is fighting for welfare-to-work transportation grants to assist states and local communities in moving individuals from welfare-to-work -- including helping parents with small children obtain transportation to their jobs *and* to child care. Proposed legislation is included in the transportation authorization bills currently before Congress. In addition, as a part of the Transportation Department's Livable Communities Initiative, the Federal Transit Administration (FTA) has provided opportunities

for on-site community services -- Head Start facilities, a health clinic, and child care centers -- at transit facilities across the country to help parents obtain child care for their children on their commuting routes to work or training.

Ensuring Health and Nutrition in Child Care

- **Improving Health and Safety with Healthy Child Care America**. In an effort to improve the health and safety of child care programs and to provide child health education to child care providers and parents, in 1995, the Clinton Administration launched the Healthy Child Care America initiative. This effort has established partnerships between child care providers and health care services in 46 states, helping to ensure that children in child care are in safe and healthy environments.

- **Ensuring that Children in Child Care Settings Are Properly Immunized.** In July 1997, President Clinton proposed new child care regulations to ensure that children in child care receive the immunizations they need on time. The proposed rule would require that all children in federally subsidized child care be immunized according to state public health agency standards. This proposed regulation will particularly affect those children in child care arrangements that are legal but exempt from state licensing requirements.

- **Providing Quality Nutrition to Children in Child Care**. President Clinton has maintained the commitment to providing quality nutrition in the Child and Adult Care Food Program (CACFP), a federal program that provides healthy meals and snacks in child and adult day care facilities. In 1997, the program provided meals to about 2.5 million children and almost 50,000 adults in approximately 35,000 child care centers (including after-school centers), 195,000 family and group day care homes, and 1,500 adult day care centers. Child care providers in the CACFP must serve meals that meet federal nutrition guidelines, and must offer free or reduced-price meals to those eligible. The General Accounting Office identified CACFP as one of the most effective vehicles for reaching family child care providers and enhancing the care they provide because of its unique combination of resources, training, oversight and peer support. Notably, 87 percent of family child care homes that are considered to be providing good quality child care are participating in the Child and Adult Care Food Program, according to the Families and Work Institute's *Study of Children in Family Child Care and Relative Care*.

Caring for School-Age Children

- **Convened the 1997 School-Age Child Care Forums.** The Child Care Bureau at the Department of Health and Human Services convened ten regional conferences to share promising initiatives for school-age children among child care, education, and community based organizations from nearly every state. These conferences spurred additional dialogue among participants and stimulated planning to address "out of school time" in states and communities across the country.

- **Keeping Schools Open as Community Learning Centers -- A Guide.** In May 1997, First Lady Hillary Rodham Clinton released *Keeping Schools Open as Community Learning Centers: Extending Learning in a Safe, Drug-Free Environment Before and After School.* The Department of Education, along with the National Community Education Association, Policy Studies Associates, and the American Bar Association, wrote the step-by-step guidebook on how school facilities can be used for after-school programs.

- **Providing After-School Activities Through 21st Century Learning Centers and Title I.** The Clinton Administration's Improving America's Schools Act of 1994 reauthorized the Elementary and Secondary Education Act. This law included a new statutory requirement that encourages schools receiving funding to enhance their instruction with such programs as extended school years, before- and after-school programs, and summer programs -- effectively giving "teeth" to after-school options. For instance, Title I -- which is funded by the Improving America's Schools Act and provides extra help with basic and advanced skills to disadvantaged students in elementary and secondary schools -- has been successful in helping Title I funded schools provide after-school programs. In addition, under this law, the 21st Century Community Learning Center program has been developed -- a program that once fully implemented will benefit urban and rural schools and their communities, allowing schools to stay open beyond the normal hours, offering expanded learning opportunities to children after-school. The President's current budget request includes $50 million to fund 350 21st Century Community Learning Center programs in FY 1998.

- **Supporting Positive After-School Choices with the Safe and Drug-Free Schools Communities Act.** Because children unsupervised after school are more likely to engage in risky behaviors like substance use, the Safe and Drug-Free Schools and Communities Act funds before and after-school programs. In the 1994-95 school year, over 2,700 school districts used these funds to support before- and after-school activities.

- **Staying Safe After School with Community Schools.** In the Anti-Gang and Youth Violence Initiative, the President has called for 1,000 new after-school initiatives across the country. Schools that stay open longer and are open on weekends and during the summer can provide students, parents and communities with access to valuable resources. Turning schools into after-hour safe havens can help to prevent violent crime and violent behavior while boosting our children's academic achievement.

- **Helping Children Through Service.** As co-chair of the Presidents' Summit for America's Future, President Clinton helped bring businesses, nonprofits, states and communities, and volunteer groups to Philadelphia in April 1997 to focus on service and to ensure that every child in America has five key resources -- a caring adult, a safe place, a healthy start, a marketable skill, and a chance to serve. Many of the hundreds of corporations and nonprofits that made commitments at the summit pledged to become involved in after-school and mentoring programs. America's Promise, the nonprofit organization founded to follow up on the summit promises, is now working with these organizations to ensure that they do so.

- **Enhancing Child Care and After-School Care with the Corporation for National Service**. Established by President Clinton in 1993, the Corporation for National Service, through AmeriCorps, Learn and Serve America and the National Senior Service Corps, is addressing the needs of children through service activities. Approximately two-thirds of the national service programs work to address the needs of children and youth often in child care and after-school settings. AmeriCorps members, college students, and senior volunteers, working alongside child care providers, are serving as tutors and mentors, health and nutrition educators, in both child care and after-school programs across the country.

- **Aiding the Boys and Girls Clubs of America**. The Clinton Administration is providing resources to the Boys and Girls Clubs of America to establish and enhance more clubs throughout the United States. These Clubs are situated in at-risk communities and reach thousands of kids through violence prevention and reduction, educational health programs and youth leadership development. For instance, the Boys and Girls Clubs of America was awarded an AmeriCorps grant to provide education awards to 100 full-time and 800 part-time AmeriCorps members in up to 100 clubs early next year. The AmeriCorps members will be either older (17 and 18 year-olds) Boys or Girls Clubs members or club member alumni who will serve as tutors, mentors, and recreation activity coordinators in after-school programs.

PROVIDING INFORMATION AND TECHNICAL ASSISTANCE

- **Providing Child Care Information**. In 1995, the Clinton Administration established the Child Care Bureau at the Department of Health and Human Services (HHS) to streamline child care program operations and improve the quality and efficiency of service. In addition, HHS launched the National Child Care Information Center to disseminate child care information, publications and resources to help providers start up child care centers, parents locate child care in their communities, and researchers and policy makers attain access to policy information. Through the Technical Assistance Project, HHS has brought states together to share promising practices and has held special forums on school-age care, consumer education, Tribal child care programs, and a range of other topics.

- **Promoting Public/Private Partnerships**. The Child Care Bureau has launched a nationwide effort to promote public/private partnerships in child care by providing technical assistance to states on promising initiatives going on across the country.

- **Providing a Resource and Referral Clearinghouse for Working Families**. The Department of Labor Women's Bureau recently published a report entitled: *What Works! The Working Women Count Honor Roll Final Report* which highlights employers who have made real change in the areas that working women and their families care about most -- pay and benefits, family friendly workplaces (including child care) and respect and fair treatment on the job. Hundreds of employers accepted this challenge to deliver real change -- especially in child care. This guide was a result of the Working Women Count national questionnaire which surveyed 250,000 working women -- the largest questionnaire of working women ever. Notably, child care was identified as a top issue for working women. In addition to this guide, the Labor Department has expanded its resource and referral clearinghouse for employers and working

families. The agency has established a toll-free number (1-800-827-5335) and provides materials like the *Work and Family Resource Kit* and *Care Around the Clock: Developing Child Care Before 9 and after 5*.

- **Training Caregivers -- a Nationally Acclaimed Program.** The Education Department's Office of Educational Research and Improvement supports the regional laboratory in San Francisco, California called WestEd. WestEd has developed a nationally acclaimed Infant/Toddler Caregiver Training Program which teaches caregivers how to provide nurturing and stimulating environments to promote quality child care. Research-based videos and printed materials are available in Spanish, Chinese, and English. Eight thousand caregivers have been trained in California and the program has been expanded across the nation.

Learning Lessons from the Military Child Development Programs

- **Providing High Quality Child Care -- The Military Model.** Under the Clinton Administration, the Department of Defense (DoD) has made important strides to improve the quality of child care for the children of the men and women who serve our country. The DoD Child Care System serves over 200,000 children (age zero to 12) daily making the U.S. military system the largest employer-sponsored child care program in the nation. The DoD Child Care System, known as the Child Development Program, includes Child Development Centers, Family Child Care homes, School Age Care programs, and Resource and Referral services. Through this system, the military offers full-day, part-day, and hourly child care, part-day preschools, before- and after-school programs for school age children, and extended hour care which includes nights and weekends to accommodate shift workers. Because of the Department of Defense's commitment to excellence in child care, since 1992, the number of military child care facilities that are accredited by the independent National Association for the Education of Young Children has risen from 55 to 353. Currently, over 75 percent of military child care programs are accredited, as compared to only 7 percent of other child care facilities nationwide. Since the early 1990s, the DoD has focused on improving the quality, availability, and cost of child care for military families.

- **Sharing the Military's Expertise**. Because of the DoD's high quality, comprehensive child care programs, in April 1997, President Clinton directed the Secretary of Defense to share the expertise and lessons learned from the Military Child Development Programs with Federal, State, tribal, and local agencies, as well as with private and nonprofit groups, that are responsible for providing child care. In his Directive the President stated, "The Military Child Development Programs have attained a reputation for an abiding commitment to quality in the delivery of child care. The Department of Defense's dedication to adequate funding, strict oversight, improved training and wage packages, strong family child care networks, and commitment to meeting national accreditation standards is laudatory. I believe that the military has important lessons to share with the rest of the Nation on how to improve the quality of child care for all of our Nation's children." In response to the President's directive, the Pentagon is implementing a plan to reach out to states and civilian child care centers to share its expertise.

SUPPORTING A FAMILY-FRIENDLY FEDERAL WORKPLACE

- **Promoting Family-Friendly Initiatives**. Under President Clinton's leadership, the federal government, striving to be a model employer for other private and public employers, has implemented family-friendly leave initiatives that enhance the ability of employees to balance family and employment obligations. In addition to leave initiatives, the federal government offers compressed or flexible work schedules to many workers so that they may spend more time with their families.

- **Providing Child Care for Federal Workers**. In addition to the Department of Defense's model child care program, there are more than 230 child care centers for civilian government employees in federal buildings in as many as 36 states. The General Services Administration (GSA) oversees 108 of these centers, making GSA the largest civilian sponsor of work-site child care in the nation. Under this Administration, the emphasis on quality has continued -- with 73 percent of GSA sponsored centers accredited by the independent National Association for Education of Young Children, and with a goal of reaching 100 percent accreditation within two years. Striving to meet the needs of parent workers, 89 percent of GSA centers have infant care, 74 percent have drop-in/emergency care, and 42 percent provide summer programs for school aged children. In addition, more than 80 percent of centers are open 11 or more hours per day. Nearly 70 percent of the child care center directors have ten or more years of experience in early childhood education.

PRESIDENT CLINTON SIGNS LEGISLATION THAT STRENGTHENS HEAD START AND PROVIDES CRITICAL SUPPORT FOR AMERICA'S FAMILIES
October 27, 1998

Today, President Clinton signed into law bipartisan legislation that strengthens and expands Head Start services for America's families, promotes promising Individual Development Accounts to help more low-income families achieve self-sufficiency, and renews the Low- Income Home Energy Assistance Program. Passed by Congress at the President's urging, the Human Services Reauthorization Act of 1998 provides critical support for America's families.

Strengthens Head Start. This legislation builds on the President's commitment to improve and expand Head Start. Under the President's leadership, Head Start has become America's premier early childhood development program, ensuring that low-income children start school ready to learn.

- **Increases Investments in Head Start.** The new legislation builds on the President's commitment to getting Head Start services to more children while also improving quality. Under the Clinton Administration, funding for Head Start increased by 68 percent, and enrollment has increased by over 200,000 children, reaching 830,000 children this past fiscal year. Because the President fought for and won a funding increase of $313 million for FY 1999, Head Start will continue to expand, moving toward the goal of serving one million children.

- **Doubles the Early Head Start Program.** This legislation adopts the President's proposal to double the percentage of Head Start funds directed to Early Head Start by 2002. In 1994, President Clinton created Early Head Start, expanding the program to reach low-income families with children aged three and under and to pregnant women. In FY 1999, funding for Early Head Start will total nearly $340 million.

- **Ensures Quality in Head Start.** The new legislation builds on the President's commitment to enhance the quality of Head Start; it promotes school readiness and family literacy, improves staff training and credentialing, and increases the funds set aside for quality improvements. The Clinton Administration has invested in improving Head Start services, attracting and retaining high quality teachers, and ensuring the safety of Head Start centers. In 1996, the Department of Health and Human Services set new Head Start performance standards, and has since monitored Head Start programs against these standards, provided staff training and technical assistance, and closed 100 programs unable to meet them.

Establishes Individual Development Accounts to Promote Self-Sufficiency. Since 1992, President Clinton has supported the creation of Individual Development Accounts (IDAs) to empower individuals to save for a first home, post-secondary education, or to start a new business. The passage of this legislation effectively

completes the President's 1992 community empowerment agenda. The legislation creates a five-year, $125 million demonstration program to establish IDAs for more than 50,000 people. Each dollar saved by a low-income family in an IDA would be matched, providing an incentive to build assets. The final budget agreement included $10 million to get this program off the ground.

Low-Income Home Energy Assistance Program (LIHEAP) Keeps the Heat On and Continued Support for Communities. After threats from some in Congress to eliminate this critical support for the elderly and low-income families, President Clinton successfully fought to fund the program that provides heating and cooling assistance to over five million households across the nation. The bill signed today also extends the Community Service Block Grant programs, providing states and organizations support on economic development, social services and other needs for low-income communities.

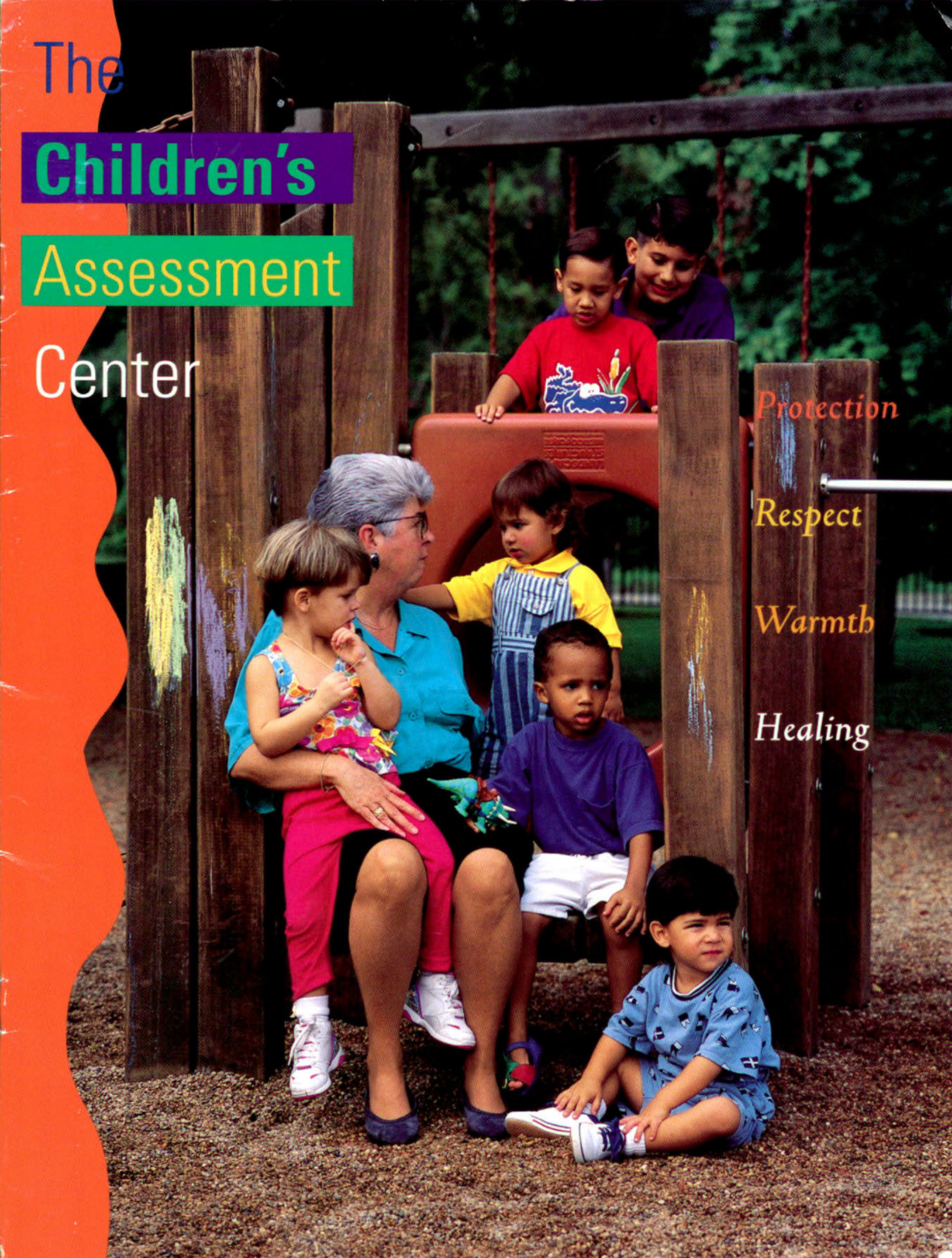
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The Children's Assessment Center



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THE BROWN FOUNDATION, INC.

From the office of...



Congressman Ken Bentsen

Representing Texas' 25th District
128 Cannon House Office Building
Washington, D.C. 20515-4325
202-225-7508 (phone)
202-225-2947 (fax)

FOR IMMEDIATE RELEASE
Contact: Vince Willmore

MEDIA ADVISORY FOR MONDAY, MARCH 16, 1998

FIRST LADY HILLARY RODHAM CLINTON TO DEDICATE CHILDREN'S ASSESSMENT CENTER

WASHINGTON (March 13, 1998) – At the invitation of U.S. Rep. Ken Bentsen (D-TX), First Lady Hillary Rodham Clinton will travel to Houston on Monday, March 16, 1998, to dedicate the new 53,000-square-foot John M. O'Quinn Building, home of The Children's Assessment Center, located at 2500 Bolsover in the Rice University Village.

The Center is the largest of its kind in the nation offering a full-service, child-friendly environment that meets the needs of child victims of sexual abuse. Its unique, revolutionary approach to offering a solution to the problems of abuse has earned it national and international attention.

The dedication program begins at noon Monday.

Media credentials for covering the event will be issued from 9:30 a.m. to 10:30 a.m. Monday at the press entrance in front of the Children's Assessment Center on Bolsover. All media are asked to be in place by 10:30 a.m. To receive a credential, you will need your press identification card or a letter on company letterhead along with a form of identification.

Live satellite trucks are asked to park at Kelvin and Bolsover. All other media are advised to park in the parking garage at 2500 Bolsover.

FOR IMMEDIATE RELEASE
MARCH 13, 1998

CONTACT: MARSHA BERRY
STEVEN COHEN
JULIE MASON
202-456-2960

FIRST LADY HILLARY RODHAM CLINTON'S SCHEDULE FOR MONDAY, MARCH 16, 1998

WASHINGTON, DC -- First Lady Hillary Rodham Clinton will travel to Houston, Texas to commemorate the opening of The Childrenls Assessment Center at Rice University Village. The center developed through a collaborative, public-private partnership is committed to assisting children and their families with the issue of child abuse. In the afternoon, Mrs. Clinton will attend a Womenls Leadership Forum luncheon.

In the evening, Mrs. Clinton will fly from Houston to Atlanta, Georgia to attend a Womenls Leadership Forum dinner.

EVENT: **Tour of Childrenls Assessment Center**
DATE: March 16, 1998
TIME: 11:45 am
LOCATION: Childrenls Assessment Center
Rice University Village
2500 Bolsover
Houston, TX
POOL ONLY

PRESS POOL
KHOU-TV (contact Bruce Dalton 713/526-1111, AP, Reuters, Houston Chronicle. Pool should arrive no later 10:45 am.

EVENT: **Ribbon Cutting of Childrenls Assessment Center**
DATE: March 16, 1998
TIME: 12:00 pm
LOCATION: Childrenls Assessment Center (outdoor)
Rice University Village
2500 Bolsover
Houston, TX
OPEN PRESS

PRESS NOTE
This event is open to the press. Any member of the press who requires extra time to pre-set their equipment should arrive between 7:30 am - 9:00 am. Final access for this event will be from 10:30 am - 11:15 am through the Kelvin Street Entrance.

Satellite truck parking available at Kelvin and Bolsover.

CREDENTIALING INFORMATION
No pre-credentialing is required. Reporters will be asked to show standard press identification to gain access to the event. The on-site contact is Whitney Williams.

PLEASE NOTE THAT DUE TO THE TIMING OF EVENTS, IT MAY NOT BE POSSIBLE TO COVER BOTH EVENTS IN HOUSTON

EVENT: **Womenls Leadership Forum Luncheon**

DATE: March 16, 1998
TIME: 1:30 pm
LOCATION: Monarch Room 24th floor
Westin Galleria
5060 West Alabama
Houston, TX
OPEN PRESS

PRESS NOTE
This event is open to the press. Any member of the press who requires extra time to pre-set their equipment should arrive between 9:30 am - 10:30 am. Final access for this event will be from 12:30 pm - 1:00 pm. 45' throw. Lit for TV. Mult Provided.

CREDENTIALING INFORMATION
No pre-credentialing is required. Reporters will be asked to show standard press identification to gain access to the event. The on-site contact is Whitney Williams.

EVENT: **Womenls Leadership Forum Dinner**
DATE: March 16, 1998
TIME: 7:15 pm
LOCATION: International Ballroom South
Hyatt Regency
265 Peachtree Street, SE
Atlanta, GA
OPEN PRESS

PRESS NOTE
This event is open to the press. Any member of the press who requires extra time to pre-set their equipment should arrive between 4:00 pm - 5:00 pm. Final access for this event will be from 6:30 pm - 7:00 pm.

CREDENTIALING INFORMATION
No pre-credentialing is required. Reporters will be asked to show standard press identification to gain access to the event. The on-site contact is Leigh Flores.

Editorls Note: Mrs. Clinton will return to the White House following her last event in Atlanta.

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The Children's Assessment Center

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The Children's Assessment Center Foundation

MEDIA REMINDER

EXCLUSIVE MEDIA TOUR IN ADVANCE OF HILLARY CLINTON'S VISIT TO HOUSTON

A special **Media Tour** of the new 53,000-square-foot John M. O'Quinn Building, home of The Children's Assessment Center, is scheduled for **Thursday, March 12 from 4 to 5 p.m.** The new building is located at 2500 Bolsover in the Rice University Village. The Center's Executive Director Ellen Cokinos, the administrative staff, volunteers, and County Judge Robert Eckels are scheduled to attend and will be available to show you around the building and answer questions.

This special opportunity to tour the facility is being made in preparation for First Lady Hillary Rodham Clinton's visit to Houston at noon on Monday, March 16 to commemorate the opening of The Children's Assessment Center's new building. Photography or videotaping inside the center is normally prohibited to protect the privacy of the families and children at the Center. For security reasons, access will be limited during the First Lady's March 16 tour of the building. After her tour, Mrs. Clinton will address the media and invited guests during the building dedication ceremony.

The Center is the largest of its kind in the nation offering a full-service, child-friendly environment that meets the needs of child victims of sexual abuse. This tour will provide a unique opportunity to see how the Center operates, from the initial videotaped interviews to therapy and counseling sessions, and how the Center's revolutionary approach to offering a solution to the problems of abuse has earned it national and international attention.

If you plan to attend, please contact Russ Roberts at (713) 757-5435.

# # #

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FOR IMMEDIATE RELEASE

FIRST LADY HILLARY RODHAM CLINTON TO OFFICIALLY OPEN NEW BUILDING FOR THE CHILDREN'S ASSESSMENT CENTER

HOUSTON, TEXAS, February 23, 1998 – First Lady Hillary Rodham Clinton will be in Houston for a ribbon cutting ceremony at noon on Monday, March 16 to commemorate the opening of the new 53,000-square-foot John M. O'Quinn Building, home of The Children's Assessment Center, located at 2500 Bolsover in the Rice University Village.

The Center is the largest of its kind in the nation offering a full-service, child-friendly environment that meets the needs of child victims of sexual abuse. Its unique, revolutionary approach to offering a solution to the problems of abuse has earned it national and international attention.

The Children's Assessment Center combines the strengths of the public sector, private sector funding, and the support of numerous dedicated community volunteers to enhance service and more effectively treat sexually abused children. The Center is designed to provide child victims with on-site medical and social services. The child is videotaped by specially trained interviewers. That videotaped interview allows the Center staff, law enforcement officials, social workers, prosecutors and other partnering members to obtain necessary information without subjecting the child to additional questioning.

"The development of The Children's Assessment Center is the result of our community uniting to accomplish the common goal of providing effective protection for children," said Ellen T. Cokinos, Executive Director for The Children's Assessment Center. "We are honored to have Mrs. Clinton in Houston for the opening of our new building. Her presence affirms the importance of the services that the Center offers and recognizes that this building is designed specifically to serve children. We're also very proud of our devoted volunteers. Their efforts make this a safe, successful, and comfortable place for these children."

-more-

The Children's Assessment Center is a collaborative effort between ten partnering agencies committed to assisting children and their families with the issue of sexual abuse. Since the Center's inception in 1991, it has served more than 20,000 children. The partnership includes: Child Advocates, Inc., Harris County Attorney's Office, Harris County District Attorney's Office, Harris County Children's Protective Services, Harris County Sheriff's Department, Houston Police Department, Texas Department of Protective and Regulatory Services, Interfaith Ministries for Greater Houston-Youth Victim/Witness, Memorial Hermann Healthcare Systems and the University of Texas Health Science Center/Houston.

In 1995, the Center established a true public-private partnership through an agreement between Harris County Commissioners' Court and The Children's Assessment Center Foundation. The Center receives one-half of its annual program operating budget from Harris County. The remainder of the funds are raised by The Children's Assessment Center Foundation through the generous contributions of corporations, foundations, and individuals. Harris County contributed the use of the property while the new facility was built using funds raised over three years through The Children's Assessment Center Foundation's $10.25 million capital campaign.

# # #

Media Contact:
Norma Dunn 713-757-3750



The Children's Assessment Center Saves Children, One Case At A Time

** Names and some facts in this case history have been altered to protect the rights and privacy of the individuals. Photos are not actual victms.*

An alert kindergarten teacher contacted Children's Protective Services (CPS) regarding one of her students. Five-year old Paula* whispered to the teacher before class about sexual acts that had been forced on her by her father. After a brief interview with the child at her school, the CPS caseworker brought little Paula to The Children's Assessment Center. Shy and scared, Paula was put at ease by Lisa, a Center volunteer, while waiting to be interviewed on videotape by a Specialized Interviewer with a talent for communicating with small children. Afterward, Paula and Lisa watched a movie in the play room while the child's parents met with a CPS caseworker. As expected, the father denied the abuse, and as sometimes happens, the shocked mother refused to believe her daughter. For safety's sake, CPS took immediate custody of Paula and placed her in a foster home.

The following day, Paula was thoroughly examined at The Center's medical clinic by a physician trained in the diagnosis of sexual abuse. The physician confirmed Paula's story. This medical finding and Paula's videotaped statement provided enough evidence for a Houston police officer housed at The Center to present the case to a prosecutor who was also on-site. Following his arrest, the father pled guilty and his daughter was spared a trial that would have further traumatized her.

By this time, Paula gained an important defender, her mother. Finally convinced that her daughter was telling the truth, she assisted The Center's professionals in removing her husband from the home and placing Paula with relatives who could properly care for her while she entered therapy. Mother and daughter still attend weekly therapy sessions at The Center and are making tremendous progress toward reuniting as a family.



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The Children's Assessment Center

View of Entry Courtyard



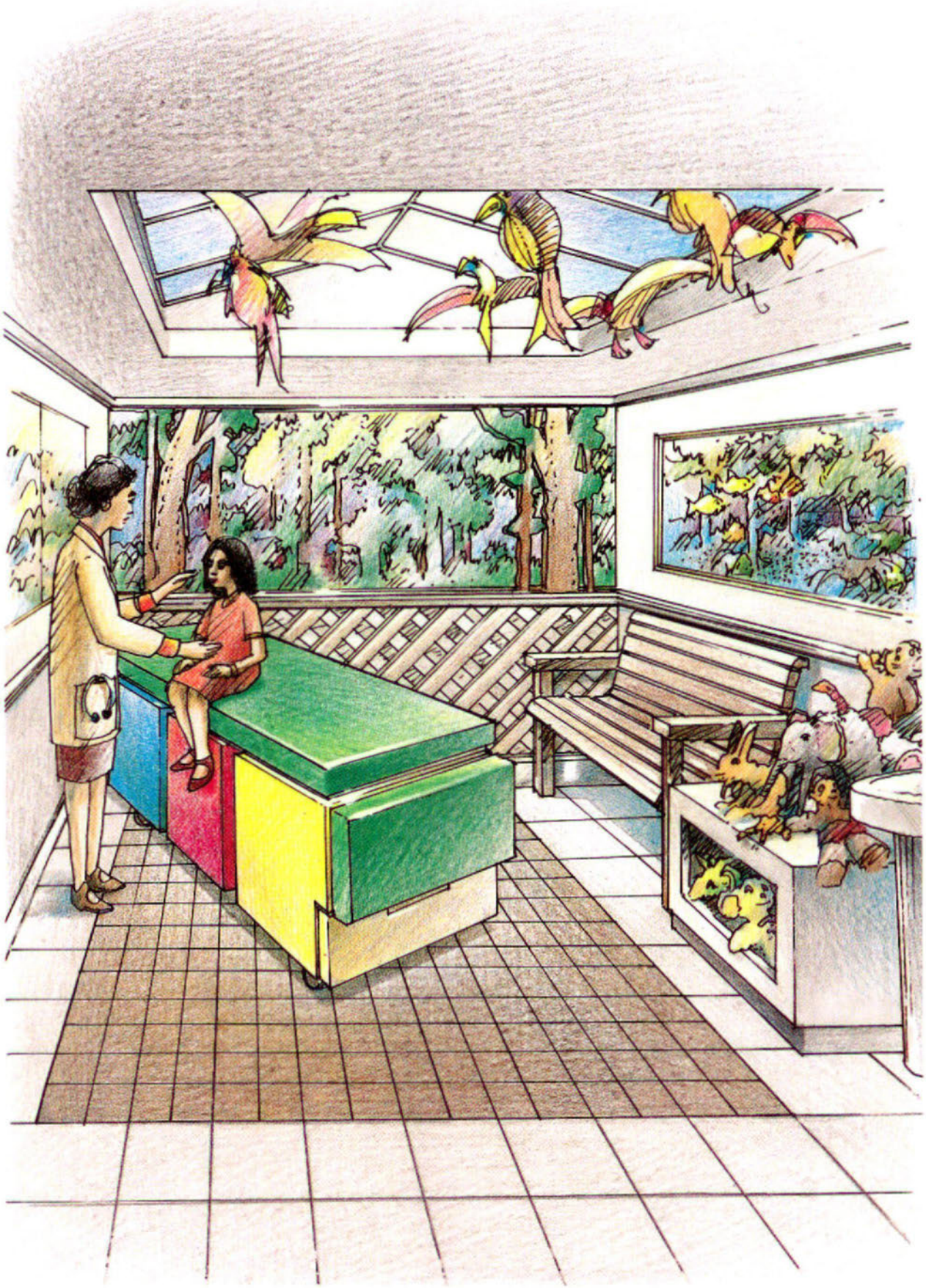
The Children's Assessment Center

Children's Support Area



The Children's Assessment Center

Clinical/Therapeutic Services



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Medical Services

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First Lady's Office
Lissa Muscatine
OA/Box Number: 20079

FOLDER TITLE:
Background - Child Care [2]

2015-0275-S
rc1937

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

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b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
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b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
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The Children's Assessment Center

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Realization of a Dream

The Story of the Children's Assessment Center

In 1987, Harris County Children's Protective Services (HCCPS) created a task force to develop a more compassionate approach to assisting young victims of sexual abuse. The agency had already teamed CPS case workers with police officers, which was considered progressive for the 1980s. However, there was still a gap in services that needed to be filled. Ellen Cokinos and Susan French teamed up to bridge that gap. The pair had the unique vision to establish a partnership of public and private resources to create a child-focused approach to dealing with sexually abused children.

An experienced social worker handling sexual abuse cases, Ellen was the driving force behind developing this new therapeutic model. Susan, who was an HCCPS Fund board member, former Junior League president and long-time community volunteer, spearheaded the fundraising aspect of the effort. Although neither had significant fund raising experience, they spent many long hours together writing grant proposals, literally tapping them out on an old typewriter from home. In 1990, Susan delivered an impassioned plea for funding to the HCCPS Fund Board, not only sparking great interest in the program, but also securing their first grant of $100,000.

With this initial funding in place, the Children's Assessment Center was formed and Ellen became its executive director. In this Center, the primary concern was the protection and healing of sexually abused children. The other aspects of law enforcement and prosecution of offenders, although important, became secondary.

Staffing the Center was a top priority. Ellen's team felt strongly that each child should be interviewed only once, because repeated interviews were traumatic for sexually abused children. Ellen believed that specially trained experts who were thorough, sensitive and objective, could obtain all of the necessary information in one interview. She convinced the agencies involved that a video tape of this interview would serve the needs of the police and district attorneys investigating the crime, and in addition, serve as valuable evidence obtained in a non-leading manner which is admissible in court.

The Center rapidly expanded, but still occupied just a small corner of the HCCPS facility. Several partner agencies signed on to join the Center, and Ellen began recruiting the other groups needed to provide a full array of services to sexually abused children.

Susan and Ellen believed the Center could be most effective operating out of its own building in a warm, child-friendly setting, with all of the partnering agencies housed under one roof. It was a new idea and one that met with considerable resistance on numerous fronts, however, the duo persevered. Harris County officials responded to the need and agreed to donate an unoccupied county building located in the Rice Village area. When an inspection of the building deemed it unusable and beyond repair, Susan and Ellen began to envision a brand new building constructed on the site of the old one. Now they just needed $10 million to pay for it.

Disregarding the advice of many who said it couldn't be done, Susan and Ellen embraced the challenge. They formed a foundation, enlisted the help of community volunteers and launched a capital campaign. They cultivated key relationships with foundation boards and corporate executives, wrote proposals, made presentations and met one-on-one with potential donors.

Never loosing sight of the children they were helping or their passion for the cause, Susan and Ellen proved to be indefatigable. Eventually contributions started coming in from foundations, corporations and individuals. Incredibly, the building funds were raised in record time, construction of a new 53,000 square foot building began, and many of the once skeptical civic and community leaders praised the project as one of the city's greatest assets.

Today the Children's Assessment Center, which has received national and international acclaim for its innovative approach, is in its new home. In the seven years since Susan and Ellen captured their dream on an old typewriter, the Center has become a reality, healing the lives of sexually abused children.



The Children's Assessment Center

an advocacy center for children

The Children's Assessment Center Foundation

FACT SHEET

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In 1997, The Children's Assessment Center served over 5,000 sexually abused children and their families by fulfilling its mission to protect children by providing co-housing, coordination, agency collaboration and the use of the multi-discipline team approach in prevention, assessment, investigation, referral for prosecution and treatment of child sexual abuse.

As a program of Harris County Commissioners' Court, The Center represents a true partnership between the public and private sectors for the most effective services delivery to children and families. Located at 2500 Bolsover, The Center's new $10 million, 53,000-square-foot, state-of-the-art facility was specifically designed to provide an environment that will meet each child's need for warmth, support and protection.

The Children's Assessment Center is a member of the National Network of Children's Advocacy Centers and part of a national movement to create child-friendly intervention systems for sexually abused children. Harris County is the largest metropolitan area to serve sexually abused children in this innovative manner. The Center is also the largest program of its kind in the nation.

The Center houses professionals from ten partner agencies, which include law enforcement, medical and mental health institutions, and governmental investigative entities all with the common goal of protecting children. The following agencies collaborate with The CAC to provide a comprehensive, coordinated team response to child sexual abuse victims in Harris County:

- Child Advocates, Inc.
- Harris County Children's Protective Services
- Harris County Attorney's Office
- Harris County District Attorney's Office
- Harris County Sheriff's Office
- Memorial Hermann Healthcare Systems
- Houston Police Department
- Texas Department of Protective and Regulatory Services
- Interfaith Ministries/Youth Victim/Witness
- The University of Texas Health Science Center/Houston

The Children's Assessment Center substantially benefits child sexual abuse victims and families by offering the following:

- One child-friendly location
- On-site medical and clinical assessments
- Joint training for all professionals and volunteers
- Elimination of repetitive interviews of children by offering co-housing of all disciplines and team staffings of all cases
- Quality, coordinated assessment and planning by professionals to insure the success of recovery by children and families

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THE CHILDREN'S ASSESSMENT CENTER . . .
AN ADVOCACY CENTER FOR CHILDREN

THE CHILDREN'S ASSESSMENT CENTER MISSION

"I asked you for help. You told me you would if I told you about the things my Dad did to me. It was really hard for me to tell what happened, but you told me to trust you -- then you made me repeat my story to 10 strangers.

I asked you not to tell anyone. You sent two policemen to my school who talked to me in front of everyone, then took me to a hospital where I waited all night to see a doctor.

I asked you to make it stop. Then a social worker sent me to live with strangers, far from my family and friends.

I asked you to believe me. You said that you did. Then you took me to court where lawyers put me on trial and made me feel like a liar."

The social, emotional, physical and economic trauma associated with the discovery of childhood sexual abuse can leave irreparable scars on the life of a victim and his or her family. Events following the discovery of abuse -- repetitive interviews, medical examinations, referrals for physical and psychological treatment, investigation and prosecution -- perpetuate the victimization of children. When not coordinated and processed with a high degree of sensitivity and collaboration, they often contribute to a systemic breakdown, resulting in failure to protect the child, convict the alleged offender, and stop the abuse. Therefore, the child often continues to be victimized, family members are traumatized, and the perpetrator eludes necessary therapeutic attention. The Children's Assessment Center was established in 1991 in the heart of Harris County as a solution to this service delivery breakdown and the outcry of sexually abused children.

The Center provides a unique multi-disciplinary, multi-agency approach in addressing child sexual abuse cases by expanding, coordinating and collaborating with partner agencies, which represent existing community based services. This unique approach to treating child sexual abuse is captured and reinforced through The Center's mission statement: ***The mission of The Children's Assessment Center is to protect children by providing co-housing, coordination, agency collaboration, and the use of the multi-disciplinary team approach in the prevention, assessment, investigation, referral for prosecution and treatment of child sexual abuse.***

THE HISTORY

In April 1991, Ellen Cokinos was hired as Executive Director to create The Children's Assessment Center as an organization of the Harris County Children's Protective Services Board. She and one support person developed and implemented the program with a $50,000 County allocation, which was matched by funds provided through a private entity, the Harris County Children's Protective Services Fund Board. The Center was initially established under the umbrella of Harris County Children's Protective Services. Generous foundations, corporations, and individuals funded seventy percent of The Center's total budget. Harris County Commissioners' Court provided the remaining thirty percent through the Harris County Children's Protective Services budget.

Because The Center has successfully met the needs of child victims of sexual abuse, the agency has consistently and explosively grown to serve the ever-increasing number of referrals to this unique program. As demonstrated by the following, The Center has grown:

- **in personnel**: from 1 to 26 employees, 25 active volunteers, and ten partner agencies represented by over 100 on-site personnel;
- **in budget**: from a $50,000 allocation from both the private and public sectors to an operating budget exceeding $1.8 million, with in-kind contributions over $4 million;
- **in recognition**: from a concept and a "good idea for Harris County," to a nationally and internationally respected program, the largest such advocacy center in the nation;
- **in children served**: from no coordinated services for sexually abused children in Harris County to a comprehensive, collaborative program built on multi-disciplinary teamwork;
- **in size**: from one small office shared by the Director and support staff member to a justified need for a 53,000-square-foot building to meet minimum requirements of the program;
- **in community support**: from a small task force gathered to investigate the needs of child sexual abuse victims to a community committed to ongoing support and enhancement of The Children's Assessment Center, including the formation of The Children's Assessment Center Foundation in 1995 to raise $10.25 million to design, construct and furnish a specially designed facility to meet the program's unique needs;
- **in local government support**: from willingness to participate via partner agencies to the deeding of county property in the Medical Center area for The Center's new facility, resulting in an agreement signed in November 1995, establishing The Center as a County department and initiating a public/private partnership between Harris County and The Children's Assessment Center Foundation.

THE PARTNERSHIP

The Center's professionals soon recognized that the combined strengths of the public and private sectors would enable them to provide enhanced services that more effectively promoted the treatment of sexually abused children. Through an agreement between Harris County Commissioners' Court and The Children's Assessment Center Foundation, The Center established a true public-private partnership in November 1995. As a department of Harris County Commissioners' Court, The Center receives one-half of program operating costs from the County. The remainder is raised in the community through The Children's Assessment Center Foundation, a 501(c)(3) entity that serves as a supporting organization of Harris County Commissioners' Court. The community generated support is cultivated through grants from foundations and corporations, contributions made by private organizations and individual donors, and several annual fundraising events hosted by The Center.

In addition to raising half of The Center's program operating budget, The Children's Assessment Center Foundation is responsible for raising and managing the funds for the construction and operation of the new facility to house the program. The 53,000-square-foot, state-of-the-art facility co-houses all The Center's and partner agencies' staff and will better equip the professionals to meet the diverse needs of sexual abuse victims in a child-friendly atmosphere.

The Board of Advisors, appointed jointly by Harris County Commissioners' Court and The Children's Assessment Center Foundation, makes recommendations regarding the policies and operations of The Center.

THE PROGRAM

The Center's services are initiated when a child alleging sexual abuse is referred to The Center by Harris County Children's Protective Services or any area law enforcement agency. The child is interviewed on videotape by a Specialized Interviewer specifically trained in working with sexually abused children and skilled in obtaining information necessary for law enforcement and prosecution. The videotaped interview allows Center staff, law enforcement personnel, the District Attorney's office and other partner staff key to the management of the case to view the child's disclosure and initial reactions without having to further traumatize him or her with repetitive interviews. It also preserves the child's account of events to be used in court proceedings and has been useful in confronting non-believing caretakers.

A child is introduced to The Center's on-site medical clinic when he or she receives a sexual abuse medical exam and assessment. The Center's physicians have received extensive training in both pediatrics and sexual assault exams. Their findings are documented through the use of a colposcope, a state-of-the-art piece of equipment, and determining a child's medical history. The medical clinic also makes available basic, preventive healthcare services to ensure the complete recovery of child victims of sexual abuse.

Children assessed as having therapeutic or psychological testing needs have immediate access to The Center's Clinical Services Program. The Clinical Services team is comprised of psychologists and therapists who are experienced in working with children and family members who have been affected by sexual abuse. An individualized treatment plan is created for each child utilizing information from psychological testing. In conjunction with the psychologists, the therapists determine the appropriate combination of individual, group, family, and/or play therapy.

Through The Center's Volunteer Services Program, children are introduced to a trained volunteer who acts as a liaison for the child and family, linking them with professionals and critical services at The Center allowing healing to begin.

THE COLLABORATION

The direct services provided through The Center's program are enhanced by the expertise of ten partner agencies that are committed to making child sexual abuse victims and their families high priorities within their respective systems. Each has signed an Inter-agency Agreement and the Guidelines for Center Operation. The ten partner agencies include:

Child Advocates, Inc. (CASA), providing The Center's volunteers with extensive training and offering ongoing consultation to The Center's Community Outreach Coordinator;
Harris County Attorney's Office, representing the State of Texas in all matters concerning the care, custody, and control of children. Provides legal information regarding the management of The Children's Assessment Center program;
Harris County Children's Protective Services (HCCPS), providing in-kind support through office space, utilities, postage, data services, and supplies;
Harris County District Attorney's Office, evaluating cases for prosecution and providing legal consultation for law enforcement personnel;
Harris County Sheriff's Department (HCSD), gathering information from investigative interviews of the child, evidence for prosecution, and providing protection during the intervention process;
Memorial Hermann Healthcare Systems, contributing to the program through ongoing in-kind consultation and support;
Houston Police Department (HPD), handling approximately 60% of cases investigated by CPS sexual abuse teams, while performing similar functions to HCSD;
Interfaith Ministries for Greater Houston, Youth Victim/Witness, providing professional accompaniment to children on criminal court cases, support groups for parents and vital information on the Crime Victims Compensation Fund;
Texas Department of Protective and Regulatory Services (TDPRS), exercising their statutory responsibilities of protecting children and investigating complaints of child abuse and neglect;

University of Texas Health Science Center/Houston, providing comprehensive, specialized medical services through an on-site physician and Sexual Assault Nurse Examiner who provide instruction and training to medical students.

The shared philosophy and resources of these partners have led to the overwhelming success of this unique collaboration.

THE COMMITMENT TO TRAINING

This advocacy center model of coordinated services for sexually abused children has established a new precedent in the field, and The Children's Assessment Center has swiftly positioned itself as a leader in this movement. As the largest of 132 full members of the National Network of Children's Advocacy Centers, The Children's Assessment Center has assumed the responsibility of training others locally, state-wide, nationally, and internationally. Serving a critical educational need of the community, The Center is an academic internship site for students from related disciplines of mental health, social work, criminal justice and medicine from: The University of Texas' Medical School's Adolescent and Child Psychiatry Program; University of Houston's Graduate School of Social Work, College of Technology, and Department of Human Development and Family Studies; Sam Houston State University's Criminal Justice Program, Counseling Psychology Department; Texas Southern University; and Prairie View A&M.

The Center also serves as a training source to professionals and concerned community individuals. Members of The Center's staff are frequently invited to make presentations regarding the issues of child sexual abuse to schools, civic organizations, religious congregations, law enforcement agencies, and other entities. Most recently, staff members were invited to Iceland to train child welfare professionals how to establish a children's advocacy center. Numerous professionals tour The Center each year to learn about the multi-disciplinary approach and the powerful and effective tools utilized to prevent, intervene, and treat child sexual abuse to implement in their respective systems.

The Center has hosted a number of training opportunities, including an annual exchange program with Hong Kong's Social Welfare Department and a statewide conference titled "Establishing Children's Advocacy Center Services in Underserved Areas." The Center was also selected as a host for The National Training Program on Effective Treatment Approaches in Child Sexual Abuse in 1994.

THE CAPITAL CAMPAIGN

In 1995, The Children's Assessment Center Foundation undertook a capital campaign to raise $10,250,000 to plan, design, develop, construct, furnish, and equip a new child-friendly facility that is designed around the special programmatic needs of child sexual abuse victims. This carefully designed facility enables The Children's Assessment Center to accomplish effective work in child sexual abuse prevention, assessment, intervention and treatment, as mandated by

the mission statement. The building includes a medical clinic, interview rooms, therapy rooms and offices, large volunteer and play areas, outdoor playgrounds, and:

- one centralized location that serves as a safe, consistent, comfortable place where all systems are introduced to the child making allegations of sexual abuse
- quality, state-of-the-art areas to: 1) conduct interviews of child victims, witnesses and non-offending family members and 2) accommodate specialized sexual assault medical exams and medical treatment for victims
- adequate space to: 1) conduct on-site clinical consultation for team members, multi-disciplinary staffings, and board meetings, 2) assess and treat children and family members in individual, group and family therapy, and 3) prepare children and their families for court
- a central location for other agencies from throughout Harris County to work on cases and conduct interagency meetings
- facilities where community volunteers can offer immediate resources to children and families including food, clothing, and other necessary items

The Center moved into the new 53,000-square-foot building in March 1998. Located at 2500 Bolsover, near the Medical Center and Rice University, the new building is accessible from all parts of Harris County and by Metro for clients utilizing public transportation. Harris County Commissioners' Court deeded this property to The Children's Assessment Center Foundation on December 27, 1994, for forty years in exchange for services provided by the program to sexually abused children. Harris County has agreed to fund and maintain facility operations.

CONCLUSION

The work and mission of The Children's Assessment Center are accomplished through the public/private partnership of resources and manifested through multi-disciplinary collaboration. Monumental advances in interagency collaboration, unmatched in Harris County and surrounding communities, and the formation of a team of professionals nationally recognized for their expertise in child sexual abuse treatment, have been accomplished through the planning and guidance of The Children's Assessment Center's staff and supporters. Additionally, through the assembly of powerful community advocates for the program, The Children's Assessment Center has spearheaded a campaign to fund a specially designed facility to meet the unique needs of the program.

The development of The Children's Assessment Center tells the story of how powerfully a community has united to accomplish a common goal, how diverse disciplines can cooperate to provide effective protection for children, and how a mission to protect the most vulnerable citizen can lead to a public/private partnership that emerges as a leader throughout the nation.