Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

DEPARTMENT OF ENERGY

Divider Title: _____

DEPARTMENT OF ENERGY
Washington, DC 20585
March 24, 1997

OFFICE OF THE SECRETARY

TO: ELENA KAGAN
DEPUTY ASSISTANT TO THE PRESIDENT
FOR DOMESTIC POLICY

FROM: STEVEN GALSON, MD, MPH
CHIEF MEDICAL OFFICER, DEPARTMENT OF ENERGY

SUBJECT: DOE ACTIVITIES ON CHILDREN IN THEIR EARLIEST YEARS

The following is in response to President Clinton's February 24, 1997 memorandum requesting information about agency activities related to children in their earliest years.

As you know, early childhood programs are not a focus of activity at DOE. However, as one of the government top backers of biomedical research we do fund projects with relevance for this age group. Some of these are listed below:

HUMAN GENOME RESEARCH

Department of Energy scientists have played a significant role in the worldwide effort to map and sequence the human genome. This work began in 1983 when scientists at our Los Almos National Laboratory initiated a project to construct DNA libraries for each human chromosome. The libraries have been used by investigators throughout the world to identify and isolate the genes responsible for human genetic diseases. These studies are expected to continue to provide new insights into human disease and lead to a better understanding of human growth and development.

TEACHING HEARING-IMPAIRED STUDENTS TO SPEAK

Researchers at our Los Almos National Laboratory have developed a technology that can be used for teaching hearing impaired children to speak. As the student talks into a microphone attached to a specially equipped personal computer, the computer shows an animated display of the speaker's tongue, lips, and jaw - the structures of the vocal tract. The technology is based on an artificial neural network that infers the speaker's vocal tract from the acoustic input received from the speaker. This work offers new hope to the hearing-impaired child for normal speech development.

PEDIATRIC NUCLEAR MEDICINE

Our Oak Ridge National Laboratory is developing "tracer" agents safe for use with newborn children for non-invasive early detection of inherited defects, including neurological diseases. Early detection greatly enhances the chances of normal neurological development.

DOE CHILD DEVELOPMENT CENTERS

Two innovative child development centers in the Washington, DC area showcase energy technology innovations while providing a safe, secure and nurturing environment for high quality, educational child care. The centers provide a program that fosters the total social, emotional, intellectual and physical development of the child and utilizes the unique resources of the DOE to challenge children to achieve their maximum potential. The program exposes children to innovations using technology available through the DOE and encourages children to think, reason, question and experiment, while fostering a positive self-concept.

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

DEPARTMENT OF EDUCATION

Divider Title: _____

UNITED STATES DEPARTMENT OF EDUCATION

THE SECRETARY

March 24, 1997

The President
The White House
Washington, DC 20500

Dear Mr. President:

I am pleased to transmit for your review the enclosed report from the Department of Education on projects and programs that target the earliest years of life. The report responds to your memorandum of February 24 to the heads of executive departments and agencies.

I believe this report demonstrates our commitment with you to supporting the cognitive, emotional, and physical development of young children. If you or your staff have questions or comments about the report, please contact Carol H. Rasco, my Senior Advisor and Director of the America Reads Challenge, at 401-8888.

Yours sincerely,

Richard W. Riley

Enclosure

Federal Policies Targeted to Children in their Earliest Years

THE UNITED STATES DEPARTMENT OF EDUCATION

The Department of Education has three major offices with legislative authority to conduct programs and/or research for young children and their families -- Office of Educational Research and Improvement, Office of Special Education and Rehabilitative Services, and Office of Elementary and Secondary Education. In addition, President Clinton's *America Reads Challenge*, housed in the Office of the Secretary, includes an initiative that targets the earliest years of life. Furthermore, the Secretary's Partnership for Family Involvement in Education encourages community-based organizations, families, the religious community, employers, and schools to work together to be "family friendly for learning" starting in the earliest years. This report summarizes the existing and planned projects and programs for each office, the *America Reads Challenge*, and the Partnership for Family Involvement in Education. The report closes with a discussion of proposed multiagency research and demonstration activity for FY 1999 designed to nurture young children's learning, development, and resilience and to build on families' strengths.

THE OFFICE OF EDUCATIONAL RESEARCH AND IMPROVEMENT

The Office of Educational Research and Improvement (OERI) sponsors research and demonstration projects to help improve education; collects statistics on the status and progress of schools and education throughout the nation; and distributes information and provides technical assistance to those working to improve education. Within OERI, there are ten components, two of which have activities targeted directly toward very young children. One of these is the National Institute on Early Childhood Development and Education, and the other is the National Center for Education Statistics.

A. THE NATIONAL INSTITUTE ON EARLY CHILDHOOD DEVELOPMENT AND EDUCATION

The National Institute on Early Childhood Development and Education (ECI) was established on October 1, 1995. The Institute supports research, development, and dissemination activities designed to improve early childhood development and education; provide a sound basis from which to identify, develop, and evaluate models, methods, and approaches which promote the social, emotional, health, nutrition, and educational development of young children; maximize the role of parents and the community in the development and learning of young children; investigate how family literacy and parental involvement affect young children's learning and development; determine effective strategies for improving professional development, learning methods, and curricula for young children; and provide information that can be utilized in improving the major Federal early education programs.

1. Existing projects and programs

For FY 1996, the Institute had a budget of $6.45 million, and the budget for FY 1997 is $8.0 million. Currently funded activities include the following:

The Institute's Centers Program provides a stable foundation for long-term research and development on core issues and concerns regarding the development and education of young children. Currently, ECI supports one Research and Development Center:

The National Center for Early Development and Learning conducts research that will improve young children's learning and development by identifying effective strategies for working with young children and their families; determining the state of the nation on critical issues in early childhood practices; developing partnerships with diverse constituencies; synthesizing knowledge and recommending future research directions; and translating research to practice and disseminating information to diverse audiences. The Center, funded in its first year at $2.95 million, has six strands of research activities:

1. *Early Child Care Quality Strand* - Investigates to what extent quality in early childhood programs for 3- and 4-year-olds affects school performance and behavior by second grade; what strategies are most effective for improving the quality of child care; what early educators consider to be quality practices and what they see as the barriers to achieving quality; the dimensions of quality in early intervention programs for infants with disabilities and whether variations in quality result in variations in outcomes for infants with disabilities.

2. *Kindergarten Transition Strand* - Identifies how early childhood experiences at home and in preschool settings influence children's transitions to kindergarten; the most prevalent kindergarten transition practices in America's schools; what teachers perceive to be the most important transition practices and the barriers to their implementation; the state of research knowledge on kindergarten transitions and the important priorities for research and practice; and how relationship-focused programs affect transitions to kindergarten.

3. *Ecological Intervention Strand* - Examines the unique risk factors associated with infants who have failure-to-thrive syndrome, young children who have early onset of aggressive and antisocial behaviors, and children whose families have low literacy levels; the intervention models currently used with these populations; and if new, family-centered, community-based models of supports and services to reduce risk factors, improve outcomes for these three populations of young children and their families.

4. *Early Childhood Policy Strand* - Determines the major policy issues affecting young children and their families; how states establish and implement policies in the identified areas; and what factors facilitate or inhibit the implementation of effective policies related to young children's learning and development.

5. *Statistical Modeling of Extant and Project Data Strand* - Evaluates how existing data sets can be used to answer new questions about early childhood development and child care practices; and the most appropriate statistical methods for analyzing complex longitudinal and cross-sectional data on young children, families, and intervention programs and models.

6. *Translation of Research to Practice Strand* - Develops and evaluates effective strategies for disseminating research findings in different formats to diverse audiences; interprofessional development strategies and materials, using cases, technology, and other innovative means; and models for meaningfully involving families and practitioners in the research, evaluation, and dissemination activities of the Center and its collaborative sites.

The Institute's Field-Initiated Studies (FIS) program supports projects, proposed by the early childhood research field, that have the potential for improving the learning and development of young children. The Institute has made seven grant awards, relatively equally divided and totaling $1.3 million, as follows:

FIS to improve school readiness:

Supporting Young Children's Readiness for School Mathematics through a Pre-kindergarten and Family Math Curriculum - This project will study the ways in which young children's mathematical development is supported at home and in preschool classrooms and develop methods for enhancing young children's readiness to learn mathematics. A new mathematics curriculum will be tested in low- and middle-income homes and preschools.

FIS to improve family support and young children's development and learning:

Assessing the Effectiveness of Early Parenting Education and Support through Home Visiting for Families with Young Children - This multi-site, randomized study will assess the short- and long-term effects of the Parents As Teachers (PAT) program on urban, low-income families. Several private foundations also are supporting this evaluation effort that will investigate to what degree PAT affects parent knowledge, attitudes, and behaviors; parent-child interactions; and early development and later school readiness, school performance, and attendance.

Improving Educational Readiness through Theory-Based Interventions Focused on Building Resilience for Our Youngest At-Risk Children - This research will develop a new home-visiting intervention that is based on resiliency theory. The immediate program impacts and the comparative longitudinal impacts will be evaluated.

The Early Education Home-School Portfolio Project - The study will build a partnership between Spanish-speaking immigrant families enrolled in a family literacy program and teachers in an early childhood education program. Parents will learn to document their young children's literacy at home and how to use portfolios to communicate this information to the children's teachers. Improvements in literacy and home-school communication will be evaluated both quantitatively and qualitatively.

FIS to reduce the effects of young children's exposure to community violence:

> *The Role of Family and School in Promoting Positive Developmental Outcomes for Young Children in Violent Neighborhoods* - This work will examine the effects of exposure to community violence on preschoolers' cognitive, motor, and social-emotional development and then evaluate the impact of an intervention program on the children's developmental domains.

FIS to improve the inclusion of young children with disabilities:

> *Individualizing Developmentally Appropriate Practices for Preschool Children with Disabilities* - This study will compare two alternative instructional procedures -- developmentally appropriate practices and traditional early childhood special education practices -- and determine how they impact the learning and development of preschoolers with disabilities.
>
> *Field-Initiated Research Project* - A social competency curriculum will be used with 2- to 4-year-olds with disabilities who attend day care, Head Start, nursery schools, and other inclusive community group activities, and a second group will attend the same programs but not be exposed to the social competency curriculum. The short- and long-term effects of the curriculum will be evaluated.

The Institute's Sponsored Projects Program funds targeted research efforts of immediate need that cut across the interests of one or more Institutes and/or other Federal agencies. Funding in FY 1996 was approximately $1.3 million. These research efforts include the following:

Developing and Implementing High Performance Learning Communities are studies to develop research- and theory-based prototypical strategies to build high performance learning communities; pilot the prototypes in schools; and, on the basis of what is learned, revise and replicate the prototypes in other communities, and report the outcomes. This activity is supported with funds from four OERI Institutes.

Young Children's Synthesis and Profile Project is in collaboration with the National Institute on Child Health and Human Development and the Office of the Assistant Secretary for Planning and Evaluation in the Department of Health and Human Services. A series of federally- and privately-funded initiatives have contributed to the existing knowledge about early development and learning of children and the roles of families and communities in these processes. However, information has not been synthesized across these initiatives, and the past and current initiatives have not been studied in terms of relevance for future programs. This activity will determine what we have learned from past and ongoing initiatives, recommend directions for current activities, and determine future research, practice, and policy directions based on the synthesis. ($347,000 combined funding in FY 1996 and 1997.)

The Effect of Comprehensive Interventions on Young Children's Learning and Development is an interagency evaluation study with the Substance Abuse and Mental Health Services Administration (SAMHSA) in the Department of Health and Human Services. SAMHSA supports eight projects that provide intense, comprehensive health, substance abuse prevention and treatment, and mental health

services to families who are at high risk of having substance abuse and/or mental health problems. The services also include the families' children who range from birth through seven years of age. The collaborative activity will study a selected number of SAMHSA sites to determine if and how the interventions affect the learning and development of the young children served. (Funded at $200,000 for FY 1997.)

The Prevention of Reading Difficulties in Young Children is being conducted by the National Academy of Sciences, with funding from the Early Childhood Institute, the Office of Special Education Programs, and the National Institute on Child Health and Human Development. The activities include a synthesis of the reading research from cognitive science, developmental psychology, special education, general education, and related fields. The comparative effectiveness of existing modes of prevention, program interventions, and instructional techniques used with populations of children at risk for reading difficulties will be determined. The major policy implications of the research will be highlighted as well as future research and practice directions. Materials will be prepared for practitioners and parents. (Funded at $300,000 in FY 1996.)

Ready-to-Learn Television In FY 1995, the Early Childhood Institute, through a directed grant from Congress, made a five-year award to the Corporation for Public Broadcasting to develop, produce, and develop ancillary materials for four children's television shows aimed at children in their early years, particularly children who have limited English proficiency and their parents. *Between the Lions* and *Kinds and How to Grow Them* have a projected premiere of September 1998, while *Dragon Tales* and *Show and Tell Me* will premier in September 1999. Materials for parents will include a web site and 30 to 60 second spots for use on public television addressing themes drawn from the shows. Public television programs are available at no cost to virtually all Americans, and 54 percent of children ages two to five tune into public television on a weekly basis.

In addition to the television programming, the Corporation for Public Broadcasting has established a nationwide network of Ready-to-Learn affiliates. Public television stations in 95 cities have joined in an effort to develop literacy and reading skills in children and families. This goal is being reached via two mechanisms. One is a free book distribution program in collaboration with Scholastic Books. Over 500,000 books have been given to young children who otherwise would not have access to them. The other mechanism is a series of focus groups with families to determine what their needs are concerning reading, television, and parenting skills. A free publication, *For Families*, is available in both English and Spanish to help families become their young children's first and ongoing teachers. (Funded at $7,000,000 per year.)

Early Childhood Research Working Group

The Early Childhood Research Working Group is comprised of about 75 representatives from approximately 30 federal agencies, across nine departments, that have research and data/statistics responsibilities and/or service delivery responsibilities focusing on children from birth through eight years of age and their families. The Working Group meetings are convened by the Early Childhood Institute, and a planning committee made up of 10-12 people from four federal departments sets meeting agendas and arranges for speakers.

The purposes of the Working Group are to: (1) share current information across agencies; (2) provide staff with professional development opportunities; and (3) develop channels for collaborative funding

activities. The Early Childhood Institute provides staff for the Working Group. There is a chairperson from the Department of Health and Human Services who works with the Institute staff and planning committee to plan meeting themes, formats, and potential speakers.

The Working Group has had six meetings since its inception in February 1995. Some of the meeting themes included: (1) Working with Foundations; (2) Crafting an Early Childhood Research Agenda of Use to States and Communities; and (3) Translating Research to Practice and Policy. Average attendance at the meetings is about 50 people.

The Early Childhood Institute publishes an interagency newsletter, *Early Childhood Update*, three times a year. Working Group representatives are asked to contribute articles about current early childhood research, professional development, and/or policy activities. Researchers who have important findings also contribute articles for the newsletter. The Early Childhood Institute gives each member agency about 50 copies of the newsletter to disseminate, and the Institute puts the entire newsletter on its World Wide Web page.

The Early Childhood Research Working Group does not have an official budget. Its activities are staffed entirely by the Early Childhood Institute.

Evaluations and Assessments

The ECI programs and projects will be evaluated according to how well they reach their performance indicator objective of supporting research that stimulates new ideas and new theories to promote equality of opportunity and excellence in education for all learners; exercising leadership in building an R&D agenda that supports and strengthens the national research and development infrastructure; and supporting research products that lead to improvements in American education. Indicators include a cohesive research program; national significance; and contributions to a knowledge base. Evaluations include, but are not limited to, annual internal and external reviews starting in 1998, customer surveys, and internal quality control and review.

2. Planned projects

In FY 1997, the National Institute on Early Childhood Development and Education plans to support the following activities:

The Centers Program will receive an increase of $600,000, to be divided between two activities.

A new *Research and Development Center on Early Reading* will be jointly funded by the Early Childhood Institute ($400,000) and the Achievement Institute ($1.8 million) in OERI. The competition will be held this summer.

The National Center for Early Development and Learning will receive an additional $200,000 in its second year to study the impact of welfare reform on young children's child care situations. A series of research briefs on this topic will be developed for a range of audiences.

The Field-Initiated Studies Program will conduct a new grant competition in FY 1997. Approximately $1.1 million will be awarded to six new early childhood research activities.

Sponsored Research Projects will add three new projects in FY 1997.

A Study of Early Childhood Pedagogy will be conducted by the National Academy of Sciences. This two-year activity will convene leading early childhood researchers and educators to determine what young children should know, when they should know it, and how they can learn best what they need to be prepared for and successful in school. The study will cost $300,000 per year. Support from private foundations will be solicited.

The Study of Health and Mental Health Adjustment of Immigrant Children. The National Institute on Early Childhood Development and Education will contribute between $50,000 and $75,000 to this study which will be conducted by the National Academy of Sciences under the auspices of the National Institute on Child Health and Human Development. The new funds will focus on young children, with an emphasis on the implications that the findings will have for schools.

The Project on Human Development in Chicago Neighborhoods is a nine-year study of children from birth through young adulthood in 80 Chicago neighborhoods. The project, funded by the National Institute of Justice and the MacArthur Foundation, is studying how aggressive behaviors develop in children and what interventions may be successful in reducing those behaviors. The ECI funds will be used to investigate the learning and development of an infant cohort and the effects of child care on the children's school readiness and behavior. The ECI will contribute approximately $200,000 per year for five years.

Conferences

Mathematics, Science, and Technology and Young Children - With the National Science Foundation, the Early Childhood Institute will convene a series of state-of-the-art meetings to discuss what we know and what we need to know about how young children learn mathematics and science concepts. The meetings will bring together early childhood researchers, mathematics, science, and technology researchers, and educators to help the Institute and the National Science Foundation build a research and development agenda. The meetings will shed light on how young children learn math and science concepts, how technology might be used as a motivation to learning, how parents and child care providers can be actively involved in teaching young children math and science, and how we share this information with families and child care providers. This activity is highly relevant to the Administration's priority addressing the need for national fourth grade mathematics tests. Therefore, the Early Childhood Institute, the National Science Foundation, the Office of Elementary and Secondary Education, the Child Care Bureau, and Head Start are planning a collaborative funding activity for FY 1999. It will be based on the recommendations that come from the state-of-the-art conferences.

How Schools and Communities Can Support Families and Young Children's Learning and Development - This meeting will bring together educators, parents, researchers, community leaders, and foundations to help ECI set a research agenda around family-school-community partnerships. Discussions will focus on the role of schools in young children's lives, how communities form effective

partnerships to foster young children's learning before they enter school, and how schools can engage families before their children enter school.

National Forum on Neuroscience Research and Early Learning: Implications for Educational Practice and Public Policy - This meeting will be held in the fall and will be a collaborative endeavor sponsored by the Early Childhood Institute, the Danforth and Dana Foundations, the Parents As Teachers National Center, and Washington University (St. Louis). The meeting will review recent neuroscience research findings and their relationship to the development of language, literacy, and reading in young children. The discussions will focus on the implications these findings have for states and communities as they design early education and child care policies and programs for young children and their families.

Research Synthesis Conference: What the Research Tells Us About Best Practices for Infant-Toddler Care - The National Center for Early Development and Learning at the University of North Carolina at Chapel Hill will sponsor a research synthesis conference to determine which infant and toddler child care practices and policies maximize learning and development. This meeting will be held in September 1997, and invitees will include a mix of leading neuroscience and early childhood researchers and practitioners.

Developmentally Appropriate Practices and Early Brain Development - The Early Childhood Institute will sponsor an invitational conference that will bring together neuroscience, child development, and early childhood researchers, family organization representatives, and practitioners to discuss young children's learning and development. The purpose of the conference will be to develop a document that presents: (1) a summary of some key brain development findings related to young children; (2) a section that will help parents and educators better understand these findings; and (3) examples of developmentally appropriate activities, based on the neuroscience findings, that early educators and parents can use in everyday activities with young children.

B. THE NATIONAL CENTER FOR EDUCATION STATISTICS

The mission of the National Center for Education Statistics (NCES) is to collect, analyze, and report data in the United States and other nations. NCES activities are designed to address high priority education data needs; provide consistent and accurate indicators of education status and trends; and report timely, useful, and high-quality data to the U.S. Department of Education, the Congress, the states, other education policymakers, practitioners, data users, and the general public.

1. Existing projects and programs

<u>The Early Childhood Longitudinal Study (ECLS)</u>.

This longitudinal study will track the growth of children's skills and behaviors beginning with kindergarten children in school year 1998-99 and continuing through grade 5. It will explore how children's growth is related to their experiences at home and school. The study will provide data on children's early development; key transitions during their educational career; children's experience in kindergarten, the primary grades, and elementary grades; and their cognitive growth and progress through elementary school. The design of the ECLS is guided by a framework of child development

that emphasizes the interaction between the child and family, child and school, and family and school. The study is particularly interested in the role that parents and families play in helping children adjust to formal school and move through the elementary grades. It is also interested in understanding how schools prepare for and respond to the diverse backgrounds and experiences of the children and families they serve.

Field testing in Head Start, kindergarten, and first and second grades will be completed in spring of 1997, and data will be collected at the kindergarten level in school year 1998-1999. Data for both the fall and spring collections is scheduled for delivery in spring of 2000. The cost of the study design and instrument development is approximately $1 million.

Report on the Characteristics of Early Care and Education Programs

NCES will release a report later this year that examines the characteristics of the early care and education programs attended by children under age 6. The report answers several questions that have arisen with the increased use of nonparental child care. It uses data from the 1995 National Household Education Survey to answer questions concerning parents' preferences regarding child care settings and how these preferences are related to the types and characteristics of their children's care arrangements. Information is provided separately for infants, toddlers, and preschoolers.

2. Planned projects

The Early Childhood Longitudinal Study-Birth (ECLS-B)

NCES is hoping to launch a longitudinal study of children born in 1999. The birth cohort of the Early Childhood Longitudinal Study (ECLS-B) will select a nationally representative sample of children at or shortly after birth and follow these children for a six year period, or through first grade. The ECLS-B will collect data that will be used by researchers to study a variety of questions relating to children and their families as they move from infancy to school. It will also inform policy regarding the care and education of the Nation's children during the critical years before school. The FY 98 budget request includes $5 million for this new study.

C. THE NATIONAL INSTITUTE ON THE EDUCATION OF AT-RISK STUDENTS

This Institute is mandated to "carry out a coordinated and comprehensive program of research and development" for the improvement of the education of "at-risk students." Such a student is defined by the law as one who "because of limited English proficiency, poverty, race, geographic location, or economic disadvantage, faces a greater risk of low educational achievement or reduced academic expectations."

1. Existing projects and programs

The Center for Research on the Education of Students Placed At-Risk (CRESPAR)

CRESPAR conducts research, development, evaluation, and dissemination needed to transform schooling for students placed at-risk of failure. One of its programs of study is on early education and

development. This program contains a longitudinal study of early and school-aged interventions, including pre-reading skills for 3-4 year old children, and a study of how beliefs and practices related to school readiness affect the transition from home to school. The approximate cost for five years of this program of study is $1.6 million.

The Field Initiated Studies (FIS) program of NIEARS supports two projects on early education:

Long-Term Benefits of Intensive Early Education for Impoverished Children: This study addresses long-term outcomes of the Abecedarian intensive early childhood educational intervention. The intervention extended from early infancy to kindergarten entry. Over one hundred low-income African American mothers and their children are being studied for interactions among individual, family, and community-level influences on child development. Total cost over three years is $ 555,486.

Long-Term Effects of the Chicago Child-Parent Centers: This study examines the effects of an established large-scale early childhood intervention for economically disadvantaged children ages 3 and older on their achievement, attendance, and other outcomes in high school. It will increase understanding of the optimal timing and duration of early childhood intervention programs and the pathways through which the intervention affects high school success. Total cost over three years is $526,503.

D. THE OFFICE OF REFORM ASSISTANCE AND DISSEMINATION

The Office of Reform Assistance and Dissemination (ORAD) was created on September 8, 1994. ORAD supports comprehensive education reform by linking teachers, administrators, parents, policymakers, and the public with the best knowledge from educational research, statistics, and practice to help develop the capacity of schools and school districts to continuously improve through the use of proven knowledge. ORAD provides technical and financial assistance for development; conducts research on models for successful uses of knowledge; provides training for putting in place exemplary and promising education programs; connects schools and teachers with appropriate assistance; and disseminates useful research findings. The Office operates a variety of programs encompassing a broad spectrum of activities, three of which have activities targeted directly toward very young children. They are the Regional Educational Laboratories Program, The Fund for the Improvement of Education, and the Jacob K. Javits Gifted and Talented Grants.

1. Existing projects and programs

The Regional Educational Laboratories carry out applied research and development, dissemination of key information, and special activities. There are ten laboratories funded in ORAD. One of the laboratories, the SouthEastern Regional Vision for Education (SERVE), is designated to concentrate efforts in the area of Early Childhood Education so that it can provide national leadership and act as an expert resource to early childhood educators and caregivers. Activities include: conducting research and development activities that address such problems as the need for improved strategies for engaging families in early childhood education experiences and training their participation in their children's educational progress; convening and sharing information among groups of early childhood practitioners, educators, and service providers; sharing exemplary practices and programs; synthesizing research into readable form for practitioners; co-developing products and services with other

laboratories and centers; disseminating materials and products; collaborating with universities to enhance pre-service education; providing or brokering training and technical assistance; and supporting technology planning for early childhood educators.

The Laboratory Network Program, a network of the ten funded laboratories, has designated early childhood education as one of its areas of concentration. In addition to the laboratories, the National Center for Early Development and Learning is a partner and has participated in the design and implementation of this collaborative effort. A needs assessment has been completed, and four issues of national significance have been identified. They are: quality early care and education; education/training for caregivers and educators; linking of services (includes family involvement and delivery systems); and access, equity, and diversity (equitable access for all children). The Laboratory Network Program produced *Continuity in Early Childhood Education: A Framework for Home, School and Community Linkages*. The *Framework* is designed to support and facilitate continuity of services for children ages birth to 8 and their families. It is intended for use by communities that are attempting to develop comprehensive, integrated services. Also included is a guide for using the document to form these linkages among home, school, and community partners. The LNP is developing common training for use of the Framework. Additionally, the LNP produced *Putting the Pieces Together: Comprehensive School-Linked Strategies for Children and Families*. This publication is a guidebook to help practitioners apply comprehensive school-linked strategies to their own situations. The ideas, issues, and solutions presented in this document are designed to help schools and their partners at various stages of development, implementation, and modification. Topics include: building collaborative partnerships, community assistance, and developing effective strategies.

WestEd (formerly the Far West Laboratory) supports Marin City Families First (MCFF), an early intervention, care and education initiative. It seeks to integrate the education community with other social service agencies, private organizations, community groups, and family members in planning and conducting comprehensive services for at-risk families. A two-pronged intervention that includes direct assistance to families through case-managed family advocates and direct assistance to schools and community agencies to help them adapt their policies and practices is underway in one low-income Bay Area Community. Findings from MCFF are actively communicated through established networks of early childhood agencies and organizations regionally and nationally, training and technical assistance to Early Head Start sites in California, Arizona, and Utah, and electronic networking with Early Head Start leaders nationwide.

Additionally, WestEd developed the Program for Infant and Toddler Caregivers. This program was created in collaboration with the California Department of Education, a team of experts in child development, child care, adult education, and print and video production and national and state advisors to provide a comprehensive training system for caregiver trainers, center-based caregivers, and family child care providers The materials are based on the best knowledge from child development theory, research, and practice, and focus on meeting infants' social, emotional, cognitive, and physical needs while in child care settings.

The Fund for the Improvement of Education (FIE) supports a variety of nationally significant activities to improve the quality of education for all students. Most projects funded have a broad target of elementary and secondary education and related professional development. Two projects have a focus on early childhood education:

Jefferson County's Project Jump Start in Louisville, Kentucky, a preschool approach to reinventing education, is a program which provides a developmentally appropriate preschool education for eligible four-year-olds whose families meet income guidelines for free lunch under the National School Lunch Program; coordinates medical, mental health, and social services to these children and their families; and promotes interagency collaboration among organizations serving these children.

The FIE-sponsored initiative is a research project on the effects of the Jump Start Program on the performance of low-income elementary students on authentic assessments and field research on the capability of the parents of elementary students to make decisions about educational programs that support local school desegregation. The project addresses two issues: the inclusion of low-income, single parents and significant adult male caregivers in selecting schools of choice to support local school desegregation and the lack of knowledge about the performance on authentic assessments of elementary students who have received preschool education. The intent of this project is to show that authentic assessments provide valid information about the impact of early childhood education on the academic achievement of at-risk students.

Evaluation of integration and funding issues for early childhood education. Funds have been transferred to the Office of Special Education and Rehabilitative Services to support this grant to Vanderbilt University. The project aims to accomplish six objectives; identify policies, laws, and practices that prevent inclusion; identify localities that have developed flexible funding mechanisms in order to provide integrated programs for 3-5 year olds; determine if these flexible funding options are or can be used to provide support and services for the preschool and elementary school transition; develop materials to aid communities in replication of successful integration programs; conduct a forum in the Washington, DC area to inform policymakers, families, educators, and administrators of the project's progress, issues, and findings; and develop and widely disseminate research findings, successful strategies, and recommendations for changes in funding practices. These materials will be available in Spanish.

OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

The Office of Special Education and Rehabilitative Services (OSERS) supports programs that assist in educating children with special needs, funds programs for the rehabilitation of youth and adults with disabilities, and supports research to improve the lives of individuals with disabilities.

A. OFFICE OF SPECIAL EDUCATION PROGRAMS (OSEP)

This office has primary responsibility for administering programs and projects relating to early intervention services for children birth through age 2 and the free appropriate public education of all children with disabilities. Programs are authorized under the Individuals with Disabilities Education Act (IDEA).

1. Existing projects and programs

Grants for Infants and Families

This formula grant program assists states in developing and implementing statewide systems of coordinated, comprehensive, multi-disciplinary, interagency programs to make available early intervention services to all children with disabilities, aged birth through 2, and their families. Under the program, states are responsible for ensuring that services are made available to all children birth through two years old with disabilities, including Indian children and their families residing on reservations with Department of the Interior schools. Infants and toddlers with disabilities are defined as children who: (1) are experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: cognitive development, physical development, communication development, social or emotional development, or adaptive development; or (2) have a diagnosed physical or mental condition which has a high probability of resulting in developmental delay. Within statutory limits, "developmental delay" has the meaning given the term by each state. In addition, states have the discretion to provide services to infants and toddlers who are at risk of having substantial developmental delays if appropriate early intervention services are not provided.

Funds allocated under the program can be used: (1) to develop and implement the statewide system described above; (2) to fund direct services that are not otherwise provided by other public or private sources; (3) to expand and improve services that are otherwise available; and (4) to provide a free appropriate public education, in accordance with Part B of the Individuals with Disabilities Education Act (IDEA), to children with disabilities from their third birthday to the beginning of the following school year. To be eligible for a grant, a state must have a statewide system that includes 14 statutory components, a lead agency designated with the responsibility for the coordination and administration of funds, and a State Interagency Coordinating Council to advise and assist the lead agency.

Funding levels for the past 3 fiscal years were as follows:

	($ in 000s)
1995	315,632
1996	315,754
1997	315,754

Number of children served. Under Part H systems, states served 143,392 infants and toddlers with disabilities in 1993 and 150,783 in 1994, an increase of 5.2 percent. In 1995, the number of children reported was 165,253, an increase of 9.6 percent, and in 1996, the number rose to 174,288, an increase of 5.5 percent.

Assessment and Evaluation Activities

Measures of performance: Strategic objectives and performance indicators. In accordance with the Government Performance and Results Act of 1993, the Department is in the process of developing appropriate strategic objectives and performance indicators that could be used to measure the effectiveness of the Grants for Infants and Families program. The Department has identified two broad goals related to this program: (1) outcomes for infants and toddlers with, or at risk of, developmental disabilities and their families are enhanced; and (2) states provide comprehensive systems of early

intervention services for infants and toddlers with disabilities and their families. We are considering a number of potential performance indicators related to areas such as consumer satisfaction, transition, reduction in institutional placements, numbers of children served in natural settings, number of infants and toddlers served, percent of children served, number of at-risk children served, reductions in compliance issues, and increasing state use of all appropriate sources of funding for services to these children.

The Institute on Service Patterns and Utilization is evaluating early intervention programs serving children aged birth through 2. A major finding of that research is that the mean age at referral under Part H was 10 months and average age at program entry was 12 months. Previously collected data indicated that the average age of children at referral was 18 months. These data indicate that children are being identified at a much earlier age than during the early implementation stage of the Part H program. The Institute also found that the average amount of direct service time a child/family received each week was 1.7 hours. Approximately 34 percent of the services were provided in community based settings (e.g., child care sites, family centers, churches, or other service agencies). Service utilization was very high, with 69 percent of services being provided as scheduled. Maternal evaluations revealed uniformly high satisfaction ratings that did not vary significantly by study state, child characteristics, or maternal characteristics. However, mothers expressed continuing concern that service coordination still needs to be improved to help them better navigate through the myriad of program options available.

The Early Intervention Research Institute is looking at the long-term effects of alternative early intervention approaches for serving preschool children with disabilities and their families. In 1996, the Institute completed work on longitudinal follow-up data for nine different intervention studies begun in 1986. In each of the studies, children were randomly assigned to one of two groups in which the type of intervention varied along dimensions of intensity, age at start, or type of intervention provided. Children with a wide range of disabling conditions are included in the studies. Data on a range of variables, such as type and amount of other intervention services accessed by the family, were collected. For example, the Parent Involvement Study examined the immediate and long-term effects of adding a parent involvement program to a center-based early intervention program. All children participating in the study continued to receive the early intervention and special education services they otherwise would have received. However, the parents who participated in the parent involvement program were given a 15-week class where they were taught to provide therapeutic intervention services to the children, taught how to be more effective partners in the intervention process, and given the opportunity to form support networks with each other and discuss concerns. They and their children were then tracked for an 8-year period.

Children who had parents that participated in the class consistently had higher scores on measures of child development throughout the study. Teachers also perceived the children of parents attending the classes as displaying fewer problem behaviors and more socially appropriate behaviors. The parents of the children in the more intensive intervention group reported that the children were more independent during the course of the study. However, the children in the less intensive intervention showed better interpersonal skills for most of the years following the intervention. Children with more severe disabilities generally benefited more from the intervention than children with less severe disabilities. The children of parents who had taken the course of study also showed increased gains in motor development, which translated into a higher self-concept as the children aged. These findings were persistent throughout the 8 years of the study.

The Early Intervention Research Institute also conducted an analysis of two groups of randomly assigned children with disabilities, one in a typical early intervention program and the other in a group that received high intensity, expanded services. The study found that increasing services beyond a set point did not produce significant difference in results. While both groups of children benefited from the interventions, the children in the expanded services group did not score higher on measures of child development or school readiness than those children receiving the basic services.

New Research Institutes. In addition to the ongoing research institutes, three new institutes were funded in fiscal year 1997 in the following areas: program performance measures, culturally and linguistically appropriate services, and increasing children's learning opportunities through families and communities.

> The Institute on Program Performance Measures will engage in a 5-year cycle of research to produce a comprehensive program performance measurement system for early intervention, preschool, and primary-grade programs serving children with disabilities from birth through 8 years of age and their families. The Institute will produce growth and development measures for child and family results that can be used with individual children as well as groups of children, including early intervention programs, classrooms, schools, districts, or states. The system will include general results for each age group and specific outcome measures for subgroups such as children with sensory impairments or families living in poverty.
>
> The Institute on Culturally and Linguistically Appropriate Services for Early Childhood will be collecting, cataloguing, and evaluating early childhood materials that were developed for families with culturally or linguistically diverse backgrounds.
>
> The Institute on Increasing Children's Learning Opportunities through Families and Communities will identify, develop, and evaluate strategies and approaches for using home and community settings as learning contexts for promoting and enhancing the development of young children with or at risk for disabilities.

Longitudinal study of the Impact of Early Intervention Services on Infants and Toddlers with Disabilities. SRI International is conducting a five-year longitudinal study of the impact Grants to Infants and Families have on families and service providers. The major goals of the evaluation are to: (1) compare and evaluate different patterns of child development related to long-term outcomes for children and their families; (2) assess the effects of socioeconomic, demographic, and health-related variables on long-term developmental and behavioral characteristics of the children; (3) isolate and explain the long-term effects of intervention on children and their families; (4) incorporate factors related to medical variables (e.g., psychological, physiological, and anatomical structure or function), personal functioning variables, and the interaction of the environment with these variables that could result in a limitation or prevention in the fulfillment of an age-appropriate role; (5) incorporate family variables, including family background and the need for service; and (6) provide information on services, service-providers, and the appropriateness of particular service settings. The initial data collection for this study began in 1996.

Preschool Grants

The Preschool Grants program provides grants to States, the District of Columbia, Puerto Rico, and the Outlying Areas on the basis of their proportionate share of the total number of children with disabilities

in the 3-through-5-year-old age range who are counted for allocations under the Grants to States program. These funds are provided in addition to funds received under the Grants to States program in order to provide an incentive to states to make a free appropriate public education (FAPE) available to all children with disabilities in the 3 through 5 age range and to ensure that a minimum level of funding is targeted toward serving children in this age range. The statute limits the Preschool Grants share for each child served to a maximum of $1,500. In order to be eligible for these grants, states must serve all children with disabilities aged 3 through 5, have an approved state plan under Part B of the Individuals with Disabilities Education Act (IDEA), and an approved application. A state that does not make FAPE available to all 3-through-5-year-olds with disabilities cannot receive funds under this program or funds attributable to this age range under the Grants to States program and is not eligible for grants under various IDEA discretionary programs for activities pertaining solely to 3-through-5-year-olds. Currently, all states are making FAPE available to all 3-through-5-year-olds with disabilities.

At their discretion, states include preschool-aged children who are experiencing developmental delays, as defined by the state and as measured by appropriate diagnostic instruments and procedures, who need special education and related services. States, at their discretion, and local educational agencies, if consistent with state policy, may also use funds received under this program to provide a free appropriate public education (FAPE) to 2-year-olds with disabilities who will turn 3 during the school year. However, 2-year-olds who are served under the program cannot be counted for allocations.

Funding levels for the past 3 fiscal years were as follows:

	($ in 000s)
1995	360,265
1996	360,409
1997	360,409

Increase in population served. Between fiscal year 1991 and 1996, the number of children served under this program increased from 367,428 to 549,154, a 49.5 percent increase. One of the major factors accounting for this increase was the statutory requirement for states to make FAPE available to all children aged 3 through 5 as a condition for participation in the Preschool Grants program or receiving funding attributable to children aged 3 through 5 from any other IDEA program. This requirement became effective in 1991. While large increases continued beyond what was initially anticipated, the rate of increase has been on the decline. For 1994, the increase in the child count was 37,616 or 8.5 percent. For 1995, the count increased by 32,250 children or 6.7 percent, not including an additional 12,072 children attributed to the merger of the Chapter 1 Handicapped program with IDEA. For 1996, the count increased by 26,727 children or 5.12 percent. The Department predicts that the Preschool child count will continue to increase in 1997 and 1998, though at somewhat lower rates -- 5 percent in 1997 and 4 percent in 1998. Our predictions are based on the downward trend in the rate of Preschool Grant program child count increases. We believe the downward trend reflects a stabilization in the growth of the count following implementation in 1991 of the statutory requirement for states to make FAPE available to all children aged 3 through 5 as a condition of funding for this age range under IDEA, and decreases in the rate of growth in the general population in this age range projected by the Bureau of the Census.

National Profile of the Preschool Grants program. The National Early Childhood Technical Assistance System (NEC*TAS) annually assembles information from the state preschool program coordinators to develop a national profile of the Preschool Grants program. Information is collected from the 50 States, District of Columbia, Puerto Rico, and 7 territories. In 1996, 46 of the 59 state educational agencies reported that they maintain different policies and procedures for their preschool programs than for programs serving children with disabilities age 6 through 21. These policies and procedures were in areas such as personnel standards, assessment/evaluation policies, and program standards. For example, in the personnel area, 34 states have special certification/licensure requirements for preschool special education. State educational agencies reported using their 20 percent set-aside funds for a broad range of purposes, all of which were intended to support the statewide infrastructure for serving these children and their families. In other areas, 44 of the 46 agencies responding used part of their set-aside funds to provide specialized training for preschool personnel; 40 for technical assistance activities; 38 for specialized materials; 35 for planning and coordination activities; 28 to support pilot programs; and 24 to provide direct services. In addition, 40 states have implemented a technical assistance system or program for preschool service providers.

Forty-six states used Preschool Grant funds to support collaborative activities with State Part H programs and other early childhood initiatives. In 15 States, the focus of the interagency coordinating councils has been expanded to include children aged birth through 5. All states reported participating in coordination activities in some combination with other state agencies and programs in conducting child find, public awareness, and/or training activities. For example, 43 states have interagency agreements between special education and Head Start that define fiscal responsibility; collaborative activities related to child find, assessment and evaluation of children, referral, and training; and agency responsibility for services to children with disabilities. In addition, 32 state educational agencies are collaborating in Child Care Block Grant activities and 24 with the Even Start program. Thirty-nine states offer special consideration for children with disabilities in the Child Care Development Block Grant. Most states also report that they have developed or are developing policies and/or transition agreements concerning the transition of children from Part H to preschool. Twenty-five states have developed or are developing policies regarding use of funds for children aged 2 who will reach age 3 during the school year. Thirty-seven states endorse a specific philosophy promoting inclusion.

Studies on the implementation and effectiveness of early intervention services. The Department is funding several projects to study issues related to serving children with disabilities aged 3 through 5.

The Early Childhood Research Institute on Inclusion is identifying barriers to inclusion and designing techniques and strategies for overcoming those barriers. The Institute has identified 10 policy issues that either facilitate or impede the inclusion of preschool children with disabilities in regular school programs, depending upon the interpretations and actions of school administrators, educators, and family members. For example, federal and state laws often rely on categorical definitions to identify which children are entitled to services. These categorical programs and definitions are difficult to implement for program and school administrators who must oversee multiple programs with different regulations and reporting guidelines. Since publicly supported preschool programs are not universally available to young children in the United States, school district administrators must create inclusive preschool programs by combining discrete programs and funding sources. As such, inclusive preschool programs are frequently implemented in tandem with other programs such as Head Start, Chapter 1, and community child care, resulting in multiple program placements and transitions for young children and

conflicting educational models and philosophies for families and educators. The Research Institute on Inclusion also is conducting a study of the cost of inclusion that it hopes to complete in fiscal year 1998.

Another area of concern relates to problems encountered when infants and toddlers with disabilities make the transition to preschool programs. The Early Intervention Research Institute at Utah State University is doing a study of transition perceptions of service providers that includes a survey of the transition perceptions of parents using those providers. One purpose is to see how well they match and to determine areas of disagreement. This project will provide helpful information for use in determining future research and technical assistance priorities.

NCES longitudinal study of the progress of preschool children. The National Center for Education Statistics (NCES) is conducting a major longitudinal study of the progress of preschool children, which began in fiscal year 1996. The Department is using funds under IDEA to augment funding for the "Early Childhood Longitudinal Study: Kindergarten Cohort" being conducted by the NCES in order to develop and adapt instruments to address issues related to preschool children with disabilities. This 5-year study will include a sample of approximately 25,000 children aged 3 through 5, including about 600 children with disabilities participating in Head Start. The Department is also adding funding to the study to oversample children in kindergarten with visual impairments, hearing impairments, mental retardation, and physical disabilities (orthopedic and other health impairments) because of a concern that insufficient numbers of children with these low incidence disabilities will be sampled to provide reliable information on the needs and progress of these children.

We anticipate that the study will provide information on results for children with disabilities aged 3 through 5 receiving preschool services. The children with disabilities will be receiving the same tests as children without disabilities, adapted as necessary to accommodate the student's disability. The study will include a large cohort of non-disabled children for comparison purposes. This will allow us to compare the success of children with disabilities with otherwise similar children. Since the children will continue to be tracked over a period of several years, we will be able to evaluate changes in key indicators over time. In addition, the study will provide substantial information on demographics and family characteristics related to these children. NCES has also agreed to add a questionnaire for special education teachers focusing on needs of students with disabilities. The contractor developed the instruments and data collection plan in 1996 and plans to field test the instruments related to special education in the spring of 1997. Current plans call for implementation of the first full data collection in fiscal year 1999.

Discretionary Projects Funded by the Office of Special Education Programs

The Office of Special Education and Rehabilitative Services (OSERS) in the U.S. Department of Education administers a variety of programs related to improving the quality and quantity of services to young children with special needs and their families. Early childhood discretionary projects are administered by the Office of Special Education Programs within OSERS. These projects are funded through a variety of Special Purpose Funds programs under the Special Education account. Projects funded through the Early Education Program for Children with Disabilities (EEPCD) include demonstration projects, inservice training projects, outreach projects, research institutes, technical assistance, and other activities. Additional research and related activities are supported under the Research in the Education of Individuals with Disabilities Program. Additional personnel preparation activities are supported under the Training Personnel for the Education of Individuals with Disabilities

program. Evaluations such as the Part H Longitudinal Study mentioned under the Grants for Infants and Families section, and the Early Childhood Longitudinal Study mentioned under the Preschool Grants sections are supported by the Special Studies Program.

Fiscal year 1997 funding for the EEPCD is $25.1 million. These funds will support 109 projects, including 35 demonstration projects, 18 inservice training projects, 49 outreach projects, 6 research institutes, and 1 national technical assistance center.

Demonstration Projects. Model demonstration projects address a range of topics, including developmentally appropriate practices; increasing and improving child care options for children with disabilities; early intervention services for very young children with autism; assistive and interactive technologies; inclusion of children with disabilities in community settings; building language and literacy skills during early childhood; family-centered care in newborn intensive care units; and culturally diverse children with disabilities in general education settings. Awards are made to private, nonprofit agencies and organizations; local schools; universities; and state education agencies. These are funded at $5.8 million in FY 1997.

Inservice Training Projects. Projects in this priority area are developing and evaluating inservice training models that will prepare professionals and paraprofessionals to provide, coordinate, or enhance early intervention, special education, and related services for infants and toddlers with disabilities and/or for preschool children with disabilities. Funding for FY 1997 is $1.2 million.

Outreach Projects. The outreach component has two goals: (1) to promote and increase high-quality services to preschool children with disabilities, birth through age 8, and their families; and (2) to stimulate replication of innovative models, many of which were developed and refined during EEPCD demonstration project funding. Outreach projects engage in awareness activities; stimulation of model replication sites; training of professionals, paraprofessionals, and parents; promotion of state involvement; product development and dissemination; and consultative activities. Outreach efforts have contributed significantly to disseminating effective programs for young children, to providing improved training and services, and to building continuity and interagency/interstate collaborations. Some projects have incorporated the use of new technologies, such as video- or computer-based instruction, while others have emphasized specific disability areas, such as sensory impairments or learning disabilities. Several projects have served as resources to state education agencies and other state agencies in their efforts to expand or improve services for infants and preschool children. Funding for FY 1997 is $7.5 million.

Research Institutes. During 1997, six research institutes are being funded. These institutes address barriers to the inclusion of preschool-age children with disabilities in classroom and community settings; influences on service patterns and utilization in early intervention and preschool programs; the adoption of successful early intervention practices in children's early elementary education in order to improve the education of children with disabilities; increasing learning opportunities for children through families; providing services to young children with disabilities that are culturally and linguistically appropriate; and measuring growth and development. Funding for FY 1997 is $4.3 million.

Technical Assistance Center. The National Early Childhood Technical Assistance System (NEC*TAS) brings together individuals and organizations which represent diverse disciplines and parent perspectives to address the needs of infants, toddlers, and preschoolers with disabilities and their families. Funding

for FY 1997 is $4 million. NEC*TAS' technical assistance is an ongoing, systematic, and nonevaluative process that uses a variety of support strategies to help clients accomplish targeted goals. NEC*TAS is committed to seven goals:

-- To assist states in accomplishing their goals and activities for providing services to infants, toddlers, and preschoolers with disabilities;
-- To assist OSEP-sponsored early childhood discretionary projects in accomplishing their goals and activities for demonstration, inservice, and outreach programs;
-- To identify emerging early intervention and preschool service system issues and potential solutions;
-- To share across client groups the solutions and successful strategies and practices developed by one another;
-- To promote the utilization of state-of-the-art research and practice;
-- To promote collaboration across federal agencies and programs, states, and other organizations and programs that impact client programs; and
-- To contribute to the understanding and provision of efficient, effective, and high-quality technical assistance.

NEC*TAS' technical assistance is an ongoing, systematic, and nonevaluative process that uses a variety of support strategies to help clients accomplish targeted goals. The specific approach designed by NEC*TAS addresses the unique needs of each state and jurisdiction, as well as states' collective needs. NEC*TAS has conducted needs assessments and planning meetings for the 50 states, the District of Columbia, the Bureau of Indian Affairs, and eight other jurisdictions (American Somoa, Federated States of Micronesia, Guam, the Northern Mariana Islands, Palau, Puerto Rico, the Republic of the Marshall Islands, and the Virgin Islands). Topical areas for technical assistance include finance, interagency issues, procedural safeguards, personnel, data collection, monitoring, child identification (including eligibility), guidelines to services for specific populations such as children with autism, and service delivery in rural and in urban communities. Program evaluation, model development, dissemination, project management and multi-cultural and health issues are also addressed. Services available to states and jurisdictions and EEPCD projects include annual meetings, needs assessments, individualized technical assistance and consultations, topical meetings and workshops, topical teleconferences, telephone consultation, information published through print and electronic media, information and referral, and networking with other professionals and organizations. NEC*TAS also provides limited services, including resource referral; selected publications in print and electronic formats; news and information through electronic bulletin boards on Education Administration ONLine and GTE EdLink to other technical assistance organizations, resource centers, policy groups, associations of service providers, advocacy groups, and parent groups involved in developing comprehensive services for young children with special needs and their families.

Research in Education of Individuals with Disabilities Program. For many years, individual research projects related to young children with disabilities have been supported in OSEP through the Research in Education of Individuals with Disabilities Program, through the Field-Initiated Research competition, the Student-Initiated Research competition, and other special competitions. The purpose of the program is to support research and related activities designed to increase knowledge and understanding of disabling conditions and of teaching, learning, and education-related developmental practices and services for infants, toddlers, preschoolers, children, and youth with disabilities. Among the projects funded during FY 1997, 66 focus on early childhood issues, totaling $6.1 million. These include 30 field-initiated research projects; 12 student-initiated research grants; 6 initial career award projects; 5 projects on

advancing and improving the research knowledge base; 4 technology in education projects; 2 projects on preventing the development of serious emotional disturbance among children and youth with emotional and behavioral problems; 2 special studies program grant projects; 2 state agency/federal evaluation studies grants; 1 project on the prevention of reading difficulties in young children; 1 project on research on general education, teacher, planning, and adaptation for students with disabilities; and 1 project on school-linked services to support better outcomes for children with disabilities.

Training Personnel for the Education of Individuals with Disabilities. The Training Personnel for the Education of Individuals with Disabilities program supports projects to improve the quality and increase the quantity of personnel providing early intervention, special education, and related services to children with disabilities. Awards are made to colleges, universities, state and local agencies, and nonprofit organizations. Projects prepare personnel to work in programs characterized by strong interaction of the medical, educational, and related service communities, and by involvement of the primary caregivers for these children. In almost all of these projects, multiple departments within universities collaborate in the program, and, in several cases, the training institutions cooperate with medical facilities, local education or health agencies, or state education agencies. Three hundred projects totaling $30.5 million in FY 1997 address various aspects of the preparation of early intervention and early childhood personnel. These include 109 projects that prepare personnel to serve infants and toddlers, 76 parent training and information centers, 33 projects to prepare special educators, 19 projects to prepare leadership personnel, 19 projects to prepare related services personnel, 19 special projects, 14 projects in minority institutions, 9 related to low-incidence conditions, one that addresses rural special education, and one in a state education agency. Most of these projects provide training leading to a master's or doctoral degree, although some provide training at the undergraduate or associate degree level; many provide training at the paraprofessional level and may lead to certification. While some programs are discipline specific or disability specific, most are interdisciplinary, have a strong family focus, and emphasize field experience.

The Federal Interagency Coordinating Council (FICC)

The Federal Interagency Coordinating Council (FICC) was established as a part of the 1991 reauthorization of the IDEA to improve the coordination of community based services for young children with disabilities and their families. The FICC serves as the mechanism for federal agencies with common programmatic goals to facilitate coordination of resources and to model interagency coordination at the federal level. The mission for the FICC is to work toward minimizing duplication, identifying gaps in programs and services, ensuring provision of early intervention and preschool services, ensuring coordination for technical assistance activities across agencies, and eliminating real or perceived barriers to cross-agency coordination of services. The FICC includes members from the Departments of Education; Health and Human Services; Agriculture; Defense; and Interior. In addition, the Council includes parents of young children with disabilities as well as state and local administrators of early intervention and preschool services for young children with disabilities. The Council reports to the Secretary of Education, and is administered through the Office of Special Education and Rehabilitative Services.

2. Planned projects

Grants for Infants and Families

The Department has requested $323,964,000 for this program for FY 1998, an increase of $8.2 million over the prior year. The Department expects that the number of children served under this program will continue to increase. Higher rates of survival for low birth weight infants, and children born with drug addiction, fetal alcohol syndrome, and HIV infection are partially responsible for the higher numbers. In addition to environmental reasons related to increased incidence, we anticipate that the counts will increase as states continue to improve their reporting procedures. For example, some states still do not have comprehensive reporting systems and providers do not always understand that all eligible children being served are to be reported, even if they are not served with direct service dollars from this program.

Preschool Grants

The Department is requesting $374.8 million for the Preschool Grants program, $14.4 million or 4 percent more than the 1997 appropriation level. Funding under the Preschool Grants program supplements funds provided to states under the Grants to States program for children with disabilities aged 3 through 21. However, funds provided under this program are the only funds targeted toward and required to be used to serve children with disabilities aged 3 through 5.

The budget request reflects a continued commitment to help ensure that young children with disabilities are ready to enter first grade on an equal footing with their peers without disabilities. The Preschool Grants program helps States provide special education and related services to meet the educational needs of children aged 3 through 5 with disabilities. The program provides the leadership and resources needed to ensure that high quality programs providing age appropriate services are maintained, students experience a smooth transition between preschool and regular school, and students are served in community-based settings.

Discretionary projects funded by the Office of Special Education Programs

All special education discretionary programs are authorized under the Individuals with Disabilities Education Act. The authorizations for these programs have expired. The Administration is currently working with the Congress to develop authorizations to support early childhood and other activities through a number of Program Support and Improvement programs. The currently funded programs evolved separately over the last 30 years to address special needs in particular areas, and include a wide range of research, demonstration, outreach, technical assistance, dissemination, training and other activities. The new Program Support and Improvement programs would consolidate these 14 discretionary programs into 5 coordinated programs that would provide a streamlined and coherent structure to carry out these kinds of activities, and to focus them on systematically helping States improve educational results for children with disabilities. The total request for these new programs is $262 million, $10 million more than the amount appropriated in 1997 for Special Purpose Funds Programs.

The Federal Interagency Coordinating Council (FICC)

In order to expand the capability of the Council to address its interagency mission, the Department is proposing in the IDEA reauthorization that it be authorized to use approximately $162,000 of the funds provided for the Infants and Families program in fiscal year 1998 for the administration of the FICC, which is currently supported under the Department's salaries and expenses account. Additional funding could go toward supporting interagency initiatives and projects that focus on strengthening the underpinnings of community-based systems for young children with disabilities -- such as the Communities Can Initiative, funded through HHS, that addresses integrated services through a community network model.

B. NATIONAL INSTITUTE ON DISABILITY AND REHABILITATION RESEARCH (NIDRR)

The Institute provides leadership and support for a comprehensive program of research related to the rehabilitation of individuals with disabilities. NIDRR annually targets approximately $1.6 million for research directed to children with disabilities. NIDRR also administers the Technology Related Assistance for Individuals with Disabilities Act which assists states in ensuring assistive technology is available to individuals with disabilities of all ages. NIDRR supports applied research to establish new theory, to develop practical products, to provide for an improved understanding of disability, and to achieve better rehabilitation and independent living outcomes so that individuals with disabilities of all ages may have more productive lives. NIDRR strives to create meaningful partnerships between scientists and consumers.

1. Existing projects and programs

The Educational Mainstreaming of Children and Young Adults with Neuromuscular Disease -- This study is being conducted at the Rehabilitation Research and Training Center for Neuromuscular Diseases at the University of California, Davis. The purpose of this study is to provide information, resources, and skills to regular classroom teachers that will enable children with NMD to vigorously pursue their own development, especially their educational and vocational interests. The study notes that education for children with chronic neuromuscular illness occurred exclusively in hospitals or home until very recently. The Davis investigators note: "the inclusion of a chronically ill child in the classroom can become the focus for development of both formal and informal curriculum abut body functioning, health, illness, the responsibility for participation in self-care, and how to interact socially with others who are different."

Rehabilitation Research and Training Center (RRTC) in Rehabilitation and Childhood Trauma at the Department of Physical Medicine and Rehabilitation, Tufts University, Boston, Massachusetts, has publicized ways for families of children with special health care needs to become effective advocates for their children. For example, the RRTC produced a brief information sheet titled "When Your Child Goes Home After Being Examined for Head Injury in an Emergency Department." This document is written in easy-to-understand language for parents and it includes information on the possible long-term effects of mild head injury in children.

Rehabilitation Engineering Research Center on Technology for Children with Orthopedic Disabilities at Rancho Los Amigos Medical Center, Downey, California, has developed an

"Augmentative and Alternative Communication Training Manual for Instructional Assistants" sponsored by NIDRR to address children with special health care needs. The manual provides specialists who work with children in educational settings guidelines for teaching the use of AAC strategies and techniques in the classroom. Additional work at Rancho is addressing cognitive readiness for powered wheelchair mobility. The final results of this project are expected to have applications in the timely identification and prescription of functional powered mobility for children who would benefit at a very young age.

Additional projects

University of Kansas--Vision Screeners for Infants, Toddlers and Preschoolers

Children's Hospital/Harvard University--Severe Intrauterine Growth Retardation: Rehabilitation Intervention in the Neonatal Intensive Care Unit

University of North Carolina/Chapel Hill/F.P. Graham Center--Development of Communication Skills in Male Preschoolers with Fragile X Syndrome

University of Oregon--Study of Psychometric Properties of the Assessment, Evaluation, and Programming Test for Children Three to Six Years

Utah State University/Early Intervention Research Institute--Examination of Resiliency and Risk in Young Children

University of Virginia School of Medicine--Informed Use of Prescription Drugs for Attention Deficit Hyperactivity Disorder

University of Minnesota Center for Children with Chronic Illness and Disability

Through the Looking Glass Research and Training Center on Families of Adults with Disabilities--Study of Pregnancy, Birth and Early Post-Partum Among Women with Disabilities

2. **Planned projects**

Interagency Committee on Disability Research (ICDR) NIDRR coordinates research on disability through the Interagency Committee on Disability Research. Research needs of children with disabilities are planned by NIDRR in conjunction with the Administration on Children, Youth and Families, the Maternal and Child Health Program, the National Institutes of Health of the Department of Health and Human Services and the Office of Special Education Programs in the Department of Education.

Field Initiated Research NIDRR sponsors work through Field-Initiated Research projects and directed research such as Research and Training Centers and Rehabilitation Engineering Research Centers. NIDRR will continue to support projects and activities under all of its programs that target children with disability-related needs in the earliest years of life.

THE OFFICE OF ELEMENTARY AND SECONDARY EDUCATION

The mission of the Office of Elementary and Secondary Education is to promote academic excellence, enhance educational opportunities and equity for all of America's children and families, and improve the quality of teaching and learning by providing leadership, technical assistance and financial support.

1. Existing projects and programs

Title I, Part A

Title I, Part A, currently funded at $6.7+ billion, is designed to help disadvantaged children meet challenging content and student performance standards. Part A of Title I provides financial assistance through state educational agencies (SEAs) to local educational agencies (LEAs) to meet the educational needs of children who are failing or most at-risk of failing to meet a state's challenging content and student performance standards in areas with high concentrations of children from low-income families.

In addition to serving elementary through high school students, Title I also serves preschool children. From the Title I performance report from the 1994-95 school year (most recent data), of the total population served under Title I, Part A (6,671,821), 40 percent of Title I participants were in grades 1-3 (2,679,407), 8 percent in kindergarten (547,481), and 2 percent in prekindergarten (139,667).

Title I funds may be used to serve eligible preschool children at any age. To be eligible, preschool children -- like school-aged children -- must be failing, or most at risk of failing, to meet the state's challenging student performance standards. Preschool children must be selected for Part A services solely on the basis of such criteria as teacher judgement, interviews with parents, and developmentally appropriate measures such as developmental check lists. Children who participated in a Head Start or Even Start program at any time in the two preceding years are automatically eligible for Part A services.

Even Start

This program funds family-centered education projects to help parents become full partners in the education of their children, assists children in reaching their full potential as learners, and provides literacy training for parents. Eligible participants are parents (who are eligible for participation in an adult basic education program under the Adult Education Act or who are within the state's compulsory school attendance age range) and their children, ages birth through seven. At least one parent and child from each family must participate together in the Even Start program. These are state formula grants from which local education agencies are subgrantees.

Legislative authority -- Even Start Family Literacy Program, Part B of Title I of the Elementary and Secondary Education Act of 1965 (ESEA), as amended by the Improving America's Schools Act of 1994 (IASA), Public Law 103-382.

The purpose of Even Start is to help break the cycle of poverty and illiteracy by improving the educational opportunities of the nation's low-income families. The program supports projects that

integrate early childhood education, adult literacy (or adult basic education or English as a second language (ESL)), and parenting education in a unified family literacy program. Even Start's design is based on the premise that the three core components build on one another and that families need to receive all three services for lasting change. The intergenerational approach and the integrated family education focus make Even Start unique among federal education programs in addressing the needs of disadvantaged families.

Under the Even Start program, the Department provides federal financial assistance to state educational agencies which in turn make competitive grants to partnerships of local educational agencies and other organizations. In addition, 5 percent of the annual appropriation is set aside for the outlying areas, Indian Tribes, and projects for migrant children. One grant for an Even Start project in a women's prison is also required to be funded from the set-aside. Up to 3 percent is reserved for evaluation and technical assistance. Also, in any year when the appropriation is larger than the previous year's, the statute also authorizes a reservation of up to $1 million for competitive grants to states for statewide family literacy initiatives. All projects are designed to help parents gain the literacy and parenting skills they need to become full partners in the education of their young children, ages birth through seven, and to assist those children in reaching their full potential as learners. Even Start projects build on existing community resources.

Even Start assists children and adults from low-income families to achieve challenging state content standards and challenging state student performance standards. It also supports education reform by addressing four of the eight National Education Goals.

In 1996-97, the $102 million appropriation will support approximately 635 projects throughout the United States, Puerto Rico, and the District of Columbia.

Evaluation - The national evaluation 1994-95 interim report shows that, of the 513 local projects reporting:

Poverty is characteristic of Even Start participants. In 1994-95, 84 percent of Even Start families had annual incomes below $15,000, and 40 percent of families had incomes below $6,000. Approximately 47 percent of Even Start families rely on government assistance as their primary source of income.

Hispanics, 22 percent of all Even Start parents in 1989-90, now represent the largest group being served -- 36 percent in 1994-95.

The percentage of primarily Spanish-speaking parents has risen from 15 percent in 1989-90 to 29 percent in 1994-95. As of 1994-95, 37 percent of Even Start parents did not speak English at home.

In 1994-95, Even Start parents participated in adult education for an annual average of 100 hours per parents.

In 1994-95, parents participated in parenting education for an annual average of 32 hours of instruction.

In 1994-95, 96 percent of the children enrolled in Even Start participated in some form of early childhood education, and 52 percent participated for 7 to 12 months.

Approximately 70 percent of families continued participation or had successfully completed the program at the end of the school year.

In the 57 sample study projects on developmental outcomes:

In 1994-95, Even Start children made significant gains on measures of school readiness and language development.

The total number of early childhood education hours that children received was positively related to gains on these measures.

The gains for adults on measures of adult literacy skills are comparable to those seen in the first Even Start four-year evaluation and in other adult education programs.

Approximately 8 percent of adults in the Universe Study and 24 percent of adults in the Sample Study attained a General Education Development (GED) certificate while participating in Even Start.

Parents made moderate gains on a measure of the quality of cognitive stimulation and emotional support they provide to their children.

2. Planned projects

<u>Title I</u>

Dissemination and training activities, to include:

Joint training across the United States on using the transition models developed by Head Start in order to ensure better continuity of disadvantaged families between Head Start and school (e.g. Title I, IASA allows Head Start and Even Start children to be automatically served by Title I).;

Produce a publication and extensive outreach campaign to ensure that all 54,000 Title I schools are aware of the flexibility and opportunity to serve preschool age children;

Promote the use of comprehensive services for family literacy with a focus on grades K-3 through publications, guidance, and dissemination of effective models; and

Prepare and disseminate publications on best practices in early childhood education and reading readiness in Title I throughout the country.

THE AMERICA READS CHALLENGE

The proposed America Reads Challenge would target the earliest years of life in an effort to respond to the critical need for our children to read well and independently by the end of third grade. Currently, 40% of our nation's children are reading below the basic level on national reading assessments. Children who cannot read early and read well are hampered at the very start of their education -- and for the rest of their lives. Development of children's skills necessary for learning to read in their first days and years is a Departmental priority.

Parents as First Teachers Grants

These proposed grants would provide at least $300 million over 5 years ($60 million a year in FY 1998-FY 2002) to support effective, programs that provide appropriate support, training, and education material to involve and assist parents to help their children learn to read. There would be two types of grant recipients for these grants: national and regional networks, and replication of local programs.

National and regional networks would share information on helping children read and support parents' efforts to help their children become successful readers. Groups like the National PTA, the National Urban League, the American Library Association, and ASPIRA are already working to support such efforts and they have the capacity to develop national and regional networks to further share valuable information on helping children read. Grants would be provided to groups like these that have a proven track record of working with parents of young children; can demonstrate the likelihood of substantial regional or national impact; show the cost-effectiveness of their proposal; and coordinate with the private sector and state and local programs that also provide support for parents. In addition, efforts such as developing the best research about how children learn, developing high quality reading materials for young readers, and underwriting public television programs that help young children learn to read would be supported.

Replication of successful local parents as first teachers efforts There are many local efforts across the nation that have shown success in helping even the most educationally-disadvantaged parents become good teachers to their children, so that parents can help their children attain good language skills in preparation for being good readers and learners. Recipients of this grant could be states, localities, communities, groups, or non-profits that have a comprehensive strategy to expand or replicate successful programs -- such as Home Instruction Programs for Preschool Youngsters (HIPPY) and Parents as Teachers (PAT).

Grants would be provided to applicants who have a proven track record of working with parents on improving their children's reading or that plan to use a model shown to be effective; can demonstrate evidence of community support from the private sector, schools, and others for their effort; show the cost-effectiveness of their proposal; and coordinate with state and local programs that also provide support for parents.

PARTNERSHIP FOR FAMILY INVOLVEMENT IN EDUCATION

The Partnership comprises national, regional, and local organizations that represent families, community groups, schools, religious communities, and employers, and was formed to promote children's learning through the development of family-school-community partnerships. Sectors within

each of these different community stakeholders have developed a sign-on statement for membership in the Partnership, which commits them to taking responsibility for children's learning in the way appropriate within their community. Since the Partnership began, over 2,500 organizations have signed on to be "family friendly for learning."

The Partnership offers families, schools, businesses, and diverse community organizations a network to help parents be more involved in their children's learning starting in the earliest years of life. For example, employer partners are encouraged to offer family friendly leave policies to support families.

Publications, videos, interactive town meetings, and other outreach methods have been produced to give parents, educators, communities, religious organizations and businesses tips on family involvement research, translate the research into easily understandable formats, provide "how-to" guidance for different stakeholders, and share ideas about effective practices.

America's Reading Corps

This effort would help mobilize 1 million tutors to provide up to 100 hours of extra reading help -- after school and during the summers -- for the more than three million children in grades K-3 behind in reading. The Department of Education and the Corporation for National Service jointly would fund 30,000 reading specialists and program coordinators to mobilize 1 million volunteer reading tutors. The Department's budget proposes over $1.4 billion in new education investments over five years (FY 1998-2002) to fund reading specialists to train and supervise these tutors.

The President has also called upon Work Study recipients to earn their awards by working as reading tutors for kindergarten and elementary school students. The Department recently amended its regulations to waive the required 25 percent employer funding match for students working as reading tutors.

America Reads Challenge Early Childhood Kit

Early childhood kits for families and care givers, called READY*SET*READ, were developed by early childhood researchers from the Early Childhood Technical Assistance Center through a joint project of the U.S. Department of Health and Human Services (Head Start Office and Child Care Bureau) and the Corporation for National Service, coordinated by the U.S. Department of Education. The purpose of the two early childhood kits for families and care givers of young children (birth through age 5) is to help them develop and improve their children's language skills.

The kits each include:

Either a READY*SET*READ For Families or a READY*SET*READ For Care givers: An activities booklet for families or care givers of children from birth through age 5 with ideas for things families or care givers can do with their children every day to help them learn about language.

READY*SET*READ Calendar for Families and Care givers: Day-to-day activities for families and care givers to do with young children during 1997-1998.

READY*SET*READ Developmental Growth Chart for Families and Care givers: A growth chart for families and care givers that identifies language skills that many children can perform during each growth period, describes when families should request the help of a professional, and provides simple activities to help children grow in language for each period.

Distribution of the kits:

The Department of Education will fund the distribution of 60,000 English and Spanish versions of the kits for Even Start programs, at a cost of $60,000.

The Department of Education will fund 100,000 copies for our 1-800-USA-LEARN toll-free number to use in filling public requests for the kits, at a cost of $100,000.

Additional funding for more extensive distribution to public Pre-K and Kindergarten facilities, public day care centers, pediatricians, and other resources may be secured from sources outside of the Department of Education. In addition, private entities may incorporate the substance of the kit into their own literature for distribution to their own membership or clients.

Satellite Town Meetings

The Department will devote its June Satellite Town Meeting to the topic of Early Childhood. The format and content are being developed with the intention of providing an opportunity for dialogue and collaboration on the national and local community levels. The Satellite Town Meetings are often played or recorded and played later on 100 or more community access channels and lend themselves to hosting local discussion groups. Typically, a town meeting will have 50-150 local discussion groups.

3. PROPOSALS FOR ADDITIONAL PROJECTS IN FY 1999

The National Education Goals recognize the importance of children's early physical, emotional, social, cognitive, and language development to successful learning in later years. Goal 1 states: By the year 2000, all children in America will start school ready to learn. The three objectives developed for Goal 1 reflect a clear recognition that a child's well-being is critical to successful learning: (1) all *disadvantaged children* will have access to high-quality and developmentally appropriate preschool programs that help prepare children for school; (2) *every parent* in America will be a child's first teacher and will devote time each day to helping his or her preschool child learn, and parents will have access to the training and support they need; and (3) *children* will receive the *nutrition and health care* needed to arrive at school with healthy minds and bodies, and the number of low birth weight babies will be significantly reduced through enhanced prenatal systems.

However, efforts to achieve the nation's school readiness goal are complicated by the fact that the United States has never had a comprehensive set of policies regarding early childhood development, child care, and the early years of formal schooling. More systemic policy approaches are needed in order to address the national readiness goal and to deliver services to young children in a comprehensive and equitable manner. Coordinated services to and through communities are needed. It takes communities with comprehensive, coordinated services to support families in the rearing of their children.

The Department is committed to this comprehensive and collaborative approach. Only through integrating early childhood development and education across agencies and with a larger community effort will we end the downward spiral of failure and enter a prevention mode that begins as early in a child's life as possible. Programs using comprehensive methods to meet the education, health, social services, and other needs of children and their families can offer help to families such as welfare-to-work parents on a broad range of service referrals for needs as diverse as childbearing, parenting skills, health care referrals, and job skills for parents. While many of these programs cross agency, institution, or professional lines, the public schools and the field of education have traditionally played a large, and now have an increasing, role in the development and implementation of family support programs.

For example, the Department of Education is currently discussing with the Department of Health and Human Services Centers for Disease Control and Prevention (CDC) an initiative to promote early screening of all newborn children for hearing loss. To support this initiative, the two Departments are jointly providing funds to one outreach project under Early Education Programs for Children with Disabilities to encourage such screening nationwide. If successful, more joint projects might be initiated to encourage screening for a variety of conditions. Important potential benefits of such screening to young children include not only the provision of medical services but early referrals to the Grants for Infants and Families programs. Such early referrals are believed to have the greatest benefits for children.

In the area of data, the Department is also engaged in collaborative efforts. Representatives of the CDC and the Bureau of Maternal Child Health are routinely invited to Department-sponsored meetings to improve its data collection efforts. The CDC and other agencies of the Department of Health and Human Services have been afforded opportunities to review the Grants to Infants and Children Longitudinal Study instrumentation.

Proposal

Although the Department has not initiated its FY 1999 budget process, the following is the type of initiative we would like to see in place:

A multiagency research and demonstration activity designed to nurture young children's learning, development, and resilience and to build on families' strengths. This project is for a non-stovepipe approach to investigate the impact that coordinated services, when begun at birth, have on the learning and development of young children and their families. By funding five research and demonstration projects, based on the principles described below, each at a cost of $4,000,000, we will learn what the effects on children are for certain packages of supports, and under what circumstances. Priority for funding of these projects may be given to applicants from the Empowerment Zones and Enterprise Communities.

The proposed activity will bring together state and local education, health, mental health, nutrition, and other social welfare agencies, along with community organizations and businesses, in an effort to study, document, and evaluate the impact of service coordination on the children's learning and development, on the families' cohesiveness and resilience, and on the neighborhoods' solidarity. The models will move from a medical-deficit orientation to an empowerment-strengths-based philosophy. The philosophical underpinnings of this activity are: (1) All children and families have strengths; (2) All

children, when offered appropriate supports, can learn; and (3) Children learn better when schools, families, and communities work together.

Schools will play a pivotal role in this activity, but teachers will not be the sole providers of services, and education will not be the sole source of financial support. Instead, teachers will be partners on multi-disciplinary teams of professionals who provide social services, early education programs, health and mental health care, recreational activities, and other services needed to strengthen children and families. School buildings may serve as the hub for the delivery of the services, places where parents can go for parenting classes, vocational training, family literacy, and recreation activities. Schools will be viewed as "safe havens" by young children and their parents. Young children will grow up seeing schools as places where there are exciting opportunities for learning.

There will be opportunities for creative inter-professional development activities. For example, early childhood educators will be able to problem solve with social workers, home visiting nurses, and librarians in discussions about how best to use the public library as a center for both family literacy classes and well-baby check-ups. Head Start and child care providers will have enhanced access to meet with business leaders, developmental psychologists, pediatricians, and parents in order to design enriching environments for young children.

In addition, community resources will be brought together in order to promote the cognitive, physical, and social-emotional development of young children, especially those who are placed at risk of educational failure because of community, economic, linguistic, family, or disability factors. We will learn how various early childhood resources, supports and services within the community can be designed, implemented, and coordinated to improve their effectiveness to maximize family well-being and young children's strengths, cognitive, physical, and social-emotional development, success in preschool, and achievement in grades K-3.

These resources are multiple and may include: local business and foundations; libraries and museums; Head Start, Child Care, Even Start, and other private and public early education programs; state and local Interagency Coordinating Councils established in the Individuals with Disabilities Education Act (IDEA); Developmental Disabilities Councils; and appropriate state and local governmental entities responsible for programs for young children and their families.

Many communities have small pieces of these activities in place. Very few communities have all of these pieces in place. There are virtually no communities that have evaluated and documented the effects that coordinated services have on young children's learning and development.

This proposed multiagency activity will allow communities to gather data about systemic issues, financing of supports, and the quality and effectiveness of services and supports for our youngest and most vulnerable citizens and their families. We will have an opportunity to begin to establish a database regarding which interventions may be most effective for promoting achievement and family well-being. This will be useful in preventing later academic and social problems in young children placed at risk. We also will have new research-based knowledge about what community conditions tend to promote or hinder the effectiveness of these supports and services, and how barriers can be overcome.

Sites will be encouraged to use state-of-the-art technology to assure that data is integrated and families only complete one form. In addition, technology will be available for children and families to use. The Department and the CDC are working closely together in the area of disability classification to promote a uniform classification system for young children with disabilities. If these are successful, a more formal joint collaboration might be established.

The existing projects and programs already described together with those proposed for 1997 and in later years should provide expanded services and an expanded knowledge base on effective interventions and teaching for young children. If the future is to be better than the past for child development and readiness, collaborative action will need to be well established and informed by the best available knowledge.

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

VETERANS AFFAIRS

Divider Title: _____

THE SECRETARY OF VETERANS AFFAIRS
WASHINGTON

MAR 2 5 1997

The President
The White House
Washington, DC 20500

Dear Mr. President:

In response to your letter of February 24, 1997, on the subject of "Federal Policies Targeted to Children in Their Earliest Years," we have reviewed the full range of Department of Veterans Affairs programs. While the direct mission of VA is to serve military veterans, a group which does not include young children, VA does provide significant indirect support for children in their earliest years through its extensive benefits, health, and education programs for veterans who, as parents, grandparents, and legal guardians, care and provide support for young children.

Total funding for all VA programs in FY 1997 is $39.4 billion. That VA funding provides compensation or pension payments to about 3.3 million veterans and health care to about 2.9 million veterans as well as support for numerous other programs serving many other veterans. VA does therefore contribute very substantially, if indirectly, to the foundation of parental and community support, good nutrition, proper health care, quality child care, and safe housing during the first years of life so critical to a child's future success in life.

Using standard methodology for forecasting child care center demand, we estimate that about 700,000 pre-school children dependent on veterans aged 25-34 were supported indirectly by VA in FY 1996. Estimating on a more approximate basis to account for care and support by older veterans who are parents and grandparents yields an overall total of roughly one million children in their earliest years receiving indirect support from VA.

The enclosed Fact Sheet describes in detail the VA programs that specifically target children in their earliest years. No proposals are included that would impact either the FY 1998 or FY 1999 Budgets.

Respectfully,

Jesse Brown

Putting Veterans First

FACT SHEET

SUBJECT: Federal Policies Targeted to Children in Their Earliest Years

Health Research

A significant portion of VA health care research contributes to the understanding of children's health problems either because the disease is also found among children or because VA is concerned about the potential health consequences of military service on the offspring of veterans. Some examples include Brain Structure and Language Impairment in Children, Juvenile Myoclonic Epilepsy, and Blood Pressure Control in Juveniles. VA has partnered with the Juvenile Diabetes Foundation to fund six diabetes research centers.

Health Care

Recently enacted legislation provides health care, vocational training and rehabilitation, and monthly monetary benefits for children of Vietnam veterans born with spina bifida.

VA administers the Civilian Health and Medical Program known as CHAMPVA for children and spouses of certain veterans which shares the costs of certain health care services. In CY 1996, CHAMPVA paid out $1,165,281 for 963 children from birth through five years of age. Well-baby care coverage includes routine physical examinations and immunizations, periodic health screenings, and developmental assessments for the first two years of life. VA is currently issuing regulations to implement recent legislation which extends well-baby care to children up to age six years.

Child Care Centers

In addition, VA has some small programs that directly target children in their earliest years. Foremost among them, in addition to supporting interagency child care centers, VA provides space, technical assistance, and administrative support to 48 child day care centers on VA-controlled property serving about 2,600 children. Operational funding is exclusively from user fees, not appropriations. The program will continue to expand wherever the demand for employee child care is sufficient to sustain a self-sufficient operation.

VA professionals have knowledge and possess many skills which are directly applicable to providing safe, healthful care to the very young, such as infection control procedures; nutritional planning; and hearing, vision, and dental screening. With appropriate authorizing legislation, VA professionals could serve the very young children at VA-supported child care sites.

Adoption

Consistent with law and government-wide regulations, VA's leave policy enabled 153 employees to apply 7,280 hours of leave related to adoption, generally of children in their earliest years.

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

EPA

Divider Title: _____

Elena -
FYI
- Pauline

March 25, 1997

MEMORANDUM FOR PAULINE ABERNATHY, NEC

FROM: MELISSA BONNEY AND STEPHANIE CUTTER, EPA

SUBJECT: ANNOUNCEMENTS ON CHILDREN'S HEALTH AND THE ENVIRONMENT

As we discussed, below are several announcements that the President, Vice President, First Lady or Administrator could make on children's health and the environment. If you would like to pursue any of the ideas listed below, please give either of us a call at 202/260-9828.

1) Executive Order to Protect Children from Environmental Health Threats

Last August, in Kalamazoo, MI, President Clinton committed to protect the health of children from increasingly pervasive environmental health threats. To fulfill this commitment, the President or Vice President could announce an Executive Order on Children's Environmental Health and Safety. EPA is working with White House offices and other agencies to craft this Executive Order, which would:

- Require health and safety regulations and standards to take into account the unique risks faced by children from environmental threats.
- Coordinate research and initiatives across the government concerning children's health.

The Executive Order could be ready to be released as early as next week.

2) Family Right-to-Know Legislation and Consumer Information Labels

To deliver on his commitment to expand every citizens's right-to-know about local pollution, the President could challenge Congress to pass legislation that would provide consumer information labels to families warning of any unique health risks to children from products containing toxic chemicals.

The NEC, DPC and CEQ have hosted substantial inter-agency discussions of EPA's proposal, which we believe could be ready to announce in the next three weeks.

3) Protecting Urban Children from Lead Poisoning and Contaminated Fish

Last August, in Kalamazoo, MI, the President also committed to provide improved information for families on toxics. Children living in urban areas are more heavily exposed to lead and contaminated fish from polluted waters because of increased levels of industrial activity. EPA is pursuing a number of administrative steps to ensure that parents living in urban areas have access to information about lead poisoning and contaminated fish. With this information, parents

can take action to solve environmental problems in their community and protect the health and safety of infants and small children.

The President, Vice President, First Lady or Administrator could visit a city in the next couple of weeks, such as Baltimore or Newark, where EPA is successfully working with families to inform them about local toxic threats to their children.

4) Protecting Children from Carcinogens, Neurotoxins and Reproductive Toxins

Children are more heavily exposed and vulnerable to these three classes of toxics than adults. To protect children against cancer, birth defects, developmental delays, neurotoxicity and reproductive impairment caused by environmental chemicals, EPA has proposed two actions:

- Expand the program of toxic tests that takes into account the special vulnerabilities of young children.
- Enhance research to help characterize and address the toxic effects of environmental chemicals on children's early development.

In the weeks following the White House Conference on Early Childhood Development and Learning, the Administrator could announce that EPA will convene a conference of experts in September to assess current rising trends of childhood cancer and its relationship to the environment.

5) Protecting Children from Secondhand Smoke

Infants and young children whose parents smoke are among the most seriously affected by exposure to environmental tobacco smoke, or second hand smoke, which is a carcinogen and presents significant health risks to children. Children are at increased risk of lower respiratory tract infections such as pneumonia and bronchitis. A 1992 EPA risk assessment found that second hand smoke is responsible for between 150,000 -300,000 lower respiratory tract infections in infants and children under 18 months of age annually and results in 7,500 - 15,000 hospitalizations each year. EPA is proposing to:

- Collaborate with other federal agencies and departments to educate and encourage parents to reduce their children's exposure to second hand smoke.
- Develop a media campaign on second hand smoke and children in cooperation with leading children and medical agencies and groups, such as Centers for Disease Control and the American Medical Association.

Following the White House Conference on Early Childhood Development and Learning, the Administrator could announce the kick-off of this campaign.

6) Review of Existing Public Health Standards to More Adequately Protect Children

This summer, the Administrator will propose a public review n agency-wide review of existing public health standards -- including drinking water and air standards -- to select five standards that should be changed to more fully consider health effects on children. This announcement, which would follow the White House Conference on Early Childhood Development and Learning, would demonstrate the Administration's continued commitment to protect children from environmental health threats.

cc: Nicole Rabner, Office of the First Lady

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

OMB

Divider Title: _____

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

CEA

Divider Title: _____

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

ONDCP

Divider Title: _____

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

SBA

Divider Title: _____

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

FEMA

Divider Title: _____

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

CPSC

Divider Title: _____

U.S. Consumer Product Safety Commission (CPSC) Actions/Proposals to Coordinate with the White House Conference on Early Childhood Development and Learning

o **Recall Round-Up:** On April 16, 1997, CPSC is launching "Recall Round-Up." This is a special nationwide initiative to remove hazardous children's products that remain in people's homes. The focus is on old cribs, wooden bunk beds, mini-hammocks, and beanbag chairs, as well as other products involved in the injury or death of children. Each year, CPSC coordinates approximately 300 recalls of defective or dangerous products, 30 percent of which address children's hazards.

o **Children's Sizes for Safety Standards:** On June 24, 1997, CPSC is sponsoring a national conference with the National Institute of Standards and Technology to address children's body sizes. CPSC has the best database in the world for collecting and publishing measurements of children and is embarking on a re-evaluation of this data. This sizing information is critical in the development of effective safety standards for children's products, such as cribs and playground equipment.

o **Baby Safety Showers and Mrs. Clinton:** First Lady Hillary Rodham Clinton kicked off CPSC's first Baby Safety Shower program at a Washington, D.C. child care center in October 1995. The program teaches parents lifesaving baby safety tips, packaged in specially-created party games. During 1997 and 1998, Baby Safety Showers, which have been organized by hundreds of organizations around the country, are being expanded to target grandparents and the Hispanic community.

o **SIDS-Related Messages:** During 1997 and 1998, CPSC is continuing to disseminate, through Baby Safety Showers and other outreach efforts, the SIDS-related messages of 1) put babies to sleep on their backs and 2) remove soft bedding from cribs. These messages were developed as a result of CPSC's special study of infant suffocation.

o **Crib Safety:** In summer 1997, CPSC's decision is due on its rulemaking addressing crib slat strength. This could result in a mandatory safety standard to prevent additional crib-related deaths.

o **Fireworks/ July 4th:** In time for each year's July 4th celebration, CPSC and U.S. Customs work together to keep millions of potentially dangerous imported fireworks from reaching American consumers. Last year, this totalled 12.6 million fireworks.

o **Baby Walkers:** In summer 1997, a voluntary standard for baby walkers with strengthened safety requirements will take effect. CPSC was actively involved with industry in this effort. This safety standard is expected to result in a reduction of baby walker-related injuries from about 25,000 to about 10,000 hospital emergency room visits each year.

o **Bike Helmets:** In summer 1997, CPSC will consider a proposed new mandatory safety standard for bike helmets, developed by CPSC staff. This standard would provide additional protection for children's heads.

o **Window Covering Pull-Cord Safety:** In July 1997, a voluntary safety standard to prevent strangulations of young children by window covering pull-cords will go into effect. CPSC worked actively with industry in the development of this standard.

o **Playground Safety:** In fall 1997, CPSC will issue its updated guidelines for public playground safety. These guidelines are used by hundreds of organizations around the country; several states have adopted CPSC's playground guidelines into law.

o **Toy Safety:** In time for Christmas each year, CPSC and U.S. Customs inspect toys as they arrive at shipping docks around the country to ensure that the toys are safe. Last year, 1.8 million dangerous toys were stopped from reaching American children.

o **Poison Prevention:** By January 1998, CPSC will require all medicines and household products covered under the Poison Prevention Packaging Act to have both child-resistant and adult-friendly packaging.

o **Multi-Purpose Lighters:** In 1998, CPSC's decision is due on a rulemaking that would require multi-purpose butane lighters (e.g., grill lighters) to be child-resistant. This could save young children's lives.

KEEPING AMERICA'S YOUNG CHILDREN SAFE

U.S. CONSUMER PRODUCT SAFETY COMMISSION

March 1997

CPSC: Keeping America's Young Children Safe

Almost every product children handle, play with, sleep on, and wear is touched by the U. S. Consumer Product Safety Commission (CPSC). Whether at home or at play, in schools or in day-care centers, children are safer because of CPSC.

Early childhood development is at the heart of CPSC's mission, for children cannot thrive and develop unless their basic need for safety is met. Most of the work done at the agency affects all young children in this country and their families.

This commitment to young children is reflected in the agency's allocation of resources. Fully 40 percent of CPSC's annual budget is earmarked for activities and projects involving children. For fiscal year 1997, that represents $17 million.

CPSC stands at the forefront of protecting young children's safety and well-being. The agency monitors the safety of 15,000 different types of products, many of them affecting children. These products include toys, nursery furniture, children's clothing, playground equipment, sports gear, and poison prevention packaging. Because of this breadth, CPSC affects the lives of children everywhere in the United States.

But keeping America's young children safe is no easy task. Each year, almost 7,000 children die from unintentional injuries, more than any disease. Hospital emergency rooms annually treat more than four-and-a-half million children for consumer product-related injuries.

What is especially tragic is that most of these injuries and fatalities are preventable. And with today's efforts to control health care costs, it is important to note that an injury prevented translates directly into health care dollars saved.

While CPSC is one of the nation's smallest public health agencies, the effect it has on the safety of America's young children is large. The agency has learned to effectively use a wide array of tools -- product recalls, mandatory and voluntary safety standards, public outreach, media -- to achieve impressive results with relatively small resources.

The following information details the actions CPSC is taking and plans to take to safeguard our nation's youngest people.

Ensuring a Safe Start

Protecting infants and toddlers comprises a significant share of CPSC's activities and resources. The following are highlights of these activities.

Creating Safer Homes with "Baby Safety Showers"

CPSC's commitment to safeguarding the nation's young children is well captured in its "Baby Safety Showers" initiative. Recognizing the public need for information on baby safety issues, CPSC launched a national program in October 1995.

First Lady Hillary Rodham Clinton kicked off the campaign at a Washington, D.C. child care center, and Mrs. Clinton discussed the Baby Safety Showers program in her book, *It Takes A Village*. The concept of the program is simple: teach young and first-time parents lifesaving baby safety tips, packaged in specially-created party games.

CPSC worked closely with the HHS Administration on Children, Youth and Families to reach child care and Head Start centers. The CPSC materials, produced in cooperation with a major U.S. corporation, are available in English and Spanish.

Actions:

o Hundreds of child care centers, hospitals, businesses, and other groups have organized Baby Safety Showers around the country. Thousands of parents have been reached with lifesaving baby safety information that reflects many of the issues discussed in this report.

o In fiscal 1997 and beyond, CPSC is expanding the Baby Safety Showers program with special initiatives targeting grandparents, Hispanics, and fathers.

Preventing Infant Suffocation

CPSC recently released a two-year study that found that up to 1,800 babies whose deaths were attributed to SIDS (Sudden Infant Death Syndrome) each year may, in fact, have suffocated when placed to sleep on their stomachs on top of soft bedding. CPSC staff first noted the dangers of infants sleeping prone on soft bedding with the reports of several infant deaths associated with infant beanbag cushions. At least 35 infant deaths were associated with these cushions. CPSC recalled (in 1991) and then banned (in 1992) infant cushions, which were linked to the deaths of at least 35 babies.

Action:

o SIDS-related deaths have dropped by 30 percent in the United States between 1992 and 1995. CPSC, along with pediatricians and other public health organizations, has worked hard to re-educate parents to put their babies to sleep on their backs and to remove soft bedding from cribs. CPSC's Baby Safety Showers program highlights the importance of babies' sleep position and removing soft bedding from cribs.

Making Cribs Safer

More infant deaths are associated with cribs than with any other piece of nursery furniture. CPSC has worked on crib safety for more than 20 years, issuing mandatory safety standards in the 1970s and working on voluntary standards with industry in the 1980s. CPSC has issued many product recalls, affecting thousands of cribs. In addition, CPSC has been active, through the media and grassroots organizing, in alerting the public to the dangers of used or old cribs.

Action:

o As a result of safer cribs, infant deaths from injuries associated with cribs have dropped to about 50 a year, compared with 200 deaths before the standards took effect.

o In fiscal year 1997, CPSC initiated a rulemaking to strengthen crib slats. This could result in a mandatory standard to prevent additional crib-related deaths. The Commission's decision is due in summer 1997.

Fixing Baby Walkers

Each year, about 25,000 infants and toddlers enter hospital emergency rooms with injuries associated with baby walkers. These injury numbers are higher than those associated with any other piece of nursery equipment. Most of these injuries result from falls down stairs.

Actions:

o With the active involvement of CPSC working with industry, a voluntary standard for baby walkers with strengthened safety requirements will take effect in the summer of 1997. This safety standard is expected to result in dramatic reductions in the number of children's falls down stairs in new baby walkers.

Safeguarding a Child's Development

Ensuring that children grow in an environment that allows their full mental and physical development is of primary importance. CPSC has taken the following actions to achieve that goal.

Protecting the Brain

One of CPSC's major challenges is to prevent and protect against brain injury to children from consumer-product related hazards. CPSC's agenda in this area is wide-ranging: bicycle helmets, baby walkers, high chairs, cribs, playground surfacing, poisonings from medications and household products, lead and carbon monoxide poisonings, drownings, suffocations, and strangulations.

For example, each year about 300 children are killed and 400,000 go to hospital emergency rooms because of bike-related injuries. Many of these injuries, and most of the fatal ones, are to the child's head. Bike helmets reduce the risk of head injury by up to 85 percent. Bike helmets sold today must meet CPSC's interim mandatory safety standard.

CPSC regularly promotes bike helmet usage through media events and outreach activities with other corporations and organizations. An important message to all parents is to encourage them to make sure their young children -- whether riding on the back of their parents' bicycles or on their own tricycles -- wear bike helmets.

Bike-related head injuries for young children have dropped from 11,900 hospital emergency room admissions in 1986 to 7,700 in 1995. All bike-related injuries to young children have dropped by about 25 percent since 1986.

Action:
o In the summer of 1997, CPSC will consider a proposed new mandatory safety standard for bike helmets, which will provide additional protection for children's heads. CPSC will continue to promote bike helmet usage.

Preventing Poisonings

For more than two decades, CPSC has enforced the Poison Prevention Packaging Act (PPPA). This requires child-resistant packaging for various drugs and household products.

Last year, CPSC took the further step of revising regulations to ensure that the packaging is both child-resistant and "adult-friendly." This action was taken to address the problem of child poisonings in homes where adults had removed or altered the child-resistant packaging. About 20 percent of all poisonings to children occur in the homes of their grandparents and other relatives.

Since the passage of the PPPA, CPSC estimates that more than 700 children's lives have been saved from accidental poisonings by prescription drugs and aspirin alone.

Actions:

o By January 1998, the new child-resistant, adult-friendly packaging will be completely phased in throughout the country.

o CPSC is continually reviewing products that may require child-resistant packaging. In fiscal year 1997, CPSC initiated a rulemaking that could result in requiring child-resistant packaging for common household cleaners and products refined from crude oil.

Guarding Against Lead Poisoning

The effects of lead poisoning in young children are well documented. Lead poisoning may lead to irreversible brain damage, delay mental and physical growth, and cause behavior and learning problems. Approximately 1.7 million children between the ages of 1 and 5 have blood lead levels that are of concern.

CPSC has long been involved in reducing or eliminating this hazard. Since 1978, CPSC has banned most paint, intended for consumer use, that contained more than 0.06 percent lead. CPSC's efforts, along with others, have resulted in reducing blood lead levels in the U.S. about 78 percent since 1976.

Actions:

o In 1996, CPSC discovered that imported non-glossy vinyl mini-blinds can present a lead poisoning hazard for young children. At CPSC's urging, manufacturers are now making new mini-blinds without lead intentionally added.

o In 1996, CPSC released a major study revealing that many school, park, and community playgrounds across the country have painted playground equipment that presents a potential lead paint poisoning hazard. State and local officials are now alerted to identifying and dealing with possible lead paint on their playground equipment.

o In 1994, CPSC issued recalls of about 1 million leaded crayons from 11 importers. In each instance, CPSC conducted massive media and educational efforts to alert the public to these lead hazards.

Preventing Injuries at Home and at Play

CPSC has focused much of its attention on making a child's world a safer place to live and to play. Here are some of CPSC's most important activities.

Reducing Fire Injuries and Deaths

Young children have twice the risk of dying in a fire compared to the population as a whole. In recent years, children under age 5 represented 20 percent of the total residential fire-related deaths in this country.

CPSC works in a broad range of areas to prevent fires and reduce fire deaths and injuries. These include such products as smoke detectors, electrical and gas appliances and heaters, lamps, clothing, mattresses, and upholstered furniture.

For example, CPSC recently required disposable butane cigarette lighters to be child-resistant. In addition, CPSC enforces regulations dealing with fireworks and prevents shipments of hazardous fireworks from entering this country. For firework-related injuries, hospital emergency room admissions for young children have dropped from 1,100 to 400 between 1988 and 1995.

Actions:

o In fiscal year 1997, CPSC initiated a rulemaking that may result in requiring multi-purpose butane lighters (e.g. grill lighters) to be child-resistant. This could result in additional young lives saved.

o In fiscal year 1996, CPSC and U.S. Customs worked together to keep more than 12.6 million potentially dangerous imported fireworks from reaching American consumers..

o The 1994 child-resistant cigarette lighter regulation is expected to prevent 80 to 105 fire deaths each year associated with children under age 5 playing with lighters. The estimated annual net benefits are nearly $400 million.

o

Making Toys Safer

About 70,000 children under age 5 go to hospital emergency rooms with injuries associated with toys. In a recent year, 21 children under age 5 died from toy-related injuries. CPSC enforces numerous regulations covering toy safety, which safeguard young children against choking hazards caused by small toy parts. A recent regulation, the Child Safety Protection Act, is intended to reduce toy-related choking deaths and injuries to young children. The Act requires warning labels on balloons, small balls, marbles, and toys or games for young children. Certain-sized small balls for children under age 3 are banned.

Actions:

o CPSC regularly issues recalls of dangerous toys and other children's products with small parts, choking hazards, and/or lead. Since October 1995, CPSC has made 68 public announcements of recalls and other actions, involving about 7 million toys and other young children's products.

o To ensure the safety of imported toys, CPSC staff works with the U.S. Customs Office to inspect toys as they arrive at shipping docks around the country. Since fiscal year 1996, CPSC has sampled 439 shipments of toys. Of these, 253 shipments were seized or detained for safety violations. This amounted to 1.8 million toys, with a retail value of $2.5 million.

Improving Playground Equipment

Over the years, CPSC has been a leader in ensuring that the nation's playgrounds, both for home and public use, are safe. CPSC enforces regulations, helps develop voluntary standards, issues recalls, and widely disseminates information on this issue.

Hospital emergency room visits involving playground head injuries for young children have decreased in a number of areas between 1986 and 1995. With swings, for example, these injuries decreased from 7,700 to 5,900; for slides, the numbers decreased from 6,200 to 3,600.

Action:

o In the fall of 1997, CPSC will publish its updated and expanded public playground safety guidelines. Hundreds of organizations around the country use these playground guidelines; several states have adopted CPSC's guidelines into law.

Preventing Strangulations

In everyday life, there are hidden hazards for children. Because of recent CPSC actions, the strangulation hazards posed by window covering pull-cords and drawstrings on children's clothing have been reduced or eliminated.

Since 1981, nearly 200 children, most under age 4, have strangled to death when they became caught in the loops of window covering pull-cords. The younger children who died, usually between 8 and 23 months old, were often in cribs that were placed near the window cords.

Children also have strangled when the drawstrings on the hoods and necks of their jackets caught on such things as playground equipment and cribs. Since 1985, there were 17 deaths and 42 nonfatal incidents caused by drawstring entanglement.

Actions:

o At CPSC's urging beginning in 1994, the window covering industry agreed to eliminate the loop on all new two-corded mini-blinds and provide free repair kits to consumers for their existing pull-cords at home. In addition, CPSC worked with industry to develop a voluntary safety standard addressing this issue for all window covering pull-cords.

o Because of CPSC intervention in 1994, the children's clothing industry voluntarily agreed to remove the neck and hood drawstrings from most of the 20 million children's garments manufactured annually in the U.S.

Cementing the Foundation

To better identify new and evolving hazards to young children, CPSC grounds all its efforts, whether product recalls, media alerts, or standards development, on the most up-to-date data available. Today, more than ever, it is important to keep abreast of societal changes affected by new technology, the introduction of new products, and changing consumer needs and product use patterns.

Running a World-Renowned Injury Data Collection System

CPSC developed and runs the nation's most comprehensive system for collecting injury data from hospital emergency rooms. The National Electronic Injury Surveillance System (NEISS) collects injury data associated with 15,000 consumer products from hospitals across the country every single day.

With this data, NEISS is able to provide national estimates of the number and severity of consumer product-related injuries. This information helps CPSC quickly zero in on the most pressing hazards to young children. CPSC's NEISS provides hospital emergency room data to other federal agencies as well. This data is available to the public at large through CPSC's National Injury Information Clearinghouse.

In fiscal year 1997 and beyond, CPSC will continue to update its sample of hospitals, to ensure that the NEISS data accurately reflects the numbers and types of injuries seen in America's hospital emergency rooms.

Actions:

o In 1995, CPSC's NEISS system identified the rapid rise in in-line skating injuries. This resulted in a national campaign, kicked off by Mrs. Tipper Gore -- wearing in-line skates -- to alert the American public to both this injury trend and the importance of wearing safety gear.

o In fiscal year 1997 and beyond, CPSC's NEISS system is providing children's injury data to the Department of Transportation for its work on children and air bags.

Getting the Measurements Right

CPSC is a pioneer in collecting and publishing measurements of children's sizes. CPSC developed and maintains an anthropometric database of children, such as head sizes, that is heavily used by industry and remains the only comprehensive source of child anthropometric data in the world.

Designing consumer products with the correct measurements of children enhances product safety. For example, accurate anthropometric data has been crucial in CPSC's and industry's efforts to develop safety standards for children's products, such as cribs, playground equipment, strollers, high chairs, baby walkers, bunk beds, and toddler beds.

Actions:

o In fiscal year 1997, CPSC is undertaking a pilot study to determine if children's sizes have changed significantly in the past 20 years. This study may lead to a major project to update the anthropometric data base on children. CPSC is seeking partners for this project, expected to cost about $1 million.

o On June 24, 1997, CPSC is sponsoring a national conference with the National Institute of Standards and Technology to bring together the nation's leading figures on anthropometric data.

Creating a Special Investigations Unit (SIU)

CPSC's SIU focuses on developing new, non-traditional sources of injury information, such as insurance companies, independent engineering consultants, arson investigators, and private attorneys. With these information-sharing relationships, the agency can identify and remedy even more consumer products which present a high risk of serious injury.

Action:

o In fiscal year 1997, as a result of recent SIU contacts, two dangerous products associated with young children were identified and recalled. Nearly one million baby monitors, which presented a fire hazard because of faulty wiring, were recalled. CPSC also recalled about 20,000 children's foam chairs which presented a choking hazard.

Building a Better Hotline

Vice President Al Gore gave CPSC's consumer telephone Hotline the Hammer Award in 1995. CPSC had re-engineered its Hotline, an interactive telephone system that provides critical safety information to consumers as well as providing them a means to report product incidents. The toll-free 24-hour-a-day Hotline handles more than 270,000 requests for information each year and receives more than 3,500 product incident reports annually. From 1993 to 1995, the calls to the Hotline increased by 75,000 and the number of product incident reports doubled. CPSC is continuing to upgrade its Hotline, including integrating the services it provides with a fax-on-demand system and its World Wide Web site on the Internet.

Actions:

o Singer Vic Damone recently called CPSC's telephone Hotline to report the amputation of his granddaughter's finger by a folding chair. CPSC investigated the incident and announced a voluntary recall of the chair on March 24, 1997.

o For example, just one CPSC television video news release about zippered bean bag chairs, involved in suffocations and choking of children and toddlers, reached 43 million viewers. This generated 17,500 calls to the CPSC Hotline for follow-up information.

Expanding Public Outreach Electronically

A variety of electronic mechanisms, such as the Internet, e-mail, fax, and video news releases (VNRs), have opened new and exciting ways to get child safety information directly to those who care for young children. National organizations, whose clients or members are involved in addressing safety issues for children, are automatically contacted as relevant issues arise. CPSC's television VNRs are a relatively inexpensive way of quickly reaching millions of consumers with critical safety information affecting young children. In fiscal year 1997 and beyond, CPSC will continue to tap the potentially enormous capabilities of electronic alternatives to deliver lifesaving information about young children.

Actions:

o CPSC's Internet Web site has grown rapidly, from an initial 400 people using the site per month in May 1996 to around 10,000 per month at the beginning of 1997.

o Through all electronic means, CPSC's children's safety information is reaching hundreds of organizations that are disseminating the information to their networks and constituents, reaching potentially 44 million consumers.

The Next Steps

CPSC takes its responsibility seriously for protecting young children. There is unlikely to be a household with children anywhere in the United States that hasn't been made safer by CPSC actions.

But there is still much work to do. The agency is currently working on a wide range of activities that will improve the lives and safety of America's children.

In all of CPSC's efforts to strengthen and care for America's families, injury prevention is an essential component. For unintentional injuries touch not just the young victim; these incidents affect the entire family. Anyone who has dealt with the families of burn victims, for example, knows the pain and anguish these injuries inflict on every member of the family and how long it takes for both victim and family to recover.

As we enter the 21st century, we need to marshal increasingly scarce resources for our most pressing national problems. Not all our problems can be solved, but unintentional injuries can be drastically reduced. Working together, we can make a positive difference in the lives of our nation's children and their families.

Clinton Presidential Records
Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

SSA

Divider Title: _____

SOCIAL SECURITY

Office of the Commissioner

March 24, 1997

TO : Ms. Elena Kagan
Deputy Assistant to the President for Domestic Policy

SUBJECT: White House Directive Regarding Federal Policies Targeted to Children in Their Earliest Years--
INFORMATION

As requested, attached is the Social Security Administration's report on the present, planned and proposed initiatives we are undertaking that support early childhood development. The report is divided into two sections. The first describes features of the Social Security programs that promote the well-being of children in their earliest years and communications and other activities surrounding the programs. The second section outlines initiatives and policies of the Social Security Administration that primarily educate and support our employees in their ability to provide quality care to young children.

Please let me or Carolyn Colvin, Deputy Commissioner for Programs and Policy, know if any further clarification is needed with regard to this submission. As you know, Carolyn is SSA's representative on the early childhood working group.

John J. Callahan
Acting Commissioner
of Social Security

Attachment

SOCIAL SECURITY ADMINISTRATION PROGRAM FEATURES THAT PROMOTE THE WELL-BEING OF CHILDREN IN THEIR EARLIEST YEARS

Benefits to Children of Workers

- SSA's combined title II entitlement and representative payee programs for dependent children of retired, disabled, and deceased workers offer a source of support and protection to children during their formative years. SSA pays monthly benefits to nearly 4 million children under the age of 18, of whom 10 percent are age 5 and under. Dependent children of the worker include natural children, legally adopted children, stepchildren, and grandchildren.

- For children under the age of 15, SSA requires that benefits be paid through a representative payee. The Agency selects as representative payee an individual (or organization) who is in the best position to know and meet the child's needs. Annually, representative payees complete a report on the use of benefits to ensure that they use benefits for current and foreseeable needs and conserve any remaining benefits for future needs.

- At the end of January 1997:

  - 440,830 children of retired workers were currently receiving benefits and the average monthy benefit was $337.66;

  - 1,462,172 children of disabled workers were currently entitled and the average monthly amount was $194.41; and

  - 1,909,071 surviving children were receiving benefits with an average monthly amount of $488.62.

- Total title II benefits paid to children in the month of January 1997 were $1,365,930,829.

Supplemental Security Income

The Supplemental Security Income (SSI) program makes payments to aged, blind, or disabled people whose incomes and resources are below specified limits and who meet certain citizenship and residency requirements. On February 1, 1997, 958,387 blind or disabled children under age 18 were receiving SSI benefits. Approximately 147,000 of these children are under age 5. The average SSI benefit payable to children under age 18 in February was $459.65. Total SSI benefits to children under age 18 in February was $440,522,000.

Financial and Medical Support for Low-Birth-Weight Babies

- Over 12,000 children per year are awarded SSI childhood disability benefits based on low birth weight.

- Throughout the Country, SSA field offices that are located in the same communities as major neonatal hospitals have developed close working arrangements with the hospitals' staffs. In many instances, field office personnel have trained social workers and hospital medical personnel to identify potentially eligible clients and assist them in applying for SSI benefits for low birth weight babies.

- There are outreach programs in many States where Disability Determination Services (DDSs) have arrangements with hospitals to complete applications for benefits for low birth weight babies immediately after birth.

- These cases are fast tracked through the field offices and DDSs so that the children begin receiving SSI benefits and Medicaid coverage as expeditiously as possible.

- About one-half of these children lose their entitlement (due to parental income deeming) when they are released from the hospital. However, Medicaid already has covered their expenses for the hospital stay regardless of their parents' income.

- The other half (approximately 6,000 children at any one time) stay on the rolls, receiving up to a maximum of $484 per month, until we reevaluate their medical condition, now required to be done by their first birthday.

National Communications Campaign

- SSA's Office of Communications is primarily engaged in increasing the public's awareness of the nature, role, and philosophical foundation of the Social Security program, and informing the public about Social Security and Supplemental Security Income (SSI) benefits. Public service announcements, satellite broadcasts, written public information materials, and public affairs/liaison activities with external advocacy groups and individuals are the methods used to carry out this mission.

- To this end, SSA is embarking on a national communications campaign to promote Social Security not just as a retirement program, but one which addresses the income needs of surviving dependents (many of which are minor children), and disabled workers and children. Our national exhibits are being redesigned to reflect this important message.

Liaison Work with Advocacy Groups

- SSA engages in ongoing liaison activities with children's advocacy groups. This is the process by which we obtain and share information to enhance SSA's customer service to children and to provide them greater access to Social Security and SSI benefits.

- We also participate in and exhibit at national conferences of child advocacy groups. This year SSA will be represented at conferences sponsored by the Children's Defense Fund, Child Welfare League, and Council for Exceptional Children. We are increasing our efforts to disseminate Social Security and SSI information at these national conferences through structured workshops and presentations to conference participants at large.

Children's Health Care

- In the past Congress provided funds to SSA for the Outreach Demonstration Program. The program's purpose has been to develop and test innovative ways to involve outside organizations in cooperation with SSA to reach potentially eligible individuals and assist them in completing the SSI application package. Over the years, several of the Outreach Demonstration Projects have targeted children and one of these projects, Children's Health Care, is currently in operation.

- Children's Health Care's first outreach project was funded for November 1, 1992, to December 31, 1993, at a cost of $119,000 in Federal funds. The Project targeted inner-city youth with severe disabilities in the area served by the Minneapolis Children's Health Center. The goal was to increase the number of children receiving support such as SSI benefits and Medicaid.

- The project workers informally screened new admissions to the hospital for potential SSI eligibility. If eligibility seemed likely, then the child's parents or guardians were contacted and given information regarding the SSI program. If they decided to file for SSI benefits, then the outreach worker completed all necessary forms and also gathered any medical evidence in the hospital's records.

- This intervention benefited the Agency because a timely and complete application package was provided to SSA; it also assisted the parents/guardians in securing needed SSI benefits and various social service benefits including Food Stamps and Medicaid. This first outreach project secured

941 SSI applications of which 692 were awarded SSI benefits and 592 of those awards were to children under four years old.

- Currently, $520,605 in federal funds has been awarded to Children's Health Care for the period beginning August 1, 1994, and scheduled to end July 31, 1997.

- The targeted population has been enlarged to include not only the inner-city youth in the area served by the Minneapolis Children's Health Center but also the inner-city youth in the area served by Children's Hospital of St. Paul. From August 1, 1994, through November 30, 1996, 870 applications were with SSA and 649 of those were awarded SSI benefits. A breakout of the ages of the awardees is not readily available, but it is estimated that 85% went to children younger than age four.

- It is anticipated that upon completion of this outreach project, Children's Health Care will continue to identify and assist SSI applicants in completing the SSI application process. This will continue to assist SSA, continue to increase the number of children receiving SSI benefits, and also provide the hospitals with Medicaid reimbursement.

SSI/Title V Children with Special Health Care Needs Workgroup

- SSA, represented by the Office of Disability, is on the SSI/Title V Workgroup that focuses on facilitating access to benefits/services to young children with disabilities. We are also in a liaison with the Child and Maternal Health Bureau in the Department of Health and Human Services to search for and promote the identification of infants and children who are significantly impaired and require help in seeking rehabilitation and various forms of therapy such as physical therapy and speech therapy.

Special Rules to Assess Infants with Developmental Problems

- SSA's policies for evaluating disability in children have long contained provisions for evaluating disabilities in infants and very young children who may have conditions that are difficult to test.

- The new disability rules implementing Public Law 104-193 clarify these longstanding policies, especially the policy of "functional equivalence" to impairments in the Listing of Impairments. Functional equivalence is especially useful for evaluating disability in children with physical impairments or combinations of physical and mental impairments.

Planned Communication Initiatives

- SSA will begin to emphasize the elements of Social Security and SSI programs that are pertinent to early childhood development. These elements include benefits to blind and otherwise disabled children, low-birth-weight babies, and to eligible surviving children of deceased workers.

- More specifically, these elements will be emphasized as we develop or revise audio/visual and written public information materials. We will also seek opportunities to emphasize them as we participate in liaison activities and in national conferences.

- We do not anticipate any increase in budget expenditures to carry out this directive.

SOCIAL SECURITY ADMINISTRATION INITIATIVES
AND POLICIES THAT EDUCATE AND SUPPORT OUR EMPLOYEES
IN THEIR ABILITY TO PROVIDE QUALITY CARE TO YOUNG CHILDREN

EXISTING FAMILY FRIENDLY PROGRAMS AND SERVICES TARGETING EARLY CHILDHOOD

Career/Life Resource Center

- Opened in 1994 as a focal point for information and services to help employees balance work and family responsibilities, the Center has, to date, logged over 10,000 visits of employees and family members.

- Center activities include lunchtime seminars where experts in fields relating to improving family life and meeting family needs such as child care, family nutrition, the father's role in parenting, self-esteem and stress reduction are invited to speak and respond to employee questions and concerns.

- Center materials and resources include videotapes, books, magazines, newsletters, computer software, Internet access, personal counseling and referral services which are accessible to employees and their families and offer a great deal of help regarding raising young children.

- Evaluation and employee feedback activities are encouraged to ensure that programs and services are kept up-to-date and responsive to employee needs. Employees are encouraged to complete surveys to record their reactions to and recommendations for improvements for each Center event and service. Focus groups are held to stimulate employee discussions about the effectiveness of Center activities, services and resources and elicit suggestions for future initiatives.

- Success is evidenced by excellent survey ratings for the Center for the variety and quality of programs and resources and the helpfulness of the staff. Focus group participants have also indicated a high level of satisfaction with Center resources and services. Recommendations from feedback sources include ideas for improving communications methods as well as suggestions for expanding materials on family needs, such as parenting and child development.

Child Care

- SSA has established developmental child care centers onsite at two headquarters locations in Baltimore, Maryland as well as at the Data Operations Center in Wilkes-Barre, Pennsylvania and at the Western Program Service Center in Richmond, California. The Baltimore locations have been in operation for more than 5 years and over 1,000 children from 4 months through kindergarten age have been cared for at these centers. These two centers have a combined licensed capacity of 300 children and are open 12 hours a day. The Wilkes-Barre location has been in operation for 3 years and usually operates at the full licensed capacity of 70 children. The Richmond Center, opened in November, 1996, is currently building its enrollment.

- SSA recognizes that working parents need a supportive environment; therefore, our child care program emphasizes the importance of promoting the physical, social, emotional and intellectual growth and well-being of each child. Teachers work with children in small groups. In addition, parenting workshops are held at the Centers, and staff development workshops are held regularly to keep teachers up-to-date on quality child care techniques and child development issues.

- Examples of specific projects and activities that support and promote effective parenting include:

  - Producing and videotaping an hour long program entitled, "Successful Family Living for Stepfamilies". The program features a psychiatrist and a clinical social worker specializing in children and adolescents who discuss how to successfully achieve harmony, balance and integration in stepfamilies.

  - Providing a program for child care center parents called "FACE IT". The program consists of six interactive workshops for parents and their children covering parenting techniques, positive communication, behavior management and other issues. The program was provided through a grant managed by the Epilepsy Association of Maryland.

  - Conducting developmental screenings of center children twice a year by staff members who share the results with parents and make appropriate referrals to outside experts, as necessary. Staff at the Centers receive extensive training in working with children with special needs, and they provide ongoing advice and assistance to parents.

- Providing health screenings, such as vision and hearing testing, for Center children. In addition, children are taught about health and hygiene. For example, a dental hygienist has visited the Centers to instruct the children on how to properly brush and care for their teeth.

- Making available to parents the services of a child psychologist who provides guidance and advice to the child care staff on individual behavior concerns and also speaks with parents about methods for behavior management.

- Providing community resource information such as comprehensive listings of summer camps and other activities for use by parents in planning for their children's summer care. Such materials are available in the onsite child care centers as well as in the Career/Life Resource Center.

o Funding for the establishment and maintenance of SSA's Child Care Centers is provided every year in the Agency's administrative budget as permitted under the Trible Amendment. In FY 1997, $670,000 was budgeted for the establishment and maintenance of the child care centers. Additional funds are expended for renting space occupied by the Centers.

o In addition to the onsite Centers, SSA participates in approximately 15 joint use Federal child care centers located in Federal buildings across the country. These include the Mid-America Program Service Center in Kansas City, Missouri and the Teleservice Center in Auburn, Washington, where SSA represents a sizable portion of the Federal workforce and the Center populations.

o As with all of our programs designed to assist employees and their families, we emphasize quality and effectiveness of operation in our child care centers. Accordingly, SSA centers are fully licensed by the local jurisdiction and are actively seeking accreditation by the National Association for the Education of Young Children.

o The Baltimore child care centers have tracked the progress of "graduates" of the kindergarten program as they entered local elementary schools and have found that graduates have made excellent adjustments and are doing very well.

- Employee feedback and suggestions regarding our child care centers are encouraged. For example, the Executive Director of our headquarters' Centers conducts annual parent satisfaction surveys and has received very positive feedback about the program, teachers, curriculum, operating hours and facilities. Parents appreciate the convenient onsite location which makes transporting and visiting their children easy, and they are pleased that the broad band of operating hours facilitates managing work schedules and child care.

- Focus groups are also held with groups of parents to help assess the success of SSA's child care program. All groups, including past and present users, were positive about the Centers and the experiences of their children.

Supporting the Role of Fathers

- SSA makes a concerted effort to encourage fathers to take a more active role in family life and to maintain a strong, positive force in their children's lives. Through continuing education seminars at the Career/Life Resource Center and through our Employee Assistance Program (EAP), SSA emphasizes co-parenting and focuses on fathers contributing to the physical and emotional development of their children.

- EAP counselors not only work with fathers, but also reach out to include spouses/partners, children, and other relatives as part of family support services. The EAP is establishing and facilitating employee self-help and peer support group meetings, including fatherhood sessions.

- SSA produced a live, interactive broadcast on its National Satellite Network entitled "Strengthening the Role of Fathers in the Family". The broadcast included a special, videotaped message from Vice President Al Gore which stressed the importance of good communications and strong, bonded relationships between fathers and their children. The program was viewed by SSA employees, various other Federal agencies and private organizations nationwide.

- Feedback in response to the satellite program was very positive and there has been a high demand from employees to view the taped broadcast. Copies are available for use by employees in headquarters and field offices through the Career/Life Resource Center, and employees are encouraged to borrow tapes to share with their families.

- SSA has purchased a variety of reference materials for the Career/Life Resource Center on strengthening the role of fathers in the family, many of which emphasize the importance of early childhood development and ongoing interaction and communication between father and child.

- The headquarters child care center is continuing to provide many programs geared especially for fathers, many of whom (as many as 50) drop their children off in the mornings. These activities include breakfasts with fathers and "fathers only" workshops on parenting, co-parenting and the father's role in raising young children.

Grandparenting

- Our Grandparents Raising Grandchildren Support Group, which has been ongoing since 1994, has been growing steadily. Meetings are held regularly at which we host workshops featuring guest speakers from within the Agency and from the community who share information and expert advice on a variety of topics such as child development and care, family counseling and social services. A special satellite broadcast provided information about legal issues and community support for grandparents and children.

- We are working with the Maryland Office on Aging and other local organizations to develop a directory of services geared to the information needs of grandparents who are responsible for young children. The directories will be distributed statewide later this year.

- We are coordinating an ongoing effort to collect new or nearly new clothes, toys, games and books from SSA employees to share with grandparents who need this type of support in raising their grandchildren.

Family Friendly Policies and Programs

- SSA's commitment to ensuring a work environment that is family friendly and supportive of employees responsible for meeting family needs, including enhancement of early childhood development, is ongoing. This commitment is exemplified by the programs and services described above and reinforced by flexible policies, practices and procedures in place throughout the Agency.

- For example, SSA has a number of policies and programs which provide flexibility in employee work schedules and allow parents to be available for their young children at

important times. Parents utilize flextime and a variety of alterative work schedules, including credit hours, to balance their work and family obligations. Family friendly leave policies are in effect to assist employees in dealing with medical and other important family needs such as pregnancy and child birth.

- SSA continues to explore ways to expand outreach/communication mechanisms to help ensure that employees throughout the Agency have knowledge of and access to the programs, policies and services which help them balance the demands of work and family life. These efforts include providing opportunities for employees to provide feedback on and recommendations for improving the quality and expanding the scope of our efforts.

PLANNED FAMILY FRIENDLY PROGRAMS AND SERVICES TARGETING EARLY CHILDHOOD

- SSA is continuously enhancing and expanding its family friendly programs and services. The Career/Life Resource Center will continue to update and expand educational opportunities by adding new print, video and software options for employee use to encourage new ideas and fresh perspectives. New speakers from community, medical and educational resources will be added to the schedule for future seminars and workshops related to parenting and early childhood development. For example, an hour-long program on Attention Deficit Hyperactivity Disorder will be videotaped in mid-March in cooperation with the Epilepsy Association of Maryland. Copies of the videotaped program will be available in the Career/Life Resource Center and for distribution to the field.

- SSA child care centers in headquarters and Wilkes-Barre, Pennsylvania will expand their activities during the summer of 1997 to include a summer program for children ages 6-8. The Wilkes-Barre Center is also adding a new kindergarten classroom to be completed by the end of this calendar year.

- New child care centers are in various stages of planning and development throughout the country. An onsite center will open at the Northeastern Program Service Center in Jamaica, New York in the spring of 1997. It is designed to service 70 children, ages 4 months through 5 years. Funding for the center design and construction is covered by SSA's administrative budget which will also provide for future maintenance needs. An onsite child care center is currently being designed for 70 children at the Harold Washington Social Security Center in Chicago, Illinois. In addition, a center is being planned for the Office of Hearings and

Appeals in Falls Church, Virginia. This center is being established in collaboration with the Department of Defense and the Department of Agriculture and will serve approximately 75 children. Two additional centers are also under consideration for the Teleservice Center in Albuquerque, New Mexico and for the Program Service Center in Birmingham, Alabama.

- In the spring of 1997, the headquarters child care centers will provide four, hour-long workshops for all 55 of its teachers. The workshops, entitled "Success," will train the faculty to use positive techniques for managing the children's behavior and will cover all ages from infant through kindergarten.

- During the month of May, which is National Fitness and Sports Month, the headquarters child care centers will participate in special activities presented by the staff of SSA's Fitness Center. Children, ages 4 and 5, will be taught movements to enhance their fitness, strength, muscular endurance, coordination, balance and flexibility. Fitness Center staff will also guide parents and their children in physical fitness exercises they can practice at home together.

- Headquarters' EAP counselors are planning to offer a men's discussion group for clients who want to meet to talk about ways to improve family relationships. Among the issues to be discussed will be how to relate effectively to children and stepchildren as they are growing up in various family situations.

- The SSA grandparents support group is planning various events and projects for the near future including a session with an SSA public affairs specialist who will provide information and answer questions about services and programs that might provide help for grandparents and their grandchildren, such as SSI and SSA Survivors Benefits. In April, a support group meeting will include a videotape of a recent local television show, "The Bottom Line," which focused on issues for grandparents raising grandchildren. Several support group members attended the live taping of the original program.

- SSA has been working with the Maryland Department of Human Resources to assist in presenting the Second Annual Caregivers' Conference in June, 1997. The conference will include workshops covering services that help grandparents raise their grandchildren and will include events celebrating grandparents efforts to effectively parent the young children in their care.

- Evaluation and employee feedback activities will continue to ensure that our programs and services are kept up-to-date and responsive to employee needs. We will review the results of our surveys which record employee reactions and recommendations along with the results of our focus group sessions and will use these findings to improve program effectiveness and shape future initiatives.

ADDITIONAL FAMILY FRIENDLY PROGRAMS AND SERVICES TARGETING EARLY CHILDHOOD

- SSA is exploring the possibility of implementing an informational/training program for parents to help them optimize the educational process for their children. The training will focus on how to make the most out of their children's schooling. A potential source for developing a pilot instructional effort may result from preliminary contacts with the "Parenting for Education Program" based in Seattle, Washington. Initial plans would be to conduct the program at headquarters with future expansion to the field, as appropriate. Such a program, if proven effective, could also be offered in the local community; e.g., churches, PTA's, etc.