A Confluence of Collaborative Efforts

The Early Childhood Innovation Network (ECIN) was launched in 2016 by Children’s National Hospital and MedStar Georgetown University Hospital in Washington, DC. ECIN is a collaborative of health, education, community providers, researchers, and advocates promoting resilience in families and children from pregnancy through 5 years old. The network’s bold vision is to strengthen a citywide movement to promote healthy families and children through focused interventions such as ZERO TO THREE’s HealthySteps, a program embedding early childhood development experts in pediatric primary care practices. Part of ECIN’s vision was to expand HealthySteps throughout the city beyond the two sites previously established at Children’s National Hospital.

Around the same timeframe as the launch of ECIN, the Bainum Family Foundation convened providers and advocates in health and early learning as the Birth-to-Three Policy Alliance. Bainum provided funding for both practice advancements in their organizations and collective policy advancements. Representatives of ECIN, with an interest in advancing innovative health and early learning models such as HealthySteps, as well as advocates for Help Me Grow DC, were involved in the Birth-to-Three Policy Alliance from the beginning.

Through Bainum support, a previous deputy mayor for the city was hired as a consultant to the Alliance. ECIN Policy Director Sarah Barclay Hoffman, Program Manager of Community Mental Health at Children’s National Hospital, credits the foundation’s leadership with ensuring that all of the organizations worked together to advance a comprehensive system for young children.
From the beginning, Bainum was clear that we needed to look holistically and see how we could advance a more comprehensive system that not only addressed some key early learning components but also some key health care components. Bainum was also really focused on working to reduce inequities by being targeted in terms of systems and services for [the] populations most affected by systemic inequity in DC.

In 2018, two key policymakers on the DC Council introduced legislation on birth to three early learning. The Birth-to-Three Policy Alliance was ready to respond. Organizations in the Alliance provided public testimony about specific health and family support needs to complement the focus on early learning.

The Birth-to-Three for All DC Act of 2018 passed unanimously (see sidebar). As Barclay Hoffman observed, “One of the reasons we were successful is that people really did see how critical it was that we were advancing this vision of systemic change across early childhood and didn’t start pulling it apart. People really committed to focusing on the entirety of this legislation getting passed, and not in a piece-meal fashion.”

### Birth-to-Three for All DC Act of 2018

DC Law 22-179, the Birth-to-Three for All DC Amendment Act of 2018, was passed by the DC Council and became effective October 30, 2018. Key provisions included the following:

- expansion of HealthySteps to pediatric primary care providers in Wards 5, 7, and 8 that serve 50% or more Medicaid-eligible families
- establishment of Help Me Grow to serve as a comprehensive resource and referral system for child development and family support services
- expansion of home visiting services for families with young children
- expansion of Early Head Start home-based/home visiting and center-based services to homeless families with infants and toddlers residing in DC family shelters
- establishment of a Lactation Certification Preparatory Program
- development of a web-based community resource inventory for referrals and screening
- expansion of Healthy Futures early childhood mental health consultation to all child care centers serving low-income families through the subsidy program
- development of a salary scale and cost modeling analysis to increase child care subsidy reimbursements for providers and compensation for child care staff members to parity with K-12 teachers
- gradual broadening of families’ eligibility for subsidized child care and decreases in parent co-pays
- expansion of the Quality Improvement Network to increase the availability of infant-toddler child care that meets Early Head Start standards for lower-income families
- designation of Early Childhood Facility Coordinators in the Office of the State Superintendent of Education and the Department of Consumer and Regulatory Affairs
- provision of the University of DC Community College’s early childhood infant and toddler degree program through community-based child care programs

Source: [https://code.dccouncil.us/dc/council/laws/22-179.html](https://code.dccouncil.us/dc/council/laws/22-179.html)
Legislation as a Roadmap for Change

This key piece of legislation offers a roadmap for creating a comprehensive system of supports for young children’s healthy growth and development. A long-term goal of the legislation is to make high-quality early learning and health care services accessible to all DC families beginning at birth. Equity is at the core of the legislation, with an aim to address the disparities facing Black and Brown families. The three primary cornerstones of the Birth-to-Three Act are access to high-quality child care for low-income families with infants and toddlers, increased pay for early childhood educators, and access to health and developmental care for expectant parents and families with young children (see sidebar).

The DC Council secured partial funding for the legislation in the FY2019 budget, committing $1.3 million to begin to implement key components. These included expansion of HealthySteps, additional home visiting services, development of a salary scale for early childhood educators, and on-site classes for infant-toddler educators to earn advanced credentials. Government agencies administer the funds and either implement the initiatives directly or make grants to nonprofits for implementation.

Shift to Advocating for Funding and Monitoring Implementation

Once the legislation became effective, focus shifted to obtaining and preserving funding for the Act as well as monitoring its implementation, according to Ruqiyyah Anbar-Shaheen, Director of Early Childhood for DC Action for Children. To accomplish this work, a coalition was established in early 2019, with committees on legislation and revenue, research and practice, and organizing. Partners were added, particularly direct service providers and community organizers, as well as advocates, child care associations, health organizations, and other early childhood groups. The coalition spent time building consensus around the campaign’s agenda and key messages.

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— Sarah Barclay Hoffman, ECIN Policy Director

The coalition was publicly launched in February 2020 as Under 3 DC. Soon after, the backbone organization became DC Action for Children, and Ronald Jarrett was hired as the coalition Director. Based on feedback from coalition members, the committee structure was changed to two committees—one on program funding and compensation that primarily addressed early childhood care and education and one on family health supports. An executive committee governs the coalition and consists of representatives from six organizations with different perspectives and expertise.

Jarrett noted ruefully the timing of his new position:

My first day on the job was March 17, 2020. Needless to say, my first 90 days were very different from what I had envisioned just a week earlier. Walking into the budget season, we were going to ask for something a bit more aggressive. But when COVID hit, and especially once we saw the revenue projections, we realized the need to pivot to meet more immediate needs. 2020 has definitely been a year of transitions and pivoting.

Under 3 DC responded immediately to advocate for preserving essential health and education services for young children and their families. The coalition mobilized early childhood stakeholders—professionals, parents, community leaders, and business owners—to engage with policymakers online through a series of virtual town halls, rallies, and DC Council budget hearings. They also coordinated community members to write letters to government agency leaders, sign petitions, and promote funding for early childhood through social media and news stories.
Ultimately, the coalition was successful in protecting funding for health and child care. In addition, Under 3 DC was able to reverse a $5 million cut to child care subsidies proposed by the mayor, gain $1 million for early childhood mental health consultation, and make $5 million in emergency grants available to help stabilize child care programs.

Scale-Up of Components of the Legislation

Recognizing that full implementation of the roadmap in the Act could take at least a decade, the District of Columbia is continuing to scale components of the legislation as funding is available, beginning with services for families facing the most barriers to success. Family supports for the healthy development of children were some of the first services implemented, thanks to strong advocates and lower funding needs. For example, the dream of ECIN to make HealthySteps available throughout the city is slowly becoming a reality through expansion to one additional program site each year as government funding is appropriated and other resources obtained. By the end of 2021, there will be five health clinics in under-resourced areas with HealthySteps Specialists to provide screening along with child development and behavior consultations to families with infants and toddlers.

Funding for the legislation has also been used to expand Help Me Grow DC, a phone service connecting expectant parents and families of infants and toddlers with developmental screening, community services, information, and support. Since the program is operated directly by the Department of Health, it is funded through the Act but not involved in the campaign’s advocacy efforts. Help Me Grow is seen as a coordinating point, and HealthySteps is part of the coalition’s strategy of maximizing settings that are already reaching families. Other family health initiatives funded through the Act are the growth of home visiting services, including a new pilot Nurse-Family Partnership program, and the expansion of Healthy Futures to offer early childhood mental health consultation to 75 additional child care programs each year.

Beyond expansion of services, implementation of the legislation will require DC to address the broad policy question of how to create a child care system that works well for everyone, including providers as well as families. Currently, the demand for child care outstrips supply; the average cost of infant care is nearly 29% of median family income; child care subsidy reimbursement rates do not cover the cost of care; and the average salary of an early educator is far less than a living wage. When the Birth-to-Three Act is fully implemented, child care subsidies will be available to all DC families with infants and toddlers, regardless of income, and no family will pay more than 10% of their income. In addition, subsidy reimbursement rates paid to child care programs will cover the full cost of care, and early childhood educators will be compensated on par with their peers in DC Public Schools.

With so many moving parts, implementing this bold vision is a daunting task. Steps toward progress include the following:

- building a broad base of support
- advocating for increased revenue to support implementation of the law
- conducting a compensation study and developing a salary scale for the child care workforce
• expanding access to low-cost associate degree courses
• providing behavioral health consultants to support staff members and families in early learning programs
• providing home visiting services to families in most need of support
• expanding Help Me Grow and HealthySteps to reach more families
• providing support to child care programs to meet Early Head Start performance standards

Anbar-Shaheen commented about her hopes for the future:

The advocacy we do for early childhood is part of a broad vision to build a well-thought-out, loving, and just system for families in our city. Regarding child care, it would be great to create a model for a thoughtfully constructed and responsive early learning system that’s not on the backs of underpaid early educators and from the pocketbooks of families who are paying more for child care than they pay for college. My grand ambition is to move toward an approach to systems that is family-focused and well-constructed.

Hopes for the Future

In order to fulfill the vision of the Birth-to-Three Act, DC has much work ahead. Long-term sustainability and growth of the efforts will be key to success. The Under 3 DC coalition offers opportunities for early childhood providers and families to amplify their voices and be part of a change process that is meaningful to them. Already, the united front has resulted in more awareness and support from policymakers. Under 3 DC plans to continue to expand the base of interested stakeholders who are willing to advocate for increased investment in the city’s youngest children. A new bilingual community organizer has joined the team and is building partnerships between organizations and developing a story bank of families’ experiences.

Jarrett added his thoughts:

The vision that keeps me motivated is having the law be fully funded and implemented, and seeing the positive impact on families and the ripple effects on our communities and the economy. I want to see a whole generation of children who are more comfortable with people who are different from them and who are better prepared when they start third grade. That’s what I hope to see happen within the next five to ten years.

ABOUT THE MODEL CONVENING PROJECT

Four national early childhood models—Family Connects, HealthySteps, Help Me Grow, and Nurse-Family Partnership—are exploring ways to have a greater impact on young children and their families in communities where their programs overlap. The project is a multi-year initiative, with leadership and facilitation from ZERO TO THREE and funding from the Pritzker Children’s Initiative. While the four models were the starting point for the project, their local experiences reveal a broad range of community partners who play important roles in early childhood collaboration. For links to additional stories and briefs from the Model Convening Project, see the Hand in Hand Directory.

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