

The UPDATE

News and Information for MA EI providers!

January 2014



Important Dates:



Friday, January 24, 2014 DUE DATE for Mandatory Letters of Intent to apply to the MA EI RFR

Tuesday, January 28, 2014 10am DPH Monthly Webinar: Massachusetts Annual Performance Report (APR)

Monday, February 3, 2014 FFY 2012 State Annual Performance Report due date

Thursday, March 13, 2014 1:30-3:30pm Public Hearing for MA Part C application

DPH Initiative Updates:

Data Task Group

The Data Task Group met in December and provided insight into contributing factors responsible for system growth as well as provided recommendations regarding the SASID project and the EIS Client data system. The next scheduled meeting will be held in early February and will entail a discussion about BDI-2 data, the process for collecting data for SEA Notification and a review of the first 6 months of FY14 data.

SASID Project

The purpose of the Early Intervention/SASID Pilot Program is to issue a state assigned student identifier (SASID) to children participating in early intervention programs with the long-term goal of tracking and evaluating educational and developmental outcomes for these children, improving delivery of services and determining cost savings. Participation of a family is contingent upon gaining informed written consent. The project is a priority for the Department in their efforts to obtain outcome data regarding the impact and effectiveness of early intervention services. Five pilot programs have been selected to begin this process sometime in the late spring.

DaSy Project

Massachusetts has been chosen along with six other states to collaborate on the development of a framework for quality early childhood data systems for Part C and Section B 619 programs. The framework will be used as a national resource for states and will provide federal technical assistance as they lay the groundwork to build and enhance state data systems.

Announcements:

The Office of Data Translation is pleased to announce the release of the **Massachusetts PRAMS 2009/2010 Surveillance Report**. Copies of the 2009/2010 PRAMS Report are available through our office. Please let me know if you would like to receive a hard copy. The MA PRAMS Report is also available online at: <http://www.mass.gov/dph/prams>. Please help us to disseminate this report widely.

EIIS System Update

The next EIIS upgrade will occur in the spring of 2014 and will entail a version upgrade to Office Access 2010 to be run on a Windows 7 operating system. The Department has been testing the application with the transmission of data being the biggest challenge to ensure that information is sent securely from providers to DPH.

DPH is in the process of hiring a project manager and architectural designer to help in implementing a web-based version of EIIS. It is projected that a significant upgrade like this will take approximately 1-½ to 2 years before completion. EI providers will be contributors in providing the Department with input and feedback regarding this new system.

PLEASE WELCOME:

The following **new Program Directors** have been hired within the last several months:

- Judith Hahn, South Bay Early Intervention Program, Fall River, MA
- Lauren Meatty, Schwartz Center for Children Early Intervention Program, New Bedford, MA
- Margaret Finnegan, Criterion Valley EIP, Milford, MA

EI RFR –The Department has released a Request For Information (RFI) to determine the interest in providing early intervention services throughout the Commonwealth. The RFI includes those catchment areas that are open for expansion.

A **mandatory Letter of Intent** with a general description of the RFR is now posted on COMPASS. All agencies will be required to submit a letter of intent identifying the catchment area(s) where the vendor is interested in providing early intervention services. If a letter of intent is not received by the **due date of January 24, 2014** vendors will not be eligible to apply for the future RFR. Please note the Letter of Intent is required for all existing certified Early Intervention Programs as well as outside vendor agencies. Please share this information with your Executive Director and any other appropriate staff within the agency. Feel free to contact the DPH if you have any questions.

The following are the instructions to get to the posting:

1. Go onto the Internet to address: www.comm-pass.com
2. Click on the Solicitations tab.
3. Click on Search for a Solicitation.
4. Enter RFI- 500624 into the Document Number field, then press Search.
5. There are 70 Solicitation(s) found that matches your search criteria will appear at the top of the screen. Click on this link.
6. Click on the eyeglasses icon on the top line, OPEN.
7. The RFI document is posted on the Specifications tab.

Public Hearing Notice - The Massachusetts Department of Public Health, in cooperation with the Massachusetts Interagency Coordinating Council, will hold a hearing on the Commonwealth's application for 28th year funding under Part C.

PURPOSE AND BACKGROUND OF THE HEARING:

This hearing is being held for the specific purpose of discussing the Department of Public Health's 28th year grant for funding under Part C.

Part C of the Individuals with Disabilities Education Act, P.L. 108-446, provides funds to assist states in providing services for infants and toddlers with disabilities. The hearing is about Massachusetts' grant application for 28th Year funding under Part C and is open to families, service providers, and professionals serving young children and families.

The Hearing is scheduled on **Thursday, March 13, 2014 from 1:30 – 3:30 after the ICC Meeting** at the Best Western Royal Plaza Hotel and Conference Center, 181 Boston Post Road West, Marlboro, MA. A formal notice of the hearing and advertisement placed in the Boston Globe will be forwarded to providers shortly.

ICC PowerPoint Presentations - The January 9, 2014 ICC PowerPoint presentations; "Early Intervention Enrollment; Analysis for Birth Defects Cases" and "The Survey of Wellbeing of Young Children (SWYC): Development, validation, & future directions have been posted on the Parent Leaderships website at www.eiplp.org.

Save the Date – The DPH EI Program Directors Spring Session will be held on June 18, 2014. Additional information regarding the agenda, location and time will be forthcoming.

BDI-2 Reminder:

Children under 24 months old should only have raw scores entered into EIIS for the following subdomains: Self-Care (Adaptive Domain), Adult Interaction and Self-Concept Social Role (Personal-Social Domain), Receptive and Expressive Communication, Gross Motor and Fine Motor, and Attention/Memory and Perception and Concepts (Cognitive Domain).

After an EIIS data review there are over 100 records found with scores for the other subdomains (Personal Responsibility, Peer Interaction, Perceptual Motor, and Reasoning and Academics) entered by over 40 different EI programs.

EITC UPDATE



IMPORTANT: Despite multiple notices to the field regarding a deadline of December 31, 2013 for receipt of CEIS 2002 format portfolios, DPH has received some portfolios in that format after the deadline.

Please notify staff that **effective January 14, 2014**, absolutely no other portfolios will be accepted in the CEIS 2002 format.

All applicants must use the CEIS 2012 format.

Announcement: New Core Training!

Family Centered Service Coordination will be held at the Central Regional DPH Office in West Boylston on Tuesday, February 11th (snow date; February 12th)

Registration is from 9 to 9:30. The workshop begins promptly at 9:30AM and ends at 3PM.

The Early Intervention Training Center is pleased to offer a new Core Workshop in February titled Family Centered Service Coordination. This workshop was designed specifically to address the training needs of staff who “bridge” the CEIS 2002 and 2012 processes. The workshop offers competencies for staff who attended BAC prior to 2012, but who need formal knowledge source competencies offered at BAC 2012. Rather than repeating Building A Community, those staff may attend this workshop.

Workshop Description

Implementing a family-centered approach to service coordination is one of the core values of early intervention supports and services in Massachusetts. This may be a challenge to accomplish when families have diverse and often times overwhelming stresses in their lives. The nature of the Early Intervention team model also impacts on this approach. Using family systems theory and a relationship based philosophy; this workshop explores how to develop relationships with families that support them in becoming critical partners in enhancing their child’s development.

The workshop addresses the following CEIS 2012 Competencies:

1.8 EI Specialists will identify how children learn through relationships, and demonstrate knowledge of a relationship-based approach to interventions and outcomes.

3.6EI Specialists will demonstrate an understanding of family dynamics, and the impact on a family of having a child with a developmental delay or disability.

5.4 EI Specialists will demonstrate knowledge of, and ability to network with, public and private providers in order to assist the family in accessing a variety of individualized services and resources, including but not limited to financial, specialty service, health, social, and developmental.

7.1 EI Specialists will demonstrate an understanding of roles, functions, and dynamics of teams within Early Intervention.



BDI-2 Roundtable Discussions

The EI Training Center is offering 4 round table discussions around the state facilitated by our BDI-2 mentors. These discussions will focus on 1 of 2 topics:

- Giving Feedback to Families
- Using the Interview Procedure

Who should attend: EI specialists who are using the BDI-2 regularly and feel confident in the administration of the tool, but have clinical questions or concerns about giving feedback or the interview procedure. This will be an opportunity to have discussions with peers from other programs.

When and Where:

Taunton Area Early Intervention: Using the Interview Procedure

January 28th from 1-3pm

Associates in Human Services

68 Allison Avenue Taunton, MA 02780

Step One Early Intervention: Using the Interview Procedure

February 11th from 2:45 to 4:45pm

South Shore Mental Health, 3rd floor training room

500 Victory Road, Quincy, MA 02171

REACH Early Intervention: Giving Feedback to Families

February 24th from 1-3pm

Nonotuck Mill Conference Room

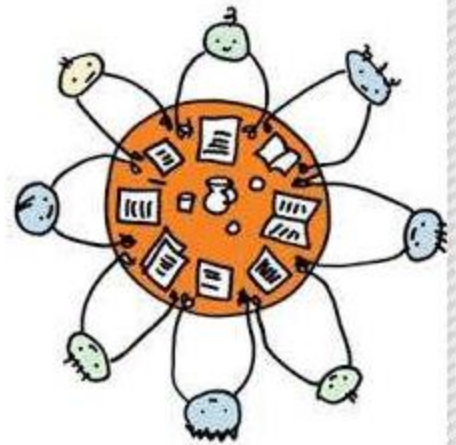
296 Nonotuck St. Florence, MA 01062

Enable Early Intervention: Giving Feedback to Families

March 4th from 12:30-2:30pm

Enable, Inc Administrative Office

605 Neponset Street, Canton, MA 02021



Email: noah.feldman@state.ma.us to **register**, space is LIMITED!

Transitions for toddlers when residency is not clear

Mary Dennehy-Colorusso



Recently, a program director called with questions related to a school district's responsibility to conduct an evaluation to determine eligibility for Part B services. Through an informal arrangement of necessity, a toddler was living with her grandparents. The child's parents were living in another city in an apartment that could not accommodate the child. There was no DCF or family court involvement or assignment of guardianship to the grandparents; the child's parents retained full legal custody, but were unable to have the child live with them in their apartment. The school district where the grandparents lived placed responsibility for the evaluation on the city where the parents were residents. The city where the parents lived disagreed, believing the responsibility for the evaluation rested with the city (school district) where the child was a resident.

DPH consulted with colleagues at DESE for some additional guidance. *Note: While the Massachusetts laws and regulations would apply to every child residing in Massachusetts, this guidance is specific to the example above. Programs should consult Program Quality Assurance at the Massachusetts Department of Elementary and Secondary Education should questions/issues arise at their program. (see below)*

State law (at G.L. c. 76, § 1) states, "[e]very person shall have the right to attend the public schools of the town where he actually resides." In the example above, because the child is residing with the grandparents, the town where the grandparents live would be responsible for conducting the evaluation because it is the child's district of residence. There is no requirement for any formal agreement between the parents and grandparents – it is where the child lays her head on the pillow at night. Guardianship to the grandparents need not be assigned.

State special education regulations (603 CMR 28.10, specifically) stipulate programmatic and financial responsibility for implementing the IEP of a school-age eligible child after he or she turns 3. School districts are programmatically and financially responsible for eligible students based on residency and enrollment. Based on the individual circumstances in the scenario discussed above, programmatic and financial responsibilities might be shared between the district where an eligible child lives and where the parents live. The grandparents' school district (where the child lives) may be programmatically responsible and the district where the parents reside may be financially responsible on the basis of the requirements in 603 CMR 28.10(4), which reads in relevant part:

603 CMR 28.10(4), **Shared school district responsibility.** The school district where the parent(s) or legal guardian resides shall have financial responsibility and the school district where the student resides shall have programmatic responsibility when a student is in a living situation other than that described in 603 CMR §28.10(2) or (3) including but not limited to a relative's home that is not funded by the Department of Children and Families, a foster home funded by the Department of Children and Families that is located outside of Massachusetts, a group home, a residence or crisis or respite facility funded or supervised by a state agency, and an approved residential special education school as a result of action by the Department of Children and Families.

(a) When such a student is served in an in-district program, the school district where the student lives shall provide such services and may bill and shall receive payment for the special education costs (using the procedures of 603 CMR 10.07 to calculate such costs, including transportation expenses where applicable) from the school district where the parent(s) or legal guardian resides, unless such student is over 18 years of age and has established his or her own residence as an adult as described in 603 CMR 28.10(2)(b).

(b) When such a student is served in an out-of-district program, the school district where the parent(s) or legal guardian resides shall pay the tuition costs for the student's IEP program directly to the out-of-district school, and such other payments as may be required to other individuals or entities that provide services required by the student's IEP.

(c) In all cases where financial and programmatic responsibility are shared, the school district where the student resides shall invite the school district where the parent(s) or legal guardian resides to participate as a member of the student's Team, provided that such participation shall not limit the student's right to timely evaluation and placement in accordance with 603 CMR 28.00.

However, if guardianship transfers to the grandparents, it is possible that the district where the child lives with the grandparents would have both programmatic and financial responsibility on the basis of 603 CMR 28.10(2)(a). This regulation provides that when a student lives with his/her legal guardian, the school district where the student resides will have both programmatic and financial responsibility for special education.

EI programs are encouraged to contact Program Quality Assurance at the Massachusetts Department of Elementary and Secondary Education (ESE) with family/child specific questions related to residency. A listing of PQA staff (by district) can be found by following this link:

http://www.doe.mass.edu/pqa/prs/specialist_list.html.

Additionally, the ESE has authority to assign, or a school district or agency may request, the Department's assistance in assigning a city, town, or school district to be responsible for students' special education in specific situations where the student's residency, or that of the parent or legal guardian, are in issue. These inquiries may be directed to the Special Education Planning and Policy Development office at ESE the Department at 781-338-3375.

Specialty Services Update:

"School Success for Haitian Children with Autism" - A manual that describes the Mass Advocates autism center's outreach, training and advocacy strategies to help ensure that underserved families of Haitian descent obtain services that are essential to their child's development and treatment - is downloadable at www.massadvocates.org

The only website backed by 60,000 American Academy of Pediatrics member physicians, www.healthychildren.org offers the most reliable, up to the minute health advice for proactive parents and caregivers, including

- an interactive Symptom Checker to help you determine whether or not you need to call the doctor
- an "Ask the Pediatrician" tool with answers provided by AAP experts
- tips, tools, schedules, checklists and much more



Women, Infants and Children (WIC) Nutrition Program

1-800-WIC-1007 or 617-624-6100

The Massachusetts WIC Nutrition Program works in collaboration with community health care providers and other health and human service agencies to provide coordinated, comprehensive services to families in need.

WIC is a health and nutrition program that provides personalized nutrition consultation, checks for free healthy food, breastfeeding support, and referrals for medical and dental care, health insurance, child care, housing, fuel assistance, and other services that can benefit the whole family. WIC also provides immunization screening, and distributes coupons for fresh produce, redeemable at farmers' markets.

WIC's goal is to help keep low- to moderate-income families healthy. Eligible applicants for WIC must be a pregnant, breastfeeding or postpartum woman, have an infant or children under age five; live in Massachusetts; have a total household income of less than 185% of the federal poverty level, and be at nutritional risk. Nutritional risks include health problems such as abnormal weight gain during pregnancy, low birth weight or inadequate growth and development during early childhood, homelessness and migrancy.

The 35 local WIC programs have staff that speak a wide variety of languages necessary to meet the needs of the communities they serve. WIC brochures and nutrition education materials are also available in many languages. All local programs have handicap accessible sites. In addition, all of the local programs have Community Coordinators that are available to present WIC eligibility information to your staff and/or bring resource materials to your location.

As EI providers, please take the opportunity to share this valuable information about the multitude of benefits provided by the WIC Nutrition Program to your EI families.

For more information about WIC, contact the local WIC program in your area or call 1-800-WIC-1007 or visit www.mass.gov/wic. Follow us on twitter @MassWIC.

Notice of Opportunity: *The Infants, Toddlers and their Families Interdisciplinary Certificate Program* at Gallaudet University

Applications for the ITF Program are now being reviewed. Get your applications in by February 1, 2014.

The Infants, Toddlers and their Families Interdisciplinary Certificate Program at Gallaudet University in Washington, DC is now accepting applications for their new cohort that will begin in May 2014. The first course begins with a 3-day on campus introduction and orientation to the program May 17, 18 and 19. Applications should be submitted by February 1, 2014 to guarantee a place in the program. Students may obtain either graduate credits or professional studies training credits.

For more information about the ITF program and how to apply for graduate credits, click on the following link:

<http://gradschool.gallaudet.edu/programs/c-itf>

For information about the program and how to apply for PST credits, click on the following link:

http://www.gallaudet.edu/CCS/Certificate_Programs

Please visit our facebook page <https://www.facebook.com/GallaudetITFProgram> or contact us at ITF@gallaudet.edu for more information.

[Download our most recent newsletter.](#)

New Summers & Online School Counseling Program!

A new Gallaudet University Summers & Online School Counseling program will start in the summer of 2014. This 3-year program will result in both the school counseling M.A. and the Deaf and Hard of Hearing Infants, Toddlers, and their Families: Leadership and Collaboration Interdisciplinary Graduate Certificate (ITF Program). *Students who are accepted into both programs will receive grant funds to support full tuition, plus summer room and board for the 3-year program.*

For more information about the Summers & Online School Counseling Program, please contact Dr. Linda Lytle

Linda.Lytle@gallaudet.edu

Brain Matters

Research into how the brain develops is shaping early childhood policies and programs.

BY ROBYN LIPKOWITZ AND
JULIE POPPE

A simple marshmallow test can tell us a lot about brain development. The test goes like this: An adult seats a young child at a table with one marshmallow on a plate and says, “Sit here with the marshmallow for a few minutes, and when I return I will bring another marshmallow and you can have both to eat.”

Each child is observed using a variety of cute and inventive strategies to cope with the command. Some children smell the marshmallow, many hold it, a few dance in their chairs and some just eat it. The older the child, the greater variety of strategies he or she demonstrates to resist the temptation.

What does this test tell us? According to neuroscientists, the marshmallow test illustrates how well-developed a child’s self-control is—one of a set of “executive function” skills that include the ability to focus, filter distractions, remember and use information, plan ahead, adjust, resist temptation, delay gratification and persevere for long-term goals.

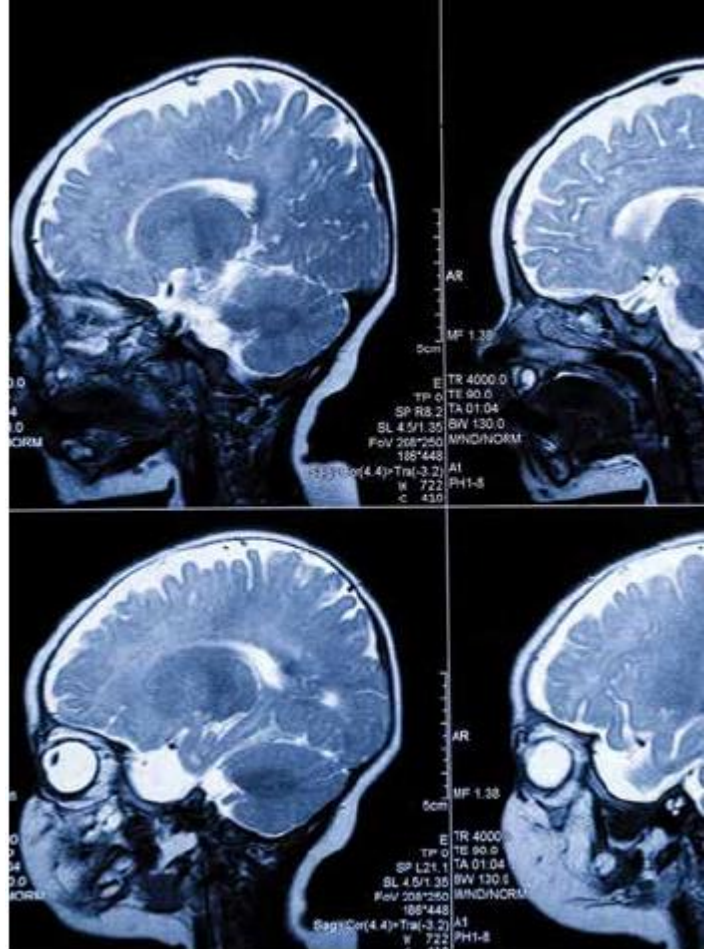
“Having executive function in the brain is like having an air traffic control system at a busy airport to manage the arrivals and departures of dozens of planes on multiple runways,” is how the Center on the Developing Child at Harvard University describes it.

Research into how the brain develops has produced new evidence that these skills are “essential for school achievement, for preparation and adaptability of our future workforce, and for avoiding a wide range of population health problems,” according to a 2012 report by the Harvard center. A growing body of research indicates that the more developed these skills are, the more likely the child is able to process what he or she reads, writes or computes, and thus succeed at school.

In fact, these skills are a greater predictor for school achievement than “a child’s IQ score or social class,” says Deb Leong, a child researcher and retired professor of psychology at Metropolitan State University of Denver.

Increasing evidence of what works and how much money can be saved in the long term, coupled with this recent neuroscience research on how the brain develops, have combined to capture the attention of policymakers around the country.

State lawmakers are beginning to ask how this new knowledge can (or even if it should) influence policy decisions in early childhood development, spurring a growing interest in programs



such as high-quality child care, pre-kindergarten and home visiting.

The Developing Brain

Scientists have discovered that the most rapid period of brain development occurs in the first few years of life. During this time the basic architecture of our brain is being constructed through an ongoing process that begins at birth and continues into adulthood.

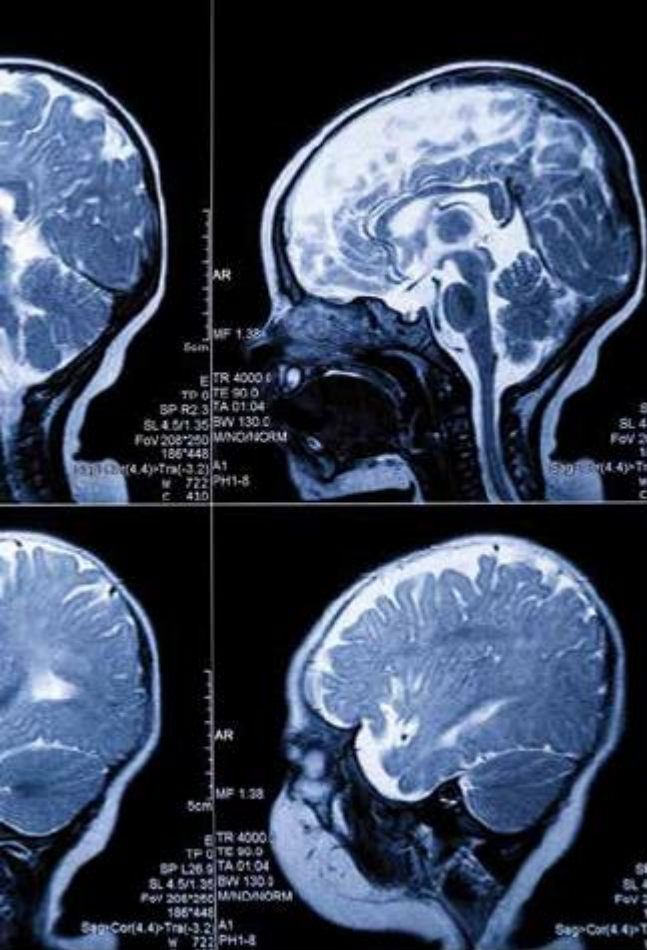
To illustrate what is meant by brain architecture, think in terms of building a house. First the foundation is laid, then the basic frame goes up, followed by more complicated electrical wiring and plumbing. The construction goes from the basic to the complex. But it begins with the foundation; if it is unsteady, the entire structure is weak. The same goes for the brain.

According to Jack P. Shonkoff, director of Harvard’s Center on the Developing Child, the quality of the foundation built in early childhood, whether it is strong or fragile, affects future development, health, learning and economic success. With a strong foundation, babies move easily through more and more complex learning stages. And “although it’s never too late to learn new skills since the brain never stops developing, it’s just harder and less effective to build on a weak foundation than it is to get development right the first time,” says Shonkoff.

From birth, babies’ brains require responsive and caring relationships with adults in nurturing, stimulating environments. The type and quality of interactions a child has—from the earliest years of life—with his or her parents and other caregivers is one of the most important factors in building the brain’s foundation.

Scientists call these “serve and return” interactions. Like a game of tennis, babies “serve” opportunities to interact through

Robyn Lipkowitz directs NCSL’s Early Care and Education project. Julie Poppe tracks early childhood issues for NCSL.



facial expressions and eye contact, coos and babbling. For healthy development, parents and caregivers “return” the serve with words, songs, facial expressions, any number of things. For many, these back-and-forth exchanges come naturally. But what science has confirmed is that they are not only natural, but critical to forming the connections between brain cells and across areas of the brain needed for building sturdy brain architecture.

These nurturing relationships buffer children from the affects of stress. Without these interactions, children’s brains are at risk of developing without a strong foundation. Normal stress is an inextricable part of life, even for young children, and learning how to cope with minor adversity is important for healthy development. But if the stress results from serious adversity such as abuse, neglect, parental mental illness or chronic poverty and continues for long periods of time, without supportive adult relationships, it can be toxic to young children’s developing brains.

This kind of extreme stress can disrupt the development of brain circuits that control emotions and executive functions and increase the risk for learning difficulties, behavior problems and stress-related diseases that can last into adulthood. On the other hand, when adults have strong executive function skills, they are better able to avoid family chaos, cope with adversity, and make needed adjustments.

But just as children are not born knowing how to read and write, neither are they born with fully developed executive function skills. These skills are built over time through modeling and practice, starting in infancy and building throughout childhood and well into adulthood.

How Does Executive Function Affect Behavior?

If nurtured, the brain develops all-important “executive function skills,” which include the ability to focus, filter distractions, self-regulate, plan ahead, adjust to changes, control impulsivity, resist temptation, delay gratification, and remember, organize and use information. These skills are essential in several areas of life by helping children and adults to:

School—remember and follow complicated instructions, avoid distractions and control rash responses.

Behavior—develop teamwork, leadership, decision-making and critical thinking skills.

Health—make good choices about nutrition and exercise, resist the pressure to engage in risky behavior and be conscious of others, including their children’s safety.

Employment—acquire good organizational and problem-solving skills and adjust to changes in circumstances.

Source: *The Center on the Developing Child at Harvard University. “In Brief: Executive Function Skills for Life and Learning,” Feb. 2011*

Practical Application

Washington has taken the lead in incorporating brain science and the importance of executive function into its policies. The Washington Legislature, the governor and state agency department heads are now using a “science-based” perspective and approach when legislating or adopting early learning policies and laws. Guidelines were changed to incorporate the importance of promoting the development of executive function and self-regulatory skills in very young learners.

For example, some of the guidelines look specifically at how turn-taking games and certain kinds of directions given from early childhood teachers can encourage children to develop self-control mechanisms.

Washington also developed an online training program as part of its professional development requirements for early childhood teachers that includes an explanation of the brain’s executive function and describes the effects of trauma on child development. The online videos show preschool teachers in classrooms demonstrating the kinds of lessons that help develop self-regulation skills.

In addition, the Washington Health Care Authority incorporated executive function information into training materials for managed-care organizations that serve Medicaid patients. And to lessen the stress on families, the state’s Department of Social and Health Services has shifted to a greater focus on helping welfare families find a viable way out of poverty.

“We needed to recognize the damage toxic stress can have on children,” says Washington Representative Ruth Kagi (D), chair of the Early Learning and Human Services Committee. “We pay dearly when children are not ready to learn.”

Washington is also one of 17 states with a federal waiver to test innovative child welfare programs. Washington’s waiver allows the use of an alternative response to families

Levels of Stress

Toxic

Prolonged activation of stress response systems in the absence of protective relationships

Tolerable

Serious, temporary stress responses, buffered by supportive relationships

Positive

Brief increases in heart rate, mild elevations in stress hormone levels

Source: *The Center on the Developing Child at Harvard University*



Representative
Ruth Kagi (D)
Washington

at-risk of entering the child welfare system. Instead of having to follow a strict protocol when responding to reports of child abuse or neglect, the new procedures allow child protective services to respond more appropriately depending on the specific circumstances of each family.

Families determined to be at a low risk for child abuse or neglect, for example, are allowed to keep their children with them at home, but are offered alternatives to a traditional child welfare investigation such as treatment for drug or alcohol abuse.

“As our state legislature focuses on school readiness and achievement, plus workforce development, it is important that we consider what science tells us about how children’s brains develop,” says Kagi. She sponsored legislation in 2011 that put together a planning group that included the governor, state legislative leaders and agency directors to focus on policies and investments that would lessen the effects of harmful childhood experiences.

Legislative Interest Grows

Other states are beginning to follow Washington’s lead, acknowledging the sensitivity of early brain development and the harm that toxic stress can have on children’s development.

In 2010, Vermont lawmakers established the Building Bright Futures Council to act as an early childhood advisory body and promote policies based on research from the Center on the Developing Child.

Hawaii passed legislation that cites scientific research to support intensive home visiting services for at-risk families and hospital-based screening and assessments. And last year, Texas lawmakers as well created a home visiting program to help children at risk for abuse and neglect and other family difficulties. The program sends trained workers regularly to homes to provide support, guidance and training in good parenting skills, among other things.

Minnesota lawmakers considered reforms last year to the state’s Family Investment Program and the child care assistance program. The proposed changes were based on research that brain development during the first five years of life is critically important and that traumatic experiences can harm the way a child’s brain develops.

And most recently, Wisconsin lawmakers passed a joint resolution to

“We know that children do not begin learning when they enter kindergarten—it really starts at birth.”

—WASHINGTON SENATOR STEVE LITZOW (R)

Early Childhood Brain Development

By the Numbers

700

The number of new neural connections made every second during the first few years of life

18 months

Age when disparities in vocabulary first appear in children; differences correlate with parents’ educational level and income.

90% – 100%

Chance of developmental delays in children with at least six toxic stresses, such as poverty, maltreatment, single parent, mental illness of caregiver, etc.

\$4 – \$9

The range of savings for every dollar invested in early childhood programs for low-income families

Source: *The Center on the Developing Child at Harvard University*

“This scientific evidence has transformed both the conversation and the players around early learning.”

—WASHINGTON REPRESENTATIVE RUTH KAGI (D)

base future policy decisions on the research findings of early childhood brain development and the effect of toxic stress on child development.

Investing in What Works

Improving the lives of children can also save states money down the road. Several rigorous studies have found that high quality early childhood programs for low-income families have the potential to produce long-term savings by reducing the demands for special education services and welfare benefits, preventing future criminal behavior and increasing future incomes. All this can amount to savings ranging from as low as \$4 to a high of \$9 for every \$1 invested.

Nobel Laureate James Heckman, professor of economics at the University of Chicago, stresses that nurturing, positive early development is as important to children’s futures as is a good education. He claims that investing early in children’s lives increases productivity and personal incomes, improves health, supports greater upward mobility and reduces social costs.

All this brain development “science provides hard data to help shape the decisions we make in Olympia,” says Washington Senator Steve Litzow (R), chairman of the Early Learning & K-12 Education Committee.

“We know that children do not begin learning when they enter kindergarten—it really starts at birth. If we want students to be successful in school, they need to be engaged and actively learning at an early age,” he says.

The ability to develop executive function skills is dependent on healthy brain development and the presence of caring responsive adults. How well children learn depends on their ability to pay attention, follow directions and manage their impulses.

“The longer a child can resist the marshmallow, the greater chance he or she has at succeeding in school, and leading a healthy, happy, successful life,” says Representative Kagi.

“And that is good for us all.”



Senator Steve
Litzow (R)
Washington

SL ONLINE

For more information on how brain research is driving early childhood policies, to www.ncsl.org/magazine.

