

A Continued Call to Action:

Building a Comprehensive Birth-to-Three Strategy in the District of Columbia





Introduction

Washington, DC is known for its work supporting preschoolers. The District has been serving young children in publicly funded programs for more than half a century and was one of the first jurisdictions in the country to offer universal preschool for both three- and four-year-olds. When it comes to preschoolers, DC is elevated as a model.



D.C. was one of the first places in the country to make universal preschool a public good, and doing so called into question why the same isn't true for babies.

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But the District has a lesser-known story to tell about how it approached, and succeeded in, supporting infants and toddlers and their families. Over the past 15 years, DC's early childhood advocates, providers, families, and many community partners intensified their efforts to create a comprehensive birth-to-five system and secure the necessary investments to see that system through to successful implementation. These efforts have been particularly successful over the past three years — a function of the early childhood community strategically capitalizing on a confluence of factors, including setbacks.

Among those setbacks is COVID-19. The pandemic initially limited the District's birth-to-three efforts. The urgency to address the destabilizing effects of the shutdown pushed back other priorities, including funding for infant/toddler supports. At the same time, the COVID-19 pandemic also drew new attention to the crucial importance of child care across a wider range of collaborators throughout both the District and the country. Further, two months into the pandemic, George Floyd's murder forced the country to reckon with our history of systemic racism, including the resulting disparities that mark the child care industry. That attention helped create the political will to re-engage in efforts to support infants and toddlers and galvanized an infusion of federal resources dedicated to early care and education. While still under the shadow of the pandemic, the District's leaders secured investments that could place its support for infants and toddlers on par with its support for preschoolers.

Through this brief, we share DC's infant/toddler story — the recent investments and decisions, the evolution of its approach and strategies, and the people who made this progress possible. As other state and community leaders seek to create comprehensive systems of care for young children and their families, DC's story shows what the future might look like.

Investing in comprehensive birth-to-three supports

In 2021, the DC City Council approved the Budget Support Act of 2022, which granted funding for a suite of strategies that could fundamentally change how the District supports infants and toddlers and their families. These strategies span early care and education, economic security, and family wellbeing, creating a fledgling safety net of comprehensive supports. Those supports include increased compensation for early educators, as well as additional economic support for families with young children: expanding the state earned income tax credit (EITC), extending universal paid leave, and creating "baby bonds."



Over the past several years, the DC Council has demonstrated its commitment to expanding quality of and access to early childhood education, by passing new laws and making historic investments. Those of us with young children, especially, deeply understand the importance of quality childcare for working families and our entire economy.

Councilmember Brianne K. Nadeau, chairperson of the Committee on Human Services

One of the primary wins for infant/toddler care increased early educator compensation. The Council approved both a structure and a funding stream to increase early educator compensation across the District. The Council created the Early Educator Equitable Compensation Task Force — composed of families, operators and providers, educators, representatives from the Council and the Office of the State Superintendent of Education (OSSE), and other early childhood partners — to develop an employee pay scale for early educators and make recommendations for its implementation. At the same time, the Council approved a new fund, dedicated solely to providing the resources necessary to implement the pay scale and increase the minimum compensation for early educators. Nearly \$54 million will be deposited into the Fund in FY2022; at full investment, in FY2025, the fund will include nearly \$75 million in local dollars, adjusted annually for inflation after that point. Taken together, the pay scale and committed funding place the District at the forefront of state efforts to systematically, sustainably increase early educator compensation.

^{1 &}quot;DC Act B24-0285, Title I Subtitle K; Title V Subtitle K," DC Council, accessed February 8, 2022, https://lims.dccouncil.us/ downloads/LIMS/47312/Signed_Act/B24-0285-Signed_Act.pdf.

The Task Force released its initial recommendations in January 2022 and a final report in March 2022. The Task Force recommended that the District award early educators with one-time supplemental bonuses in 2022, and that the District enact a salary scale for early educators as a long-term strategy moving forward. In the final report, the Task Force outlined a proposed salary scale that would put early educators' salaries on par with the pay scale for DC Public Schools' teacher pay scale.



As the leader of an early childhood provider, what kept me up at night is that early educators — who are primarily Black and brown women who dedicate their lives to children — are not fairly compensated. That reality, juxtaposed with the cost of living and paying for child care in D.C., means that we are asking these women to sacrifice their families to support other families. Compensation is key to shifting that dynamic.

Marla Dean, former Executive Director of Bright Beginnings, member of the Early Childhood Educator Compensation Task Force, CEO Dean's List Consulting

The Council also invested in strategies that provide economic support for families with young children: expanding the state earned income tax credit (EITC), extending universal paid leave, and creating "baby bonds."

Expanding DC's state EITC match creates a guaranteed "monthly basic income" for low-income families.³ Through the state EITC, the District uses local funds to match a portion of the federal EITC. For the past several years, the District matched 40 percent of the federal EITC, disbursing the funding as a tax credit or, for families whose income falls below the match amount, a direct payment for the difference. At that point, DC offered one of the highest state EITC matches. When the Council passed the Budget Support Act of 2022, it made DC's state EITC the most generous in the country.⁴ The Council increased the District's EITC match to 70 percent for 2022; starting in 2026, the District will increase the match to 100 percent, doubling the federal EITC for eligible families. Further, for families that receive refunds, the District will disburse funding in monthly installments rather than in one lump sum at the end of the year.

When DC first instituted universal paid leave for private sector employees in 2016, employees had access to up to eight weeks of parental leave, six weeks of family leave, and two weeks of personal medical leave. Across those categories, an employee could take up to eight weeks of paid leave during a given year. This past year, the Council extended personal medical leave to up to six weeks, added two weeks of prenatal care, and explicitly named pregnancy loss as a qualifying event for personal medical leave. The Council also extended the maximum leave allowed over the course of a year from eight weeks to ten weeks for individuals who take both parental and prenatal leave.⁵

^{2 &}quot;Lims.dccouncil.Final Report of the Early Educator Equitable Compensation Task Force." https://lims.dccouncil.us/downloads/LIMS/49122/Introduction/RC24-0154-Introduction.pdf.

^{3 &}quot;DC Act B24-0285, Title VII Subtitle K, DC Council, accessed February 8, 2022, https://lims.dccouncil.us/downloads/LIMS/47312/Signed_Act/B24-0285-Signed_Act.pdf.

⁴ Richard C. Auxier, "What States can Learn from the District of Columbia's EITC Expansion," Tax Policy Center, August 23, 2021, https://www.taxpolicycenter.org/taxvox/what-states-can-learn-district-columbias-eitc-expansion.

^{5 &}quot;Universal Paid Leave Emergency Amendment Act of 2021," DC.gov, accessed February 9, 2022, https://ohr.dc.gov/page/universalpaidleave.

Finally, DC's newly funded "baby bonds" are designed to assist in bridging the racial wealth gap between Black and White families in the District.⁶ Baby bonds function as a trust fund for children from families who earn less than 300 percent of the federal poverty level. The Council committed \$32 million to the program, starting in 2022.⁷ Baby bonds will initially be seeded with \$500; the District will deposit up to \$1,000 annually into the trust fund until the child turns 18, as long as the family continues to live in the District and earns below the income ceiling. Upon turning 18, the child can access the money in the fund and apply it toward wealth-building activities, including education, ownership or investment in a District business, property ownership in the District, or retirement savings.⁸

Each of these strategies supports infants and toddlers and their families. Adequate compensation is crucial for recruiting and retaining effective infant and toddler educators; infant/toddler educators, as one of a child's first caregivers, help shape early brain development. Economic insecurity during early childhood is linked to lower cognitive, social, and health outcomes. Studies suggest that the EITC can have positive effects on birth outcomes and household earnings, reduce child poverty and racial disparities in birth weight, and help parents' ability to work. Increases in family income for children under age five has long-term effects on children's education outcomes. Paid family leave policies have similarly positive effects on child outcomes, alongside the demonstrated benefits for families, including economic stability and maternal mental health.

DC's recent wins in supporting infants and toddlers and their families build on decades of strategic, intentional, and patient progress toward creating a truly comprehensive birth-to-five early childhood system. Indeed, DC's first foray into serving young children was more than 80 years ago, and the District has expanded its works with young children ever since.

^{6 &}quot;The Color of Wealth in the Nation's Capital," Urban, accessed February 9, 2022, https://www.urban.org/research/publication/color-wealth-nations-capital.

^{7 &}quot;Child Wealth Building Emergency Declaration Resolution of 2021," DC Council, accessed February 9, 2022, https://lims.dccouncil.us/Legislation/PR24-0412.

^{8 &}quot;Fiscal Impact Statement – Child Wealth Building Act of 2021," DC Council, accessed February 9, 2022, https://lims.dccouncil.us/downloads/LIMS/47105/Other/B24-0236-FIS_Child_Wealth_Building_Act.pdf.

⁹ Kyong-Ah Kwon, Adrien Malek, Diane Horm, and Sherri Castle, "Turnover and Retention of Infant-Toddler Teachers: Reasons, Consequences, and Implications for Practice and Policy," Children and Youth Services Review 115, (August 2020): 105061, https://www.sciencedirect.com/science/article/abs/pii/S019074091931504X?via%3Dihub.

^{10 &}quot;Executive Function: Skills for Life and Learning," Developing Child, accessed February 9, 2022, http://developingchild.harvard.edu/resources/inbrief-executive-function.

¹¹ Maureen M. Black, Christine Reiner Hess, and Julie Berenson-Howard, "Toddlers from Low-Income Families Have Below Normal Mental, Motor, and Behavior Scores on the Revised Bayley Scales," Journal of Applied Developmental Psychology 21, no.6, (November – December 2000): 655–666, https://doi.org/10.1016/S0193-3973(00)00059-9.

^{12 &}quot;State Earned Income Tax Credit," PN3 Policy, accessed February 9, 2022, https://pn3policy.org/policy.org/policy-clearinghouse/2021-state-earned-income-tax-credit.

¹³ G.J. Duncan, P.A. Morris, and C. Rodrigues, "Does Money Really Matter? Estimating Impacts of Family Income on Young Children's Achievement with Data from Random-Assignment Experiments," Developmental Psychology 47, no. 5, (2011): 1263–1279, https://doi.org/10.1037/a0023875.

¹⁴ Tara O'Neill Hayes and Margaret Barnhorst, "How Children Benefit from Paid Family Leave Policies," American Action Forum, June 9,2020, https://www.americanactionforum.org/research/how-children-benefit-from-paid-family-leave-policies.

¹⁵ Alexandra Boyle Stancyk, "Does Paid Family Leave Improve Household Economic Security Following a Birth? Evidence from California," Social Service Review 93, no. 2 (June 2019), https://www.journals.uchicago.edu/doi/full/10.1086/703138.

^{16 &}quot;Paid Family Leave: How Much Time is Enough?" New America, accessed February 9, 2022, https://www.newamerica.org/better-life-lab/reports/paid-family-leave-how-much-time-enough/maternal-health-and-wellbeing/#.



A strong foundation, built over decades

DC has a deep history of investing in early care and education. As part of federal funding during World War II, the District operated centers for the children of women employed in defense industries.¹⁷ In the 1960s, D.C. served as a pilot site for Head Start and the District of Columbia Public Schools (DCPS) received funding as a Head Start grantee. In 1972, DCPS began dedicating resources from the school-funding formula to serving four-year-olds.¹⁸

Since then, early care and education providers across the District expanded enrollment of young children. Over the past 15 years, however, DC families have seen notable support and investments in early care and education. This section walks through the evolution of the District's birth-to-five system and the key decisions and efforts that drove that progress.

¹⁷ Christina A. Samuels, "1940s-Era Universal Child Care Program Had Positive Effects on Children," Ed Week, January 15, 2014, https://www.edweek.org/teaching-learning/study-1940s-era-universal-child-care-program-had-positive-effects-on-children/2014/01.

Abby J. Cohen, "A Brief History of Federal Financing for Child Care in the United States," Jstor, accessed February 9, 2022, https://www.jstor.org/stable/1602417.

¹⁸ Bernardine H. Watson, "A Case Study of the Pre-K for All DC Campaign," Foundation for Child Development, November 2010, https://www.fcd-us.org/assets/2016/04/Pre-K-for-All-DC-Case-Study.pdf.

2006 - 2012: OPPORTUNITIES WITHIN CHALLENGES

D.C.'s recent progress in early childhood is in part a function of the District's ability to learn from and adapt after encountering challenges.

In the early 2000s, advocates in the District rallied together to pursue a more comprehensive early childhood agenda that included all children, birth through age five. In 2008, these efforts proved successful when the Council passed the Pre-K Enhancement and Expansion Act, otherwise known as Pre-K for All. The legislation committed funding, through the Unified Per Student Funding Formula, to provide universal access to preschool four-year-olds and three-year-olds. DC was one of the first jurisdictions in the country to extend preschool to such a broad swath of three-year-olds. Pre-K for All was unequivocally a win for preschoolers and their families, shown to increase women's labor force participation by 10 percentage points between 2008 and 2016.¹⁹

Pre-K for All also increased access to funding for community-based providers. The legislation required that 25 percent of new preschool programs be operated by community-based providers, disbursed to providers through grants. This component of the legislation was a strategy to establish a more comprehensive and inclusive early childhood ecosystem and sought to improve program quality across the District.²⁰

Despite these efforts community-based providers were less likely to access UPK funding. Two factors precipitated this reality: First, community-based providers could only access UPK funding by proactively applying for grants, a process that was less efficient and more politically complicated than the funding formula.

Further, the existing preschool programs were primarily located in district and charter schools, and three- and four-year-olds continued to concentrate in public school settings, away from community-based providers. As a result, the enrollment in community-based providers shifted: they served fewer three- and four-year-olds and became composed primarily of infants and toddlers. This shift is noteworthy, because most community providers' business models rely on revenue from three- and four-year-old care to offset the higher cost of care for infants and toddlers. Without three- and four-year-old enrollment, community-based providers had few options: increase tuition, enroll fewer children, reduce quality, or close.

Taken together, Pre-K for All created incentives that jeopardized access to quality care for infants and toddlers. In a proactive move to obviate negative effects on infant/toddler care, Pre-K for All required that five percent of annual improvement dollars go to improving the quality of infant/toddler programs²² — but that strategy was not enough.

¹⁹ Rasheed Malik, "The Effects of Universal Preschool in Washington, D.C.," American Progress, September 26, 2018, https://www.americanprogress.org/article/effects-universal-preschool-washington-d-c/.

²⁰ Pre-K Enhancement and Expansion Amendment Act of 2008 (the Act), effective July 18, 2008 (D.C. Law 17-202; D.C. Official Code §§ 38-271.01 et seq.).

²¹ Simon Workman, "Where Does Your Child Care Dollar Go?" American Progress, February 14, 2018, https://americanprogress.org/issues/early-childhood/reports/2018/02/14/446330/child-care-dollar-go/.

²² Pre-K Enhancement and Expansion Amendment Act of 2008 (the Act), effective July 18, 2008 (D.C. Law 17-202; D.C. Official Code §§ 38-271.01 et seq.).



Yet through these unintended consequences, Pre-K for All also built a foundation for future birth-to-three efforts by garnering overall support for early childhood and revealing the fragility of the early care and education system. In other words, Pre-K for All presented challenges, and simultaneously created momentum around further investments in infant/toddler care and identifying the issues that those investments must address

Other efforts to support three- and four-year-olds precipitated changes in the District's infant/toddler care landscape. In 2009, DCPS implemented the Head Start School-Wide Model, designed to blend Head Start and local funding to provide Head Start's comprehensive services in all DCPS Title 1 elementary schools, specifically for preschool-age children. This model is no longer implemented but again, community-based providers adapted. In particular, the United Planning Organization — one of the first Head Start grantees in the country — converted its Head Start slots into Early Head Start and further expanded the program to serve more infants and toddlers. In doing so, the program avoided the potentially negative financial effects of losing preschool-age children and helped stabilize access to infant/toddler services.

DC's infant/toddler sector experienced another advantageous setback in 2012. The District sought to build out its early childhood efforts by applying for a Race to the Top-Early Learning Challenge (RTT-ELC) grant. The District didn't receive the grant, but the application process itself advanced District efforts. While planning for the grant, leaders convened multi-sector discussions across behavioral health, public health, early learning, education, and health care public financing. These discussions surfaced the existing supports for infants and toddlers and their families, such as child care subsidy investments, a quality frame for center-based and family-child-care settings, home visiting, and behavioral health supports, while also identifying the gaps in the investments and approach.

These setbacks proved crucial, catalyzing the District to adapt its approach to early care and education and refocus on building a comprehensive birth-to-five system — a system that equally prioritized infants and toddlers alongside preschoolers.

2012 - 2018: NEW SUPPORTS FOR INFANTS AND TODDLERS

Early childhood supporters from across sectors, nurtured by the Bainum Family Foundation, undergirded by leadership at OSSE and the Deputy Mayor for Health and Human Services, ultimately converted these challenges into advantages. Their efforts elevated the needs of the birth-to-three sector and spurred the District to further invest in infant/toddler programs. The Council and multiple mayors approved a spate of new programs and efforts in relatively quick succession, demonstrating the commitment to and political will for supporting young children and their families.



We made great strides for young children in the District of Columbia thanks to the commitment and steadfast support across sectors. We are now poised to do the same for those who dedicate their lives to caring, educating, and nurturing them.

BB Otero; Senior Advisor to the Under Three DC Coalition; founder and former CEO of CentroNía; former D.C. Deputy Mayor for Health and Human Services

In 2014, the District won an Early Head Start-Child Care Partnership grant. The grant funded the development of the Quality Improvement Network (QIN), a multiyear, neighborhood-based initiative designed to increase the number of infants and toddlers served in high-quality settings, and to support providers in offering high-quality care and comprehensive services to infants and toddlers and their families.²³ When the QIN first launched, participating staff received wage bonuses. This strategy was an early attempt to increase compensation, creating the foundation for future efforts.

In its current iteration, QIN funds the United Planning Organization and Easterseals to serve as resource hubs for participating providers: They provide technical assistance, coaching, family engagement supports, and professional development, helping providers meet the Head Start Program Performance Standards. By participating in the QIN, providers also receive additional funding and support for program operation components, such as filling vacancies and supporting children's transitions to prekindergarten or Head Start. Additionally, the QIN helps smooth out providers' revenue: QIN providers receive QIN-specific subsidy rates for children, or the high-quality rate if they have a high-quality designation in Capital Quality, DC's quality rating and improvement system. Enrolled children have continuous subsidy eligibility through preschool, and providers are reimbursed based on enrollment rather than attendance.²⁴ The QIN — led by OSSE — also serves as a vehicle for cross-agency collaboration and coordination (e.g., Department of Behavioral Health, Child and Family Services Agency, Department of Health Care Finance, DC Health, Department of Human Services) to ensure children and families have access to comprehensive services.²⁵ The QIN continues to support infant/toddler providers today. Fourteen center-based providers and 18 home-based providers, serving over 700 infants and toddlers, currently participate in the QIN.²⁶

^{23 &}quot;Improving Learning Across Washington, DC, OSSE, accessed February 9, 2022, https://osse.dc.gov/sites/default/files/dc/sites/osse/publication/attachments/QIN_Flyer_2.26.21.pdf.

^{24 &}quot;Invitation to Participate Neighborhood-Based Quality Improvement Network (QIN) of Child Care Partners," OSSE, accessed February 9, 2022, https://osse.dc.gov/sites/default/files/dc/sites/osse/publication/attachments/Invitation%20to%20 Participate%20Neighborhood-Based%20QIN%20of%20Child%20Development%20Center%20Partners_updated.pdf.

^{25 &}quot;Improving Learning Across Washington, DC, OSSE, accessed February 9, 2022, https://osse.dc.gov/sites/default/files/dc/sites/osse/publication/attachments/QIN_Flyer_2.26.21.pdf.

^{26 &}quot;Modeling the Cost of Child Care in the District of Columbia 2021," OSSE, accessed February 9, 2022, https://osse.dc.gov/sites/osse/publication/attachments/Modeling%20the%20Cost%20of%20Child%20Care%20in%20the%20District%20of%20Columbia%202021.pdf.

The District's Access to Quality Child Care Fund (A2Q), originally funded in 2018 and an initiative championed by Mayor Muriel Bowser, was another investment in infant/toddler care. The A2Q is designed to increase the supply of child care for infants and toddlers in a number of ways, including establishing new or expanding existing infant/toddler facilities; at least 50 percent of facilities' funding had to be dedicated to increasing the supply of services for infants and toddlers eligible for subsidized child care.²⁷ Between 2018 and 2020, A2Q provided \$9 million in facilities grants, creating 1,244 new infant/toddler child care slots.²⁸ Mayor Bowser's FY2022 budget included another \$10 million in funding for A2Q over two years.²⁹

Alongside these efforts, the Council also pursued strategies that support all children birth to five, and in doing so created resources to support infant/toddler providers. For example, starting in 2015 DC used a cost estimation model to calculate child care subsidy rates, rather than the market rate survey it had previously used. Cost estimation models reflect the cost of providing care, rather than the amount that families are able to pay. The District recalculated rates in 2018³⁰ and 2021 and found that the costs to deliver care for infants and toddlers are higher than any other age group. Cost estimation models provide information on the cost of care, but don't automatically lead to rate increases. The District did take action, however, and in 2019 Mayor Bowser raised child care subsidy rates based on the 2018 results. These rate increases were only possible because of additional funding through both local investments and the federal Child Care and Development Fund. In the 2021 cost estimation model analysis, the authors recommend that the District prioritize increasing rates for infants and toddlers to a larger degree than other age groups.³¹

Further, the subsidy rate increases are tied to Capital Quality, the District's Quality Rating and Improvement System. As part of the cost estimation calculations, the District assessed the cost of providing care across different quality levels, as measured by Capital Quality. The increases in subsidy rates that came from the cost estimation model reflect the quality levels. As a result, infant/toddler providers received a higher reimbursement rate for offering a higher level of quality care.

The District continues to invest in these efforts. Taken together, this work created a mélange of strategies and investments designed to support infants and toddlers and their families.

^{27 &}quot;Subchapter 1-B. Access to Quality Child Care Fund," DC Council, accessed February 9, 2022, https://code.dccouncil.us/us/dc/council/code/titles/7/chapters/20/subchapters/l-B/.

^{28 &}quot;Modeling the Cost of Child Care in the District of Columbia 2021," OSSE, accessed February 9, 2022, https://osse.dc.gov/sites/default/files/dc/sites/osse/publication/attachments/Modeling%20the%20Cost%20of%20Child%20Care%20in%20 the%20District%20of%20Columbia%202021.pdf.

^{29 &}quot;Muriel Bowser Invests \$184 Million in Expanding Access to High-Quality Child Care to Give More Children and Families a #Fairshot," June 3, 2021, https://mayor.dc.gov/release/mayor-bowser-invests-184-million-expanding-access-high-quality-child-care-give-more-children.

^{30 &}quot;Modeling the Cost of Child Care in the District of Columbia 2018," OSSE, accessed February 9, 2022, https://osse.dc.gov/sites/osse/publication/attachments/OSSE%20Cost%20Model%20Report_2018.pdf.

^{31 &}quot;Modeling the Cost of Child Care in the District of Columbia 2021," OSSE, accessed February 9, 2022, https://osse.dc.gov/sites/osse/publication/attachments/Modeling%20the%20Cost%20of%20Child%20Care%20in%20the%20District%20of%20Columbia%202021.pdf.

2018-2020: PROMISE OF THE B-3 ACT

The work over the past fifteen years formed the foundation for a culminating piece of legislation, the Birth-to-3 for All DC Act, passed in 2018.³² The B-3 Act has been called a "big ticket bill"³³ and lauded as "groundbreaking"³⁴ for infants and toddlers in the District. The legislation focuses on the multiple sectors that support the lives of families and very young children, including the HealthySteps pediatric model,³⁵ behavioral health supports, service coordination, home visiting, and access to high-quality early care and education. Alongside additional resources for the QIN, for example, the B-3 Act sought to expand home visiting programs, behavioral health services, and training for prospective lactation consultants, and to increase income eligibility for child care subsidies. The B-3 Act also required OSSE to develop a competitive compensation scale for early educators.



From an administrative perspective, we often organize supports for families into silos — health and education and child care — but that's not the way that families experience their lives. The way we can best support families is to break down those silos and create systems of care that families can engage with in the way that serves them, not in the way that is convenient for the rest of us.

Lee Beers, Medical Director, Community Health and Advocacy at Children's National Hospital, and 2021 President of the American Academy of Pediatrics

The catch to the B-3 Act, however, is that its components can only be implemented if the Council provides funding to do so. Altogether, the B-3 Act would have required a \$230 million investment.³⁶ Though passed in 2018, the B-3 Act was never fully funded: The FY2019 budget included \$1.3 million, and the FY2020 budget included \$10.9 million.³⁷ Nascent plans to increase funding in FY2020 were abruptly waylaid by the higher-priority needs of COVID-19.

Even so, the B-3 Act has been a north star for early childhood collaborators in the District, guiding birth-to-three advocacy and practice. The 2021 investments will bring key facets of the B-3 Act into reality. Most notably, the early educator compensation scale and Equity Fund are foundational components of the B-3 Act and a clear win for DC advocates and families.

^{32 &}quot;D.C. Act 22-453," DC Council, September 5, 2018, https://lims.dccouncil.us/downloads/LIMS/37704/Signed_Act/B22-0203-SignedAct.pdf.

³³ Rachel M. Cohen, D.C. Looks for Ways to Fund Ambitious Early Childhood Program," WAMU, November 19, 2018, https://wamu.org/story/18/11/19/d-c-looks-for-ways-to-fund-ambitious-early-childhood-program/.

³⁴ Mariana Wallace, "DCFPI Celebrates the Adoption of 'Birth to Three for All," DC Fiscal Policy Institute, July 18, 2108, https://www.dcfpi.org/all/dcfpi-celebrates-the-adoption-of-birth-to-three-for-all-dc/.

^{35 &}quot;Under 3 DC Healthy Steps," Under 3DC, accessed February 9, 2022, https://under3dc.org/wp-content/uploads/2020/04/U3DC-Factsheets-HealthySteps.pdf.

^{36 &}quot;Update Fiscal Impact Statement – Birth-to-Three For All DC Act of 2018," cfo.dc.gov, http://app.cfo.dc.gov/services/fiscal_impact/pdf/spring09/FIS%2022-203%20Birth-to-Three%20for%20All%20DC%20Act%20of%202018%20Enrolled.pdf.

^{37 &}quot;FY 2020 Approved Budget and Financial Plan," cfo.dc.gov, July 25, 2019, https://cfo.dc.gov/sites/default/files/dc/sites/ocfo/publication/attachments/DC_OCFO_2020_Budget_Vol_1_0.pdf.



PROGRESS MADE POSSIBLE



The steady progress on early childhood in Washington DC is a credit to the parents, providers and others who have been persistent over the years — Early Childhood Matters! Now it is time to fully invest in comprehensive prenatal-to-three services and to assure equity across the city.

Joan Lombardi, Ph.D., Senior Scholar, Center for Child and Human Services, Georgetown University

The District's progress over the past 15 years was only possible through support from the broader early childhood ecosystem.

In 2006, a group of early childhood partners, with support from the Kellogg Foundation and other philanthropic funders, formed the Pre-K for All DC Campaign. The Campaign focused on expanding access to preschool for three- and four-year-olds. The Campaign used research, strategic communications and media engagement, and community mobilizing to build an increasingly effective coalition. At the same time, the Campaign worked closely with key Council actors and decision makers, providing outside support for inside priorities; in 2007, the Campaign collaborated with then-Council Chair Vincent Gray to draft a legislative framework. Chairman Gray was one of the Councilmembers who introduced a Pre-K for All DC bill later that year. In 2008, the Campaign organized a 10-hour public hearing on the bill, largely consisting of positive voices. The Campaign is credited with being a driving force in passing the Pre-K Enhancement and Expansion Act.³⁸

³⁸ Bernardine H. Watson, "A Case Study of the Pre-K for All DC Campaign," Foundation for Child Development, November 2010, https://www.fcd-us.org/assets/2016/04/Pre-K-for-All-DC-Case-Study.pdf.

Then-Chairman, and now Councilmember Vincent Gray — who chairs the DC Council's Health Committee and represents Ward 7 — served crucial roles in the District's government structures over time, from Councilmember to Mayor to Chairman and now Councilmember once more. His leadership has provided a continuity of consistent political support, and he continues to be a key player in supporting the District's early care and education programs today.

Other stakeholder efforts over time continued the momentum of the District's early childhood efforts. New research helped quantify and build the case for the need for additional supports for infants and toddlers and their families. A 2015 report, commissioned by the Bainum Family Foundation, looked across indicators of well-being and hardship for infants, toddlers, and their families, particularly indicators correlated with health, development, and learning in the early years. The researchers ultimately found that "advantage and opportunity are skewed along economic, racial, and geographic lines."39 In 2018, the Bainum Family Foundation updated the report, further highlighting the shortage of infant/toddler care.⁴⁰ Similarly, in 2016, research exploring the financing of infant/toddler care found that subsidy rates cover barely two-thirds of the cost of high-quality care, and that many providers lack adequate business systems to maintain financial stability in the unstable early care economy.41

Early childhood partners also complemented the Council's work with advocacy. In 2016, the Bainum Family Foundation funded and helped launch the Birth-to-Three Policy Alliance, a coalition of 20 policy, advocacy, and direct service organizations. Their mission was to increase access to services for infants and toddlers, and to support coordination between the multiple systems serving these children and their families. Bainum provided individual grants to 11 organizations that were part of the Policy Alliance, including the DC Chapter of the American Academy of Pediatrics, DC Action for Children, the DC Fiscal Policy Institute, and the DC Head Start Association, to foster buy-in and increase organizational capacity to focus on the work of the Policy Alliance. The Policy Alliance since restructured and renamed to Under 3 D.C. — played a key role in passing paid medical and family leave policies and child care subsidy increases for infants and toddlers in 2016. Under 3 D.C. also helped advance the B-3 Act through early wins, such as expanding HealthySteps and adding home visiting services, and helped facilitate the birth-to-three investments passed in 2021.



We formed a powerful coalition. People we hadn't worked with before, we engaged with. The power of women, and Black and Brown women, and community members saying to early educators: You are worthy. What you say matters. We are going to listen and we are building this platform for you, with you. Say what you need to say. We are right there with you. Not behind or in front of you. We are right there with you.

Kimberly Perry, Executive Director, DC Action

³⁹ David Murphy and P. Mae Cooper, "Infants and Toddlers in the District of Columbia: A Statistical Look at Needs and Disparities," Child Trends, 2015, https://www.childtrends.org/wp-content/uploads/2015/12/2015-28DC-Infants-Toddlers.pdf.

^{40 &}quot;Early Learning Supply & Demand in the District of Columbia Using Data to Identify Critical Gaps," Bainum Family Foundation, November 2018, https://bainumfdn.org/wp-content/uploads/2018/10/Bainum_EL-Supply-Demand-Report_FNL_Nov-2018.pdf.

⁴¹ Judy Berman, Soumya Bhat, and Amber Rieke, "Solid Footing: Reinforcing the Early Care and Education Economy for Infants and Toddlers in DC," DC Fiscal Policy Institute, accessed February 9, 2022, https://www.dcfpi.org/wp-content/ uploads/2016/03/FINAL-DC-Appleseed_DCFPI-Child-Care-Report1.pdf.

Lessons and considerations

Early childhood partners from across DC strategically and patiently advanced a birth-to-three agenda. As a result, the landscape is gradually evolving toward a coordinated system of comprehensive supports and services for infants and toddlers and their families. This progress was hard-won and well-earned, requiring careful forethought, strong leadership, and the ability to adapt.

Other states and jurisdictions are pursuing their own campaigns to create comprehensive birth-tofive systems — systems that truly support infants and toddlers, integrate providers across settings, and meet the multifaceted needs of families. As they do so, the shifting federal funding environment introduces new opportunities as well as complicating factors that must be taken into account.

DC's progress in advancing the birth-to-three landscape offers lessons, explored below, as states and jurisdictions move forward in their decision making.



For the past decade, the District has focused on increasing access, quality, and affordability of infant and toddler care. This priority has remained constant across multiple mayoral administrations, because we know that we need to bring the system for infants and toddlers up to the same level as our system for pre-K."

> Sara Mead, Assistant Superintendent of Early Learning, DC Office of the State Superintendent of Education

Foster champions across sectors. Strong leadership across stakeholder groups propelled DC's birthto-three efforts forward. The leadership included representatives of government entities, philanthropy, and multiple mayors and councilmembers, as well as communities and nonprofit organizations. Cross-sector support was particularly crucial for progress. Aligning the sectors required a shared understanding of the need for a comprehensive early childhood system, beyond child care. Examples of this comprehensive approach can be seen in the District's expanded implementation of CenteringPregnancy, HealthySteps, and Early Childhood Mental Health Consultation to support healthy pregnancies and child development at home and in early learning settings. District leaders developed this understanding through knowledge sharing about young children, including their development and the programs and systems with which they and their families interact. This combination of political, community, and cross-sector support created the conditions for steady progress.



Because early education and care serve as the initial building blocks of a child's educational and economic trajectory, now is the time for the District to recognize it as a critical part of the public good and use the same public dollars that support K-12 education to support pre-K and B-3 education regardless of setting. This will require strategies that engage citizens in all eight Wards, the executive and legislative branches of government, the business community, parents and guardians, and early education and care educators.

Sia Barbara Ferguson Kamara, DC Early Learning Collaborative Board Member and early childhood systems consultant with the Open Society Foundation

- Align messages and messengers. Effective public messaging, communicated by a broad coalition of actors, helped drive support for DC's birth-to-three work. The Birth-to-Three Policy Alliance played a key role in creating that reality, bringing together organizations that spanned the multiple sectors that serve infants and toddlers and their families and proactively developing common messaging to advance their shared goals. The Policy Alliance linked early care and education priorities to broader social support efforts, creating both a broader coalition of support as well as more streamlined and coordinated services across sectors.
- Find opportunities within challenges: The current birth-to-three landscape in DC is the product of the District's early childhood leadership's ability to leverage challenges to drive progress. Before Pre-K for All passed, advocates and partners simultaneously pushed for investments in infant/toddler care. Advocates weren't successful at the time, but the passage of Pre-K for All was an interim win that set up the field for wins for infants and toddlers down the line. Similarly, when the B-3 Act wasn't fully funded in 2018, the Council and District leadership found an alternative route to several of the intended goals.
- Quantify the need. DC's early childhood leadership, both within and outside OSSE, leveraged quantitative data to draw attention to the needs of infants and toddlers and their families and to build buy-in for investing in supports for these populations. The 2015 and 2018 reports released by the Bainum Family Foundation and the 2016 report released by the DC Fiscal Policy Institute supplied effective, digestible talking points that resonated with Council members and community members alike and provided a guide for how the District might move forward. At the same time, OSSE's cost estimation models use real-time administrative data to analyze the current state of funding for infant/toddler care, highlighting progress to date and what might be possible moving forward. Similarly, the District combines a range of external and internal data sets from across sectors to use for planning and targeting resources.
- **Prioritize equity.** DC's birth-to-three efforts prioritize addressing inequities in opportunity gaps in access to and quality of services for infants and toddlers and their families, developing strategies that reflect the voices of families and providers that are most affected. In the District, disparities exist across economic, racial, and geographic lines, and several policies and programs are designed to address those disparities together. The A2Q, for example, reserves half of its facilities funding for infants and toddlers in subsidized care, and the B-3 Act prioritizes quality improvements, via the QIN, for infants and toddlers in Wards 7 and 8 and dual-language learners in communities with concentrated poverty.



Conclusion

Washington, DC and its leaders, advocates, providers, and collaborators have long invested in providing early care and education to children and families. For the past decade, the District has keenly focused on increasing access, quality, and affordability for infant/toddler care. That priority has remained across multiple mayoral administrations, shifts in composition in the DC City Council, and OSSE leadership. Recent progress — in both increased investments and new approaches to systems — reflect the continued commitment. As states and jurisdictions look to create comprehensive birth-to-five systems, the District serves as a model of what is possible.

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