

Collaborative Partnerships Between Early Care & Education and Child Welfare:

Supporting Infants, Toddlers, and Their Families Through Risk to Resilience

YOUNG CHILDREN IN THE CHILD WELFARE SYSTEM

Young children enter foster care in disproportionately high numbers. In 2009, 5% of children in the United States who received child care subsidies were also under the guardianship of protective services.¹

Some quick facts about infants and toddlers in child welfare:

- 231,940 children ages 3 and younger had substantiated reports of maltreatment, accounting for 33.4% of all substantiations in FY 2009. Of those children, 87,612 were under the age of 1.²
- Infants comprise a disproportionately large percentage of first-time admissions to out-of-home care.³
- Almost 1 in 4 children admitted to out-of-home care for the first time is under the age of 1. This proportion keeps rising.⁴
- Children under 3 who have been neglected are at a significantly higher risk of later experiencing developmental problems when compared to those who do not experience abuse.⁵
- While children who are maltreated at a young age are likely to develop a variety of problems across domains, they are also more amenable to effective intervention.
- Compared to children who experience maltreatment in their teens, children who experience maltreatment in early childhood do better over the long term.

MORE ALIKE THAN DIFFERENT

A preponderance of evidence highlights the significant impact of early childhood experiences on the trajectory of human development. Research pointing to the critical period of development between birth and age 3 dominates the fields of early childhood, child development, health, and social services, as well as economics, business, and social justice. Similarly well documented is empirical evidence of the consequences of toxic stress and other risk factors on infants and toddlers.

1 U.S. Department of Health and Human Services, Administration for Children and Families. - FFY 2009 CCDF. Data Tables 801, Co-payment as a Percent of Family Income. Retrieved from http://www.acf.hhs.gov/programs/occ/data/ccdf_data/09acdf800_preliminary/table17.htm, July 1, 2011

2 U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2010). *Child maltreatment 2009*. Retrieved from http://www.acf.hhs.gov/programs/cb/stats_research/index.htm#can.

3 Wolczyn F., Ernst, M., & Fisher, P. (2011). *Who are the infants in out-of-home care? An epidemiological and developmental snapshot*. Chicago, IL: Chapin Hall at the University of Chicago.

4 *Ibid.*, p. 1.

5 Thornburg, K. R., Harris, T. L., & Hawks, J. S. (2011). *The state of child welfare in America: 2011*. Columbia, MO: Center for Family Policy and Research.



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Many promising practices in both the child welfare and early childhood sectors support protective factors for vulnerable families and prevent and mitigate significant early childhood risk in the most vulnerable young children. Bodies of research from both fields proclaim a resounding “call to action” to help young children and families facing substantial risk. Additionally, child welfare and early care and education systems share many goals related to ensuring the safety and well-being of young children in their care.

In their mission to improve outcomes for children and their families, early care and education, family support, home visiting, and other early childhood sectors join child welfare systems and may function as powerful partners.⁶ In many cases, sectors such as early care and education (ECE) serve broad populations of young children and families, engaging them without the traditional stigma often associated with child welfare involvement.⁷ Early childhood systems can partner with child welfare agencies to serve children and families as well as operate in a prevention and early detection capacity for families at risk.

Given this early window of opportunity, child welfare, early childhood, and home visiting practitioners can intervene in a number of coordinated ways to improve outcomes for infants and toddlers.⁸ Child welfare and early childhood systems both focus on child safety and promote child and family well-being, including healthy child development and the formation of secure attachments. Together, we can begin to think about new ways to build support for infants, toddlers, and their families who come to the attention of the child welfare system at such a developmentally vital time.

The Administration on Children, Youth and Families and the Administration Children and Families, Office of Child Care issued a joint informational memorandum earlier this year titled *Child Welfare and Child Care Partnerships: Partnering with Families Involved in Child Care Subsidy Programs* to highlight the priority placed on partnerships across these agencies to better serve vulnerable child populations and families.⁹ One of the priorities of the Office of Child Care (OCC) is to help States reach infants and toddlers who are in or at risk of entering the child welfare system.¹⁰ This brief will continue and extend collaboration discussions in ECE systems to include the child welfare system. It will build on the OCC’s priorities in helping States think about how ECE programs can reach the youngest and most vulnerable families of infants and toddlers who are in or at risk of entering the child welfare system.

NEED FOR ECE-CHILD WELFARE PARTNERSHIPS

To ensure optimal outcomes for infants and toddlers, all early childhood professionals who touch the lives of young children must join efforts, explore cross-sector collaboration strategies, and lead next and best practices in coordinated service delivery to change for the better the trajectories of our most vulnerable young children and families. Furthermore, across the country, State leaders are identifying, piloting, and continuously improving practices and partnerships that lead to effective collaborations between ECE and child welfare systems.

6 Stepleton, K., McIntosh, J., & Corrington, B. (2010). *Allied for better outcomes: Child welfare and early childhood*. Center for the Study of Social Policy, p. 6. Retrieved from http://www.strengtheningfamilies.net/images/uploads/pdf_uploads/allied_for_better_outcomes.pdf.
7 Ibid., p. 7.

8 Cohen, J., Cole, P., & Szorm, J. (2011). *A call to action on behalf of maltreated infants and toddlers*. Washington, DC: American Humane Association, Center for the Study of Social Policy, Child Welfare League of America, Children’s Defense Fund, & ZERO TO THREE.

9 U.S. Department of Health and Human Services, Administration on Youth and Families. (2011, April). *Child welfare and child care partnerships: Partnering with families involved in child care subsidy programs* (Information memorandum). Washington, DC: Author.

10 In this brief, “State(s)” refers to States, Territories, and Tribes.

HOW DO STATES BRIDGE CHILD WELFARE AND ECE EFFORTS TO PROTECT INFANTS AND TODDLERS?

The report *Allied for Better Outcomes: Child Welfare and Early Childhood*¹¹ provides strategies that States can use to leverage their working relationships between child welfare and ECE systems while, most importantly, attending to the developmental needs of infants and toddlers and their families. The report shares examples of States' successful implementations of these strategies for potential State adoption and/or adaptation, lessons learned, and further application to State work.

The report also identifies two specific goals for achieving successful ECE-child welfare partnerships under which the following strategies fall.

ECE-CHILD WELFARE PARTNERSHIP GOALS THAT PROTECT AND PROMOTE THE HEALTH AND DEVELOPMENTAL NEEDS OF INFANTS AND TODDLERS

- ▶ Link various systems, such as early intervention, child welfare, and early childhood, which serve young children and their families, in order to enhance supportive services to families within any of these systems.
- ▶ Ensure that children in child welfare have access to quality ECE programs and other early childhood services.

Families interact every day with myriad systems, from health to public education and many more. With universal terminology, clear communication, and collective responsibility for overlapping and complimentary goals, early childhood and child welfare systems can reduce duplication of efforts, maximize resources, and increase efficiency as they work together to meet the needs of families at risk. The following strategies and corresponding State examples illustrate collaborations that meet this end.

STRATEGIES TO LINK VARIOUS SYSTEMS INCLUDE:

MUTUAL UNDERSTANDING OF PREVENTION PARTNERSHIPS

In Tennessee, a pilot is being conducted in two Department of Children's Services (DCS) districts to provide child welfare workers and child care resource and referral (CCR&R) staff the opportunity to know each other and understand the work of each entity. The outcome of cross-training and communication will help DCS workers who seek to place young children in child care to find the knowledge and resources about quality child care available in local areas through the CCR&Rs.

- ▶ **Ensure understanding and appreciation between early childhood and child welfare systems as partners in the prevention of maltreatment and the promotion of optimal development.**

ECE programs, as well as others that serve young children and their families, are uniquely positioned to identify early signs of stress and deliver supportive response systems for abuse and neglect, and could be recognized as such by child welfare agencies. Rather than function as two detached and independent sectors, child welfare and early childhood entities can construct intentional partnerships around their shared goals of improving family functioning and promoting optimal development for children and families.

¹¹ Stepleton, K., McIntosh, J., & Corrington, B. (2010). *Allied for better outcomes: Child welfare and early childhood*. Center for the Study of Social Policy. Retrieved from http://www.strengtheningfamilies.net/images/uploads/pdf_uploads/allied_for_better_outcomes.pdf.

- ▶ **When a child under the age of 6 is involved in a child welfare case, include an ECE professional in Family Group Conferencing (FGC),¹² even if the child does not participate in an ECE program.**

State policies can be amended to require that early childhood practitioners participate in the case-planning process. If a child is already enrolled in a program, his or her early childhood caregiver can provide valuable input to the caseworker and the child's family regarding service needs. In some cases, ECE practitioners may provide the only continuity in caregiving for these vulnerable young children. ECE practitioners can also be included as members of multidisciplinary case-planning teams. With their primary focus on the health, safety, and successful development of young children, ECE professionals can serve as skilled resource specialists in FGC and other inclusive case planning practices, ensuring that the developmental needs of children are supported.

Other contributions ECE practitioners can make to multidisciplinary teams are:

- Offering a safe place for family visits
- Providing a place for families to access resources on child development—in particular, regarding adult-child interactions, building strong relationships and attachments, and responding to concerning behavior
- Offering respite care for families and foster care families

PATHWAYS TO PROMOTE ECE PARTICIPATION IN CHILD WELFARE CASE PLANNING

*In **Utah** and **Wyoming**, teachers are included as members of multidisciplinary case planning teams.*

***Wisconsin** incorporated child abuse and neglect prevention strategies into its early childhood training registry. This practice enables immediate identification of teachers who are even more uniquely positioned to participate in inclusive case planning.*

***New Hampshire** has integrated Strengthening Family Initiative concepts into its professional development career lattices for early childhood center-based care and home providers.*

The career lattices, a credentialing structure composed of different levels, serve as incentives for professional growth.

- ▶ **Engage nontraditional partners in collaborative efforts to support optimal development of the most vulnerable children.**

In many communities, there are formal and informal entities whose goals include promoting optimal child development, but they are rarely tapped by child welfare agencies as partners. Engaging early childhood programs, faith communities, libraries, community centers, and other nontraditional partners around shared goals can shed light on an array of resources available to leverage the work of the child welfare system and mobilize a community of support around families with young children.¹³ Early childhood programs are vital partners in community well-being. They can help bridge and complement the services of child welfare agencies, and in many ways they can alleviate the burden of the large case loads child welfare specialists manage day to day.

Some services early childhood programs offer that support the mission of child welfare are:

- Home visits
- Developmental screenings for infants and children under age 5
- Referral to early intervention agencies for assistance with health and/or developmental concerns of children from birth to 3

¹² Family Group Conferencing has four main stages, which include a meeting in which professionals inform the family of the concerns they have, followed by private family time, where the family alone develops a plan that addresses the concerns that have been raised. The plan is then presented to the professionals, who should support it if the concerns have been addressed and the child is not put at risk. Other common variations on this practice of inclusive case planning include Family Team Meetings and Family Group Decision-Making.

¹³ Stepleton, K., McIntosh, J., & Corrington, B. (2010). *Allied for better outcomes: Child welfare and early childhood*. Center for the Study of Social Policy, p. 15. Retrieved from http://www.strengtheningfamilies.net/images/uploads/pdf_uploads/allied_for_better_outcomes.pdf.

- Referral to and assistance with social service agencies
- Weekly playgroup sessions for children from birth to 3
- Parent education classes, with child care often provided
- Parent lending library

REACHING OUT TO NONTRADITIONAL PARTNERS

*In **Connecticut**, the Department of Children and Families (DCF) is one of the nation's few consolidated child welfare agencies that offers a comprehensive approach to helping children by offering child protection, behavioral health, juvenile justice, and prevention services. In addition, to ensure the safety of children in whatever setting they are found, including licensed and informal child care settings, DCF conducts child abuse and neglect investigations as needed.*

Connecticut's Child Care and Development Fund (CCDF) lead agency partners with DCF to obtain background abuse and neglect checks for informal child care providers enrolled in the State's certificate program. DCF and the Department of Social Services also coordinate various family support initiatives implemented by both agencies.

***Louisiana's** CCDF lead agency partners with the child welfare agency to provide respite services to children in protective care. Protective care is defined under these circumstances as services offered to individuals under 13 years of age who are in danger of or threatened with abuse, neglect, or exploitation, or who are without proper custody or guardianship, and for whom the need for child care services has been determined by the State agency responsible for the provision of abuse and neglect complaint investigations. Children in foster care are also considered to be in protective services.¹⁴*

HOW DO STATES ENSURE THAT YOUNG CHILDREN IN CHILD WELFARE HAVE ACCESS TO QUALITY ECE PROGRAMS?

Young children in the child welfare system who have experienced trauma require individualized support of their early development to avoid deleterious longitudinal outcomes and to prepare them for success on par with their peers.¹⁵ Quality ECE programs give families a variety of strategies to draw from that nurture children, support parents, and strengthen families, building up assets in families that mitigate risk and promote resilience. ECE programs are often licensed by a state agency or professional organization. With adequate and meaningful training, child care practitioners in quality ECE settings are equipped to provide specialized support for children in the child welfare system and their families, whether birth, kin, foster, or adoptive.

¹⁴ Schumacher, Rachel. Forthcoming. *State Issues and Innovations in Creating Integrated Early Learning and Development Systems: A Follow-Up to Early Childhood 2010: Innovations for the Next Generation*. Prepared for the Substance Abuse and Mental Health Services Administration (SAMHSA).

¹⁵ IBID.

A SHARED BODY OF KNOWLEDGE

In Illinois, several hundred child welfare workers and Head Start providers have participated in cross-trainings, allowing each group to learn about the other's work and explore how they might collaborate to better support the most at-risk children in the state.

In Arkansas, the Arkansas Court Team Project offers trainings to ECE staff that is specifically geared to the needs of infants and toddlers in foster care. They also work to bring specialists from fields such as fetal alcohol spectrum disorders and parent-child attachment to the community to conduct intensive trainings for ECE staff to address needs and minimize placement changes in their facilities for this vulnerable population.

STRATEGIES TO PROMOTE ACCESS TO QUALITY ECE PROGRAMS INCLUDE:

- ▶ **Ensure child welfare case workers and supervisors are knowledgeable about the benefits of quality ECE programs for young children and understand what constitutes quality.**

Case workers should know where to find information on ECE resources available to children in the child welfare system, including Early Head Start and subsidized child care that can be accessed for this population. Foster children's enrollment in ECE programs can be considered a priority according to CCDF regulations, and the great majority of States consider children in foster care and/or in child protection a priority (according to the 2010-2011 CCDF State Plans).

- ▶ **Mandate that young children in state custody are enrolled in quality ECE programs.**

Although every state requires case plans to address a child's educational needs, that requirement generally is interpreted to apply only to school-age children. State law and policy can be clarified to ensure that the care and learning needs of infants and toddlers are considered. For example, we know continuity of care is crucial for the healthy development of infants and toddlers across all domains. Research points to the harmful effects of a lack of consistent caregiving and the absence of secure

relationships with primary caregivers on infant and toddler development. It is imperative to ensure continuity of care for children and to highlight ECE programs as a means to meet this urgent need. Being connected with a specific ECE program can be a protective factor when a child is at risk of maltreatment or, having been taken into foster care, is moved through multiple placement settings. This stable connection can help mitigate the harm done from so many placement transitions, ensuring one less disruption for the child. ECE programs can also support foster families with myriad helpful community and parenting resources, as well as home-visiting programs.

REQUIRING ECE FOR CHILDREN IN CARE OF STATE

A change to the Illinois State administrative code mandates that all children ages 3 to 5 in State custody are enrolled in high-quality child care programs. A memorandum of understanding between the child welfare agency and Head Start programs guarantees that these children will automatically be moved on to priority lists for enrollment.

In Georgia, Bright from the Start developed a partnership with the Department of Human Services, including the Division of Child and Family Services that has led to efforts to ensure that children in foster care are enrolled in high-quality ECE programs.

Florida has a statutory requirement to include ECE as a case plan component for certain young children involved in child welfare. The law provides that children ages 3 to school entry age who are in foster care or under protective supervision and who are enrolled in early education or child care must be enrolled in such a program 5 days per week. It also requires that case plans developed for these children contain such participation in early education or child care as a required action. The law expresses legislative intent "that children who are currently in the care of the State be provided with an age-appropriate education program to help ameliorate the negative consequences of abuse, neglect or abandonment."

PROMOTING CONTINUITY OF CARE

New York recently made sweeping changes to its laws governing the permanency process for children in foster care, including detailed requirements for permanency hearing reports submitted by county child welfare agencies to the court with jurisdiction over a child's case. The new law requires that such reports include a description of the steps the agency has taken to enroll eligible children in an early childhood program.

- ▶ **When a child is reunited with his or her birth family after a stay in foster care, continuity of ECE should be ensured.**

Subsidies should support children's continued involvement in the same ECE setting, and caseworkers should know how to obtain them. Consideration should be made for how to ensure that the subsidy stays with the child. For instance, if a parent eligible for subsidy has a child who goes into foster care, the subsidy may or may not continue for the child. If the subsidy does not continue, the child may have to go back on a waiting list for ECE, depending on State policy. States should ensure that the subsidy stays with the child regardless of where the child may be moved.

- ▶ **ECE providers from the child's program should be included in early child and family service teams or multidisciplinary teams.**

Often ECE practitioners have uniquely close relationships with children and their primary caregivers, and they can bring valuable, specific knowledge to the team, as well as information about early development in general.

MULTIDISCIPLINARY TEAMING TO OPTIMIZE OUTCOMES FOR INFANTS AND TODDLERS

Early childhood caregivers at the Wallingford Community Day Care in Wallingford, Connecticut, and local social services personnel have an ongoing reciprocal relationship. ECE teachers are frequent members of multidisciplinary case planning teams, and social services personnel are common visitors in Wallingford's classrooms, volunteering their services in a number of ways. (See more on this relationship in the next text box on page 8.)

In New Jersey, mirroring the state-level Strengthening Families leadership team structure, each of the State's 21 counties has multidisciplinary leadership teams that collaborate across early childhood and child welfare sectors to align services that support children and families. (See more on the Strengthening Families approach in "National Approaches to ECE-Child Welfare Partnerships," on page 10.)

- ▶ **Ensure that ECE practitioners understand the unique needs of children who have experienced trauma or are in the child welfare system.**

Although many different fields and disciplines work on behalf of children and families, there is a shared body of knowledge that everyone who touches the lives of young children must know in order to promote their welfare. Training for ECE practitioners in areas of trauma, child welfare, interdisciplinary collaboration, and child development will further support their competent participation in inclusive case planning. Professional development and other relationship-based technical assistance in areas related to child welfare can advance ECE practitioners' abilities to better partner with child welfare and to foster resilience in young children at risk.

STATES INVOLVE ECE PRACTITIONERS IN INFORMATION SHARING

Kentucky, Minnesota, and Mississippi have included child care providers in their lists of people or entities allowed access to confidential child maltreatment information under certain circumstances. Kentucky specifies that early childhood program administrators who have a legitimate interest in the case may have accessibility. Minnesota allows disclosure to mandated reporters who have ongoing responsibility for the health, education and welfare of a child, including child care providers. Similarly, Mississippi provides for access to early childhood caregivers who have made a report of abuse, neglect or maltreatment.

In Wallingford, Connecticut, the Visiting Nurses Association has a consulting social worker and a nurse who both visit the local child care program weekly. These visits include training and/or technical assistance for ECE caregivers on how to support children in trauma. These professionals coordinate their schedules with Wallingford Community Day Care Center so teachers are not overwhelmed with conflicting visits.

THE OFFICE OF CHILD CARE STRATEGIES FOR ECE-CHILD WELFARE PARTNERSHIPS

In a joint memorandum from the Administration on Children, Youth and Families and the OCC, child care/ECE and child welfare agencies are encouraged to enter into formal agreements, such as Memoranda of Understanding (MOUs), to improve coordination and collaboration on behalf of the children and families they serve.¹⁶ The following are specific actions and strategies that the Administration and the OCC advocate, which agencies can incorporate into their agreements. Some of these strategies overlap with, and are indeed informed by, some of those listed above.

REFERRAL AND SERVICE COORDINATION

- ▶ Jointly establish a referral process to the child care subsidy program by the child welfare office.
- ▶ Similarly, jointly establish a referral process to child welfare services by child care offices and providers. This may include training to increase capacity among child care providers to recognize signs of child abuse and neglect, talk with children about suspected abuse or neglect, and care for children who have suffered from abuse or neglect.
- ▶ Ensure that ECE services are included in the child welfare case plan and ensure that, for families already enrolled in ECE programs, the child care provider is included in the family service team.
- ▶ Partner to share information with foster family agencies, social workers, parent associations, parents, and relative caregivers of age-eligible children on the importance of high-quality child care and the subsidies available through CCDF.

¹⁶ U.S. Department of Health and Human Services, Administration on Youth and Families. (2011, April). *Child welfare and child care partnerships: Partnering with families involved in child care subsidy programs* (Information memorandum). Washington, DC: Author.

CAPACITY BUILDING

- ▶ Arrange cross-training opportunities to educate staff from each agency about child welfare and child care services, as well as trainings on topics of mutual interest, such as working with high-need families, appropriate child care for children needing protective services, and the responsibilities of reporting suspected abuse or neglect.
- ▶ Establish information-sharing agreements across child welfare and child care agencies, such that child care providers are aware when families they serve have interacted with child protective services and may be in need of increased support.
- ▶ Coordinate activities across child welfare and child care agencies to address background screening requirements for child care and foster care providers.
- ▶ Consider co-locating staff or supporting staff rotations to facilitate partnership across agencies.

POLICY COORDINATION

- ▶ Jointly establish continuity-of-care policies for children receiving child welfare services to help ensure stability and maintain child care provider relationships where possible. This could include providing transportation or incentives to allow a child to continue attending child care with the same provider if the child is removed from home or changes foster care locations.
- ▶ Jointly review policies and strategies to identify and target vulnerable children for placement in high-quality child care. This population of children often is in the greatest need and can benefit the most from placement in high-quality care.
- ▶ Establish strategies for incorporating protective factors.
- ▶ Embed these strategies and others, as appropriate, in Quality Rating and Improvement Systems for child care programs.

OPPORTUNITIES FOR ECE-CHILD WELFARE PARTNERSHIPS

▶ **Fostering Connections to Success and Increasing Adoptions Act**

The 2008 Fostering Connections legislation required States to ensure that children who are taken into foster care or who encounter placement changes experience continuity in their education. Unless it is in the best interest of the child to do otherwise, States are required to keep children in their schools of origin when bringing children into custody or moving them to new foster care placement. While the legislation does not specifically address young children in ECE settings, the Administration on Children and Families (ACF) believes that stability is just as important for these children. States are encouraged to keep young children in their ECE programs when removing them from their homes, placing them, and reuniting them with their parents, regardless of when enrollment took place.

► **Maternal, Infant, and Early Childhood Home Visiting Program**

The Affordable Care Act (ACA) authorized the creation of a home visiting program for young children and their families in targeted, at-risk communities. Administered by the ACF and the Health Resources Service Administration (HRSA), the program is designed to strengthen and improve home visiting programs, improve early childhood service coordination and delivery for families in at-risk communities, and identify and effectively provide comprehensive, evidence-based home visiting services to these children and families. Among the populations prioritized by the legislation are “eligible families that have a history of child abuse or neglect or have had interactions with child welfare services” (Section 511(d)(4)(D) of the Social Security Act, as amended by the ACA).

► **State Advisory Councils**

The Improving Head Start Act of 2007 established collaboration grants for States to develop a State Advisory Council (SAC) on Early Childhood Education and Care. The desired outcomes of collaboration are for States to develop or enhance comprehensive early childhood systems, including and extending beyond Head Start. SACs are meant to coordinate the many systems serving young children and their families and create alignment among them. With inclusive membership, SACs can and should include early childhood, family support, mental health, and child welfare. Ensuring enrollment in high-quality ECE programs and promoting program stability for children in or at risk of entering the child welfare system are fitting areas of focus for SACs.

NATIONAL APPROACHES TO ECE-CHILD WELFARE PARTNERSHIPS

The following are national approaches that deliberately connect early childhood and child welfare services for children and families.

► **Strengthening Families**

Strengthening Families is an approach¹⁷ to work with children and families that promotes five research-based Protective Factors for families to prevent child abuse and neglect and promote optimal child development. Strengthening Families is an initiative of the Center for the Study of Social Policy and is supported by the Doris Duke Charitable Foundation.

► **ZERO TO THREE Court Community Partnerships Model**

The Court Teams for Maltreated Infants and Toddlers Project is a systems change initiative¹⁸ focused on improving how the courts, child welfare agencies, and related child-serving organizations work together, share information, and expedite services for young children. The Court Teams Project has two major goals:

- Increase awareness among those who work with maltreated infants and toddlers about the negative impact of abuse and neglect on very young children.
- Change local systems to improve outcomes and prevent future court involvement in the lives of very young children.

¹⁷ Center for the Study of Social Policy (2010). *Center for the Study of Social Policy*. The Strengthening Families Approach Retrieved July 1, 2011 from <http://www.cssp.org/reform/strengthening-families/the-basics/the-strengthening-families-approach>,

¹⁸ Zero to Three (2011) *Zero to Three*. Court Teams for Maltreated Infants and & Toddlers. Retrieved July 1, 2011 from <http://www.zerotothree.org/about-us/funded-projects/court-teams/>

► Early Head Start/Child Welfare System Initiative

In October 2002, the Federal Head Start Bureau initiated a demonstration project¹⁹ involving grants to 24 Early Head Start programs to promote collaboration with local child welfare agencies. Each program decided on its own target populations, goals, and service strategies. Many sites combined center-based parenting skills training with home visiting. Other activities included provision of infant mental health services, development of protocols for continuity of care for children who are removed from home, provision of transportation, and joint training and participation in child-specific meetings. A final report²⁰ synthesizes findings and implications for practice.

CONCLUSION

Rather than operating as two separate and independent sectors, child welfare and early childhood entities can build intentional collaboration around their shared goals of improving family functioning and promoting optimal development.

When early childhood and child welfare systems collaborate, policies and practices shared by both sectors can allow infants and toddlers to be viewed through a developmental lens. Partnerships between child care and child welfare agencies can help ensure that the developmental needs of the most vulnerable populations are being identified and met. These agencies can educate each other regarding their respective responsibilities as well as the services, benefits, and opportunities each has to offer to meet these goals.

ADDITIONAL ECE-CHILD WELFARE PARTNERSHIP RESOURCES

- Cohen, J., Cole, P., & Szorm, J. (2011). *A call to action on behalf of maltreated infants and toddlers*. Washington, DC: American Humane Association, Center for the Study of Social Policy, Child Welfare League of America, Children's Defense Fund, & ZERO TO THREE.
- Stepleton, K., McIntosh, J., & Corrington, B. (2010). *Allied for better outcomes: Child welfare and early childhood*. Washington, DC: Center for the Study of Social Policy.
- Thornburg, K. R., Harris, T. L., & Hawks, J. S. (2011). *The state of child welfare in America: 2011*. Columbia, MO: Center for Family Policy and Research.
- U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2010). *Child maltreatment 2009*. Washington, DC: Author.
- U.S. Department of Health and Human Services, Administration on Youth and Families. (2011, April). *Child welfare and child care partnerships: Partnering with families involved in child care subsidy programs* (Information memorandum). Washington, DC: Author.
- Wulczyn, F., Ernst, M., & Fisher, P. (2011). *Who are the infants in out-of-home care? An epidemiological and developmental snapshot*. Chicago, IL: Chapin Hall at the University of Chicago.

19 U.S. Department of Health and Human Services (2010, July 28). Head Start and Child Welfare Partnerships Information Memorandum. *Early Childhood Learning and Knowledge Center Retrieved* July 1, 2011 from http://eclkc.ohs.acf.hhs.gov/hslc/Head%20Start%20Program/Program%20Design%20and%20Management/Head%20Start%20Requirements/TMs/2010/resour_ime_004_01910.html

20 James Bell Associates (2009, April). *Early Head Start -Child Welfare Services Initiative Final Synthesis Report*. Retrieved July 1, 2011 from http://www.jbassoc.com/reports/documents/ehs%20final%20report%20volume%20i%204_22_09.pdf,