Supporting the Infant-Toddler Workforce

In 1994, the Carnegie Corporation of New York called the lack of public attention to the importance of the first three years of life “a quiet crisis” of infant and toddler neglect. Over the past decade, in part because of welfare reform, there has been an astounding increase in the number of infants and toddlers being cared for by non-family members. While there has been some media attention given to this as a social phenomenon, there has been little attention given to the importance of infant-toddler caregiver selection, training, or support. In fact, many parents, policymakers, and politicians view the infant-toddler caregiver more as a babysitter than as a professional educator of very young children.

The Birth to Three Project in Illinois is a state-wide, multidisciplinary, multiyear effort led by the Ounce of Prevention Fund to develop a comprehensive and coordinated system of preventative services for expecting parents and families with children birth to age three. The Project’s Training and Workforce Development Committee has been working to make recommendations for the development and coordination of a statewide birth to three training and workforce development system that meets the present and future needs of programs and staff that serve young children and their families.

Through focus groups, surveys, and discussions held throughout the state with providers, trainers, and educators, the Committee identified the following barriers to ensuring that practitioners who work with infants and toddlers are adequately prepared and supported to provide the best services possible:

• Opportunities for specialized training for staff who work with infants, toddlers, and their families is limited.

• Finding infant-toddler courses in community colleges or universities is difficult, and few institutions of higher education offer a specialization or certificate in infant-toddler work.

• Illinois lacks a clear career path for those working with very young children and their families.

Research on State Initiatives

The Committee began exploring the development of a voluntary infant-toddler credential as one way to overcome these specific barriers to the professional development of staff working with very young children. As part of this exploration, the Committee completed research on 13 states that have developed either an infant-toddler credential/certificate or a formal training program. The research, conducted in August 2001, found seven states (California, Indiana, Montana, New York, Utah, Wisconsin, and Wyoming) with a credential or certificate and six states (Delaware, Maine, Minnesota, Nebraska, North Dakota, and Tennessee) with a training program in infant-toddler studies. This multi-state research revealed the following commonalities in the design of infant-toddler training programs, as well as some important “lessons learned” during the process of developing an infant-toddler credential or certificate.

Commonalities

• Ten out of 13 states use the WestEd curriculum, alone or in combination with other materials and resources.

• The training is connected to college credit (3-15 credit hours) in 12 out of 13 states studied.

• There are minimal cost to participants. Financial aid is available through TEACH Scholarships, other state support, or private foundations in all 13 states.

“An infant-toddler credential would help define quality of care for infants and toddlers and create a career path for staff who work with young children and their families.”

Portia Kennel, Co-Chair, Training & Workforce Development Committee
Lessons Learned

Indiana
- Ensure the program meets the needs of many by having diverse stakeholders represented during the planning stage.
- Many people working in infant-toddler care are not interested in taking classes; others need coursework tailored to their education and literacy levels.
- Provide and maintain good facilitation until the initiative is fully implemented.

Wisconsin
- Adequate substitute care is necessary for most practitioners in order to participate in training.
- Involve the institutions that will be offering credit for the courses from the beginning.
- Developing a curriculum requires at least a full year.

Utah
- Add components to the professional development system over time; this gives many people the opportunity to participate in the process and the process is less overwhelming.

California
- It is difficult but crucial to get underrepresented groups involved.
- Using a consensus approach to decision making is beneficial as it helps ensure that when decisions are made everyone is on board and committed to successful implementation.

Montana
- Although the WestEd training-the-trainers program is expensive, WestEd helps trainers stay informed on the latest early childhood research through online information.
- Training is most effective when attended both by staff and director.

Wyoming
- Decide how the program will be evaluated—it is easier to build this in during the design process than after the program has begun.
- Making the credential a requirement of licensing ensures wide participation.
- Finding a train-the-trainer program that is consistent from year to year is important. (WestEd provides consistent information to trainers and ensures the state’s trainers are all delivering the same message to participants.)

New York
- It is very difficult to write an infant-toddler curriculum. Using packaged programs like WestEd may be more cost effective.
- Outreach to providers about the availability of the courses and certificate is essential to the success of the program.
- An infant-toddler certificate can meet the needs of other professionals such as pediatricians and public health nurses.
- It is important to find incentives for institutions of higher education to offer training.

For more information about the Birth to Three Project’s Training and Workforce Development Committee, contact Julia DeLapp at 312-922-3863 ext 510, or visit www.ounceofprevention.org.

For further information about research conducted by the Center for Early Childhood Leadership, call 800-443-5522, ext. 7703. Funding for the Center’s Research Notes is provided by the McCormick Tribune Foundation and the Illinois Department of Human Services. Individuals may photocopy and disseminate freely.