

Multnomah County Commission on Children, Families & Community

# EARLY CHILDHOOD FRAMEWORK

**A Community Tool to Help Plan and Coordinate Initiatives  
for Young Children and their Families**



**Early Childhood Vision: All children develop to their full potential**

## GUIDING PRINCIPLES

- Everyone in the community has a role in nurturing young children.
- Young children's needs are met primarily through their families; formal and informal systems that build on family strengths have the best opportunity to promote success.
- This framework is for all families and all children within our diverse community.

## GOALS

- Children benefit from developmentally appropriate active learning opportunities.
- Parents and families have the ability and support they need to nurture their children.
- Children develop social and emotional bonds and skills to support their continuing mental health.
- Children are physically healthy and grow to their full potential.
- The formal system provides the support that children and families need for success.

## Definitions Used in this Framework

In this document, we intend to speak simply yet broadly, to represent the diversity of our community:

**Parent:** a person with primary responsibility for a nurturing, housing and raising a child.

**Family:** the constellation of people who share a bond in raising a child – including biological, adoptive, step and foster parents, grandparents, relatives, extended families, etc.

**Community:** informal groupings of family, friends, neighbors; faith and cultural communities; and the community at large.

## The Framework Structure

This document incorporates thoughts and suggestions received from Early Childhood Council members and community groups into a short set of goals, desired outcomes and key strategies. A Summary of this Framework is also available as a brochure-style folded page. Terms used here include:

**Goals:** Where do we want to go? What do we want to accomplish? What will be the result if we succeed?

**Desired Outcomes:** What are the key results that, if accomplished, will achieve the goal? Desired outcomes may be thought of as “mini-goals” that, taken together, move toward a goal.

**Strategies:** How do we get from here to there? Which strategies are most needed over the next 6 years to achieve these goals and outcomes? The prior goal of strengthening high risk families, and the State’s category of Parent Education, are now distributed among every column.

Not every strategy that will be needed to reach these goals could be incorporated into this document. The Early Childhood Council thus urges readers to remember that an effective system for nurturing the youngest members of our community will require the efforts of many people working in many sectors. Not only parents and families are involved, or people working in health, human service and education fields, but also neighbors, voters, business owners and the many others who will benefit from having a healthy and capable new generation among us.

## Common Themes

A number of themes emerged from the input received. These are highlighted here for extra attention.

- Serving young children involves serving parents and families; children thrive when families thrive also.
- Readily available, comprehensive, centralized information is needed across this Framework.
- Services should be provided where families and children are located, at times convenient for families, and in the family’s own language.
- Home visiting is needed after each child’s birth to provide parenting education, and screen for risks and needs.
- Coordination among formal and informal supports is needed at the family level, allowing the family to participate as partners.
- Support is needed to help children and families through major transitions, especially from early care to school, from high school to higher education, and from teen to adult services.
- Early Care and Education is used to include: all child care (at home, in home care settings, or at centers); Head Start; early intervention; day treatment; pre-kindergarten; pre-school; and all settings in which young children are cared for and encouraged in their development.
- Child Development includes all areas of the young child’s development, including physical, social/emotional, and brain development.



# Early Childhood Vision: All children develop to their full potential

The following goals and outcomes apply to all children and families, including those with unique challenges. All outcomes are important and are not listed in priority order.

## EARLY CARE AND EDUCATION

**GOAL: All children benefit from developmentally appropriate active learning opportunities.**

| Desired Outcomes   | Representative Strategies over next 6 years to achieve these Outcomes   |
|--|---|
| 1. People have the knowledge and ability to support a child's early learning.  | <ul style="list-style-type: none"> <li>• Offer parenting classes to complement early care and education programs (e.g. child care, Head Start).</li> </ul>  |
| 2. Parents and families are recognized as their child's first teachers, and actively participate in their child's education.                       | <ul style="list-style-type: none"> <li>• Build in parent participation and partnership in early care and education programs.</li> <li>• Help families support their child's early literacy and early learning.</li> </ul>   |
| 3. Quality child care that is safe, healthy and developmentally appropriate is provided across the continuum, from family through formal settings. | <ul style="list-style-type: none"> <li>• Design appropriate strategies to encourage quality in all kinds of child care settings: centers; home-based care; and family, friend and neighbor care.</li> <li>• Increase nurse, mental health and specialized consultation in all types of child care settings, to promote quality care for all children, including children with unique challenges.</li> <li>• Expand child care provider networks.</li> </ul> |
| 4. Families are able to obtain accessible, affordable, quality child care.   | <ul style="list-style-type: none"> <li>• Provide realistic incentives for child care providers to offer part-time and non-traditional hours for working families.</li> <li>• Create more child care subsidies, so that families spend no more than 10% of their income on child care.</li> </ul>  |
| 5. Child care providers have the skills and resources to achieve positive child development.   | <ul style="list-style-type: none"> <li>• Increase knowledge and abilities of all child care providers, especially home based providers, about child development, social emotional needs, health issues, activities, safety, working with children with unique challenges, etc.</li> <li>• Increase accessibility of formal training for child care providers and tie to college credit.</li> </ul>  |
| 6. The child care profession offers stable jobs with living wages, supporting continuity of care for children.                                     | <ul style="list-style-type: none"> <li>• Work with funding sources/policy makers to secure stability and living wages, and tie wage enhancements to additional training.</li> </ul>   |
| 7. Schools support a coordinated, systematic transition from home and early childhood programs to school.  | <ul style="list-style-type: none"> <li>• Schools partner with early childhood programs in preparing for kindergarten transition.</li> <li>• Deliver programs such as parent child development services in partnership with elementary schools.</li> <li>• Elementary schools sponsor family activities to draw young children and their families into the school environment.</li> </ul>  |
| 8. Children begin schooling ready to succeed, and make age-appropriate progress in their education.  | <ul style="list-style-type: none"> <li>• Improve the quality of information on school readiness by having kindergarten teachers complete a kindergarten readiness survey for all children.</li> </ul>   |



# FAMILY SUPPORT

**GOAL: All parents and families have the ability and support they need to nurture their children.**

| Desired Outcomes   | Representative Strategies over next 6 years to achieve these Outcomes   |
|--|---|
| 1. People have the knowledge and ability to create a healthy family, given their own culture and values.   | <ul style="list-style-type: none"> <li>• Advertise more widely the 211 information line to assure all families have access to information to meet their basic needs.</li> <li>• Provide readily available information on parenting – from prenatal through childhood – to all families through a variety of sources (phone, web, classes).</li> <li>• Deliver services in ways that are specific to diverse communities' comfort levels.</li> <li>• Provide nurse home visits for all parents in the first 6 weeks after each child's birth for education and identification of additional needs.</li> <li>• Include independent living and parenting education in school curricula.</li> </ul> |
| 2. Families have economic well-being and financial stability.  | <ul style="list-style-type: none"> <li>• Offer financial education and peer support groups for people to learn about creating financial stability and remove barriers to accessing financial services.</li> <li>• Support parents to succeed in their education by providing: information about options, scholarships, child care, coordination, mentors.</li> <li>• Support a successful transition between high school and higher education.</li> <li>• Remove barriers to saving and encourage all families to save money.</li> </ul>  |
| 3. Families have access to basic needs, including: <ul style="list-style-type: none"> <li>• living wage employment;</li> <li>• adequate nutrition;</li> <li>• affordable, stable, decent housing;</li> <li>• affordable, reliable transportation.</li> </ul> | <ul style="list-style-type: none"> <li>• Encourage employers to provide living wage employment.</li> <li>• Increase supply of affordable, appropriate, stable housing that is available over a range of family incomes.</li> <li>• Increase supply of subsidized housing and housing vouchers.</li> </ul>   |
| 4. Families have access to community resources and informal supports that help build stable and healthy families.  | <ul style="list-style-type: none"> <li>• Reduce isolation by helping families build connections through informal supports and/or peer groups.</li> <li>• Provide community resources and services in locations where families live and in other natural settings.</li> <li>• Support parents through social events that increase community connections and positive parent child interaction.</li> </ul>  |
| 5. Children experience safety in their families and neighborhoods.   | <ul style="list-style-type: none"> <li>• Provide all families, employers and professionals with information on recognizing and preventing domestic violence and child abuse and neglect.</li> <li>• Expand programs for prevention and intervention with substance abuse, domestic violence, and child abuse and neglect.</li> </ul>  |
| 6. Employers have policies and practices that support families.  | <ul style="list-style-type: none"> <li>• Partner with businesses and associations to encourage programs that provide strong family support (e.g. Earned Income Tax Credit, 211, child care, parental and medical leave policies, breastfeeding-friendly policies, employee assistance, and employee savings plans).</li> </ul>  |





# SOCIAL EMOTIONAL DEVELOPMENT

**GOAL: All children develop social and emotional bonds and skills to support their continuing mental health.**

| Desired Outcomes   | Representative Strategies over next 6 years to achieve these Outcomes   |
|--|---|
| 1. People have knowledge of the stages of child and human development.   | <ul style="list-style-type: none"> <li>• Increase parent knowledge of healthy child development, and age appropriate expectations and activities.</li> <li>• Incorporate child development into middle and high school curricula.</li> <li>• Incorporate child and human physical and social/emotional development into core competencies in health and human service jobs.</li> <li>• Create a workforce well-trained in infant, toddler and preschool mental health and best practices for young children and their families.</li> </ul>  |
| 2. All people in a child's life contribute to the child's healthy social and emotional development.                | <ul style="list-style-type: none"> <li>• Conduct a public service campaign to promote the idea that community investment in a child's social/emotional development is time and money well spent.</li> </ul>   |
| 3. Each child forms stable, positive relationships with their parents, family and community.                       | <ul style="list-style-type: none"> <li>• Research and implement successful intervention strategies to break the cycle of intergenerational transmission of child abuse, neglect, and/or family violence.</li> </ul>   |
| 4. Families have access to community resources and informal supports that help build stable and healthy families.  | <ul style="list-style-type: none"> <li>• Provide easily accessible, centralized information on early childhood and family resources by phone (e.g. 211 Info), and by searchable websites.</li> <li>• Provide adequate, appropriate services, delivered when and where families need them.</li> <li>• Involve families in determining the types of services they will receive.</li> <li>• Help families navigate systems, e.g. with family peer mentors.</li> </ul>  |
| 5. Families with challenges or risks are identified and receive needed services.                                   | <ul style="list-style-type: none"> <li>• Adopt a developmental screening tool to be used consistently by community providers to increase the number of children screened.</li> <li>• Provide pre-intervention services for children who have a social or emotional development issue, but don't qualify for other programs.</li> <li>• Increase mental health consultation and services in partnership with other system of care providers (e.g. child care).</li> </ul>  |
| 6. Children are protected from, or helped to overcome, the effects of abuse, neglect, and trauma.                  | <ul style="list-style-type: none"> <li>• Provide all families and professionals with information on recognizing and preventing child abuse, neglect and childhood trauma, enhancing safety for each child; train clinicians in assessment and intervention.</li> <li>• Expand prevention, intervention and services for child abuse, neglect and childhood trauma by providing parent support networks, community education campaigns, universal parent education, free community events and activities and direct support programs such as drop-in respite centers, as well as substance abuse and domestic violence services.</li> <li>• Encourage early childhood programs to ask families when enrolling about whether they want support relating to stress or trauma.</li> <li>• Provide information to families about what children can and cannot cope with in terms of stress.</li> </ul> |
| 7. Children develop problem solving, social and communication skills, and have an optimistic view of their future. | <ul style="list-style-type: none"> <li>• Make social/emotional skill development a top priority in homes, childcare and educational settings, in order to prepare children for successful learning.</li> </ul>  |



# HEALTH AND WELLNESS

**GOAL: All children are physically healthy and grow to their full potential.**

| Desired Outcomes   | Representative Strategies over next 6 years to achieve these Outcomes   |
|--|---|
| 1. People have the knowledge and ability to achieve health and wellness for themselves and for their children.     | <ul style="list-style-type: none"> <li>• Provide readily available information on health and wellness to all families through their primary health care providers, as well as other sources (phone, web, classes).</li> <li>• Provide training for families at no cost on prenatal development, infant care and child development.</li> <li>• Expand hospital Welcome Baby visits to new parents to identify risks, strengthen families, and link families to services.</li> <li>• Go to families where they are, such as through home visiting programs, to provide parenting education and address other family needs.</li> </ul> |
| 2. Families have access to comprehensive, culturally competent and coordinated health, dental and social services. | <ul style="list-style-type: none"> <li>• Provide universal access to health and dental coverage for every child and adult.</li> <li>• Encourage all families to have a consistent health care provider.</li> <li>• Provide youth access to health care through school clinics.</li> <li>• Health care providers actively work with the family and other service systems to assure linkage, coordination and follow-up.</li> </ul>   |
| 3. Children are born healthy.  | <ul style="list-style-type: none"> <li>• Assure all pregnant women receive adequate prenatal care.</li> </ul>   |
| 4. Children receive adequate health care.  | <ul style="list-style-type: none"> <li>• Provide readily available information to families on when and where to obtain well-child care, and how to recognize other times to seek care, such as for illness, or guidance on child developmental.</li> </ul>  |
| 5. Children have the nutrition and exercise for healthy development.   | <ul style="list-style-type: none"> <li>• Create consistent messages regarding healthy children across service systems so that parents get the same messages about nutrition, physical activity and wellness, especially on local language-specific radio.</li> <li>• Provide readily available nutrition, health and meal preparation classes for parents.</li> <li>• All programs for children include physical activity and provide healthy snacks (e.g. child care, services and schools).</li> <li>• Increase access to community physical activities and play parks for children.</li> </ul>                                   |
| 6. Families with challenges or risks are identified and receive needed services.                                   | <ul style="list-style-type: none"> <li>• Adopt a developmental screening tool to be used consistently by community providers to increase the number of children screened.</li> <li>• Health providers routinely conduct developmental screening for all children seen, and follow through with coordination of referrals and services.</li> <li>• Provide home visiting to families with identified risks or challenges, for follow-up, coordination of services and education and strengthening the family.</li> </ul>   |
| 7. Families have access to services that support healthy physical, mental and emotional behaviors.                 | <ul style="list-style-type: none"> <li>• Increase awareness among providers that health and mental health are linked, and that both should be addressed concurrently.</li> <li>• Provide readily available alcohol and drug and mental health information and treatment, and link with health care providers.</li> <li>• Reduce barriers to successful treatment (e.g. homelessness, waiting lists, institutional bias, lack of appropriate diagnosis) and increase supports for recovery.</li> </ul>   |
| 8. Health practitioners link families to needed services and support.  | <ul style="list-style-type: none"> <li>• Connect health care providers to early childhood settings and elementary school.</li> <li>• Health care providers all receive training on early child development.</li> </ul>  |
| 9. Environments for children are healthy and hazard-free.  | <ul style="list-style-type: none"> <li>• Increase screenings in child care settings and family homes for substances that impact children's health and development, e.g. lead, asthma triggers.</li> </ul>   |

# EARLY CHILDHOOD SYSTEM

**GOAL: The formal system provides the support that all children and families need for success.**

| Desired Outcomes  | Representative Strategies over next 6 years to achieve these Outcomes  |
|---|--|
| 1. Every sector of the community is engaged in supporting families with young children.   | <ul style="list-style-type: none"> <li>• Develop a public information message that it is cost-effective to support young children, i.e. “invest early or invest often.”</li> </ul>   |
| 2. Families are involved in decisions about services and systems.   | <ul style="list-style-type: none"> <li>• Design ways to involve family representatives on advisory councils and decision-making boards.</li> </ul>   |
| 3. The early childhood system of care and education addresses the full spectrum of child and family needs, challenges and risks.        | <ul style="list-style-type: none"> <li>• Design ways to involve communities in planning about the programs and services they need and how these will be delivered.</li> </ul>  |
| 4. Programs and resources have the capacity to meet community needs, and are available to meet the needs of families of any background. | <ul style="list-style-type: none"> <li>• Adequately fund 211, so that county residents have full access to information about needed services.</li> <li>• Adequately fund elements of the early childhood system of care and education, so that services are available when needed.</li> </ul>  |
| 5. Programs are respectful of families and their needs and cultural identity.   | <ul style="list-style-type: none"> <li>• Providers successfully serve families of multiple cultures and languages, e.g. through use of bicultural/same culture staff, and respond to changing populations.</li> </ul>  |
| 6. Planning, implementation and delivery of services are well-coordinated among system partners.  | <ul style="list-style-type: none"> <li>• Design systems so that all early childhood services are integrated around the child and family in a single plan.</li> </ul>   |
| 7. The highest quality of services as we understand them today are used across the system of care.                                      | <ul style="list-style-type: none"> <li>• Universities and community colleges expand their mission of recruitment and training of high quality teachers, social workers, and all kinds of early childhood education and service providers.</li> <li>• Continue collaborative education and multi-disciplinary cross-training across all service systems, including public safety, social services, education and health.</li> </ul> |



## How this Framework was developed

Growing out of work envisioned in 2000 by a group formed by County Commissioner Lisa Naito, Portland Commissioner Dan Saltzman and Gresham Mayor Charles Becker, the first version of this Framework was developed by the Early Childhood Council of the Multnomah County Commission on Children, Families and Community (CCFC) and adopted by the Multnomah County Board in 2001.

In 2006, the State's Early Childhood Team led development of Oregon's Early Childhood Comprehensive Systems Plan, a broad vision of the strategies needed to "equip young children for school, work and life."

Given the many changes occurring within the early childhood field, the Early Childhood Council (ECC), a standing committee of the CCFC, undertook this amendment of the Framework to align goals with the State Plan, and update desired outcomes and strategies. Input on these proposed changes was obtained from a variety of groups and at a public meeting in fall 2007 before final adoption by the ECC and CCFC.

The next phase of this project will be for early childhood organizations and family representatives to collaboratively develop implementation strategies, partnerships and action plans that move us forward toward these goals.



**MULTNOMAH  
COUNTY**

## JOIN US!

Contact the Commission on Children, Families and Community  
421 SW Oak St. Suite 200, Portland, OR 97204  
503.988.4502  
or go to [www.ourcommission.org](http://www.ourcommission.org)

### The Early Childhood Council has sub-committees for our four goals:

Early Care and Education, Family Support, Social/Emotional Development, and Health and Wellness. These committees are open and welcome your participation.

