Of the 73.6 million children in the U.S. today, almost 20 million are under the age of 5. As the future innovators, workers, and leaders upon whom our nation’s long-term security and prosperity depends, they are America’s most important asset. But America’s youngest children are also vulnerable and too many of them are growing up in environments and under circumstances that don’t promote healthy early development. BPC’s Early Childhood Initiative, led by Rep. George Miller and Sen. Rick Santorum explores how, as a nation, we can better support young children and their families to make sure that all Americans start the journey of life with a fair shot at realizing their full potential and becoming successful, productive adults.

Summary of Recommendations

Supporting Families

Increase the value of and access to the federal Child Tax Credit.

- Establish a young child tax credit of $1,500 per eligible child for all families with children through age 5 (for a total credit of $2,500).
- Begin phasing in the credit at the first dollar earned and develop an approach that phases in the credit at a faster rate than current law.

Continue and build on effective home visiting models to provide critical support for families with infants and young children.

- Reauthorize the existing Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program for five years at (at least) the current level of federal funding.
- Expand state and local home visiting needs assessments to focus on integrating home visiting services into the broader continuum of early childhood support services.
- The Department of Health and Human Services (HHS) should work with states to innovate and support promising program models that add to the evidence base for home visiting interventions.
- HHS should complete and follow up on the Home Visiting Career Trajectories Project, which is focused on how to build career pathways for home visiting professionals.

Encourage further innovation, both in developing a broader array of effective, evidence-based strategies for supporting families with young children and in unlocking resources for implementing these strategies.

- Establish a national advisory committee to identify strategies to expand public and private insurance coverage for home visiting and other innovative family support interventions.
- The Innovation Center at HHS, in coordination with the Department of Education, should test innovative models of care that include “school readiness” as a quality measure.

Develop and adopt a new, national policy on paid leave.
Making Child Care Affordable for Families

Double federal Child Care and Development Block Grant (CCDBG) funding for children ages 0 to 5.

Increase the value of and access to the federal Child and Dependent Care Tax Credit.

- Double the amount of child care expenses eligible for the credit from $3,000 to $6,000 for one child (0 to 5) and from $6,000 to $12,000 for two or more children (0 to 5).
- Make the credit fully refundable.

Prioritizing Early Care Workforce Quality

Require states to provide expanded CCDBG resources at a 75 percent reimbursement rate.

Create a new, competitive grant program to encourage states to design state-level tax programs that increase access to high-quality early childhood programs for children ages 0 to 5.

The Department of Education should ensure that early childhood workers have access to Pell grants and other forms of tuition assistance for higher education.

The Department of Labor should prioritize the development of a child care apprenticeship program that focuses on improving the competency of child care managers and directors.

Encourage states to establish minimum levels of training and competencies for their child care workforce and to improve professional development systems for the child care workforce in ways that have been shown to impact child outcomes.

Addressing the Impact of Opioid and Substance Use Disorders on Young Children and Families

Align Title IV-E of the Social Security Act (Federal Foster Care Payments) with Child Abuse and Prevention Treatment Act (CAPTA) requirements to:

- Develop and implement a “plan of safe care” for substance-exposed infants and young children and their families.
- Report annual data to the federal government on the number of substance-exposed infants, young children, and families for whom a plan of safe care was developed, and report service referrals.

Require HHS to identify and share model strategies to support state and local implementation of “plans of safe care” and data collection and reporting.

Require the Substance Abuse and Mental Health Services Administration to encourage and provide guidance on how the Substance Abuse and Mental Health Services Block Grant (SABG) can be used to address treatment and recovery service needs for parents and their infants and young children, and integrate this funding with other available federal funding streams.

Amend Part C of the Individuals with Disabilities Education Act (IDEA) to improve linkages among services for early intervention and substance use disorders.

Learn More

To watch the video, read the full paper, and learn more about the key issues visit, bipartisanpolicy.org/earlychildhood

Linda Smith
Director of Early Childhood Initiative