An infant’s healthy social, emotional, physical and cognitive development helps form the brain’s architecture and leads to success in school, in life and in society. This healthy development can be supported in numerous ways, including high quality child care focused on the unique needs of infants and toddlers. By prioritizing quality child care for infants and toddlers, we can help ensure that all babies and toddlers are provided the best start in life.

“As of 2005, 58 percent of women with children under age 3 were in the labor force,”¹ requiring them to find a child care arrangement for their young child. Of the 12 million infants and toddlers in the United States², almost six million spend some or all of their day being cared for by someone other than their parents.³ “Infants and toddlers with employed mothers spend an average of 25 hours per week in child care, and 39 percent are in child care for 35 hours or more each week.”⁴ The type of child care arrangement varies according to a number of factors, including the age of the child, income level, immigration status, and race.⁵ Yet regardless of the circumstances, working parents seek accessible, high quality child care for their infant and/or toddler.

When it comes to infant/toddler child care, issues of quality can be some of the most challenging and important to address. The evidence associating the quality of infant and toddler care with early cognitive and language outcomes is “striking in consistency.”⁶ Furthermore, high quality child care is associated with outcomes that all parents want to see in their children, ranging from cooperation with adults to the ability to initiate and sustain positive exchanges with peers, to early competence in math and reading – all of which are key ingredients to later school success.⁷

States have employed a few strategies aimed at improving and maintaining the high quality of infant and toddler child care. One such strategy is the creation of Infant/Toddler Specialist Networks, designed to provide support to the infant/toddler caregiver workforce. This article will describe the function of infant/toddler specialist networks, how they are funded and structured within a state, and lessons learned from those who have created infant/toddler specialist networks.

What is an Infant/Toddler Specialist Network?
Healthy Child Care America (HCCA), an initiative funded by the Child Care Bureau and the Bureau of Maternal and Child Health, had developed a successful model of using health care consultants to improve the health and safety practices in child care programs throughout the country. As one of the goals of HCCA participation, each state was “to establish a network of child care health consultants, whose primary purpose is to build strong connections between health care professionals, child care providers, and families to support healthy and safe child care environments.”⁸ The health care consultants could provide a variety of services: training, assessing or developing health policies and practices, consultation and promotion of quality child care. Their work often focused on infants and toddlers, and in some states, laid the foundation for the role of the infant/toddler specialist.
Infant/toddler specialists are individuals whose job it is to provide support to early care and education professionals and caregivers serving infants and toddlers. These specialists support providers so that they can improve their caregiving practices and thus the quality of each infant and toddler’s daily experience. The infant/toddler specialist position is a new, and often vital, support within the professional development system that serves the needs of infants and toddlers in out-of-home care.

Typically there are four main responsibilities of the infant/toddler specialist, including offering professional development events, providing technical assistance, coordinating resources, and providing community education and support.

Building on the successful model established by child care health consultants, and numerous coaching and mentoring efforts, a number of states have established infant/toddler specialist networks designed to utilize a few highly trained experts to support the quality of numerous infant/toddler child care programs in a community. These structures are known as infant/toddler specialist networks.

California was the first state to create an infant/toddler specialist network, beginning in 1986. As of April 2006, 19 states are utilizing infant/toddler specialist networks to improve the quality of infant/toddler care in their state. The 19 states are:

- Alabama
- California
- Florida
- Indiana
- Iowa
- Kansas
- Kentucky
- Maine
- New York
- North Carolina
- North Dakota
- Ohio
- Oklahoma
- Pennsylvania
- South Dakota
- Tennessee
- Utah
- Washington
- West Virginia

All 19 specialist networks are funded in part by the Child Care Development Fund (CCDF), a federal program authorized by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, which assists low-income families, families receiving temporary public assistance, and those transitioning from public assistance in obtaining child care so they can work or attend training/education. Some states supplement the CCDF funding with Early Childhood Comprehensive Systems funding, Maternal and Child Health funding, foundation grants, and state funds.

The Organization of Infant/toddler Specialist Networks

The 19 infant/toddler specialist networks are structured in various ways to meet the needs of each individual state. Indiana, Kansas, New York, North Carolina, North Dakota, Ohio, Oklahoma and West Virginia utilize the Child Care Resource & Referral (CCR&R) agencies to house and operate their infant/toddler specialist networks. Other states partner with academic institutions, state or community government agencies, or Early Head Start to serve the infant/toddler caregivers in the most effective ways. For example, Kentucky’s infant/toddler specialists share offices with professional development counselors at Kentucky Community Technical College System sites. And in South Dakota, the infant/toddler specialists and
infant/toddler Tribal Coordinators are located at the early childhood enrichment offices and at the Tribal reservations.\textsuperscript{14}

States also vary in the number of infant/toddler specialists that are part of their network and how they are placed around the state. Most states have a statewide coordinator and specialists located regionally, locally or in areas of greatest need. New York funds one statewide infant/toddler coordinator and 16 regional technical assistance centers which house 23 infant/toddler specialists; while in Washington state, all 34 local health jurisdictions have at least one infant/toddler specialist and some have more (King County has more than 20).\textsuperscript{15} For more information about how each state structures its infant/toddler specialist network, see the table entitled, “Summary of States with Networks of Infant/Toddler Specialists,” in \textit{Keys to High Quality Child Care for Babies and Toddlers: Infant/Toddler Specialists} by the National Infant and Toddler Child Care Initiative @ ZERO TO THREE (hereby referred to as “the Initiative”).\textsuperscript{16}

\textbf{How to Create an Infant/toddler Specialist Network: Lessons Learned}

Infant/toddler specialist networks allow states to centralize their efforts to meet the unique needs of infant and toddler child care providers. While some states currently have infant/toddler specialist networks, many do not, and those that do are at varying levels of growth and development. In an effort to help states facilitate the creation and growth of their infant/toddler specialist networks, the Initiative gathered information about the lessons learned and best practices for implementing this innovative strategy. The information has been translated into a series of steps states can take to create their infant/toddler network. We list the steps briefly here, but more detail can be found in \textit{Key Steps for Creating An Infant/Toddler Specialist Network}.

- Step 1: Assess System Needs and Readiness to Support a Network
- Step 2: Determine the Scope and Focus of the Network
- Step 3: Identify and Secure Funding
- Step 4: Find a Home for the Network
- Step 5: Create an Administrative Structure
- Step 6: Design an Evaluation
- Step 7: Support the Network

As part of their work, the Initiative provides support and technical assistance to the infant/toddler specialist networks. They have created learning communities for States to help in developing deeper knowledge about specific elements of the early care and education system that support quality infant and toddler child care. Members of these networks are involved in each of the three learning communities, including a learning community focused specifically on the work within the infant/toddler specialist networks. For more information about the work of the Initiative, go to: http://www.nccic.org/itcc/index.htm.
