

# The Case for Early-Ed. Research - Education Week

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LETTER

## The Case for Early-Ed. Research

March 6, 2018

To the Editor:

In response to Nonie K. Lesaux and Stephanie M. Jones' Commentary on early education's need for more exacting research ("**Early-Childhood Research Is Out of Touch**," Feb. 14, 2018), better research is certainly welcome. But we don't want to lose sight of existing research about how children's earliest years can predict costly outcomes in adulthood.

All babies' early experiences help them develop important neural connections. The peaks in a child's brain development—for literacy, numeracy, social skills, and emotional control—occur from ages 1 to 3. The baby learns through a caregiver's choice of words, tone of voice, gestures, and facial expressions. If the caregiver does not hold the baby or communicate expressively, it can affect the child's long-term health and well-being.

Myriad factors affect this care, including poverty, trauma, and lack of awareness. Researchers at the University of Otago in New Zealand, who followed the progress of 1,000 children from birth to midlife, released a study last year that shed some light on negative outcomes from inadequate care. Pediatric examinations can identify children as young as age 3 who will by middle age have a greater need for health care, criminal justice, and social-welfare systems. Prevention and early intervention in these cases can turn the tide.

Hopefully, Lesaux and Jones's research will help us make progress. I have to applaud their invoking of "everyday problems" and "concrete solutions" to drive home the point that if a child's development is not supported in the family setting, educators and caregivers will have missed the boat.

Susan Ryan  
Executive Director  
Parent-Child Mother Goose Program  
Toronto, Canada

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Responding to Nonie K. Lesaux & Stephanie M. Jones’s article on early education’s need for more exacting research to make its case (“Early-Childhood Research Is Out of Touch,” Feb. 14, 2018), certainly better research is welcome, but we don’t want to lose sight of the existing research about what we can do in children’s earliest years to avoid strongly predicted costly outcomes in adulthood.

All babies’ early experiences, most of which are provided by the mother or primary caregiver, develop neural connections at an astonishing rate. The peaks in a child’s brain development – for literacy, numeracy, social skills and emotional control – all occur from ages one to three.

The baby learns through the caregiver’s choice of words, tone of voice, gestures, and facial expressions. If caregivers do not hold and cuddle the baby or communicate responsively and expressively, it affects the long-term health and well-being of children and of entire populations.

Myriad factors affect this care, including poverty (correlated with less talking to the children and usually less time for caregiving), neglect, trauma (correlated with psychiatric disorders and vulnerabilities), and simple ignorance from not having been well parented themselves, perhaps the most persistent factor.

Recent findings from researchers at the University of Otago in New Zealand showed that a pediatric examination, including a neurological evaluation and assessments of verbal comprehension, language development, motor skills, and social behaviour, can identify a small segment (about 20%) of children as young as age three who will by middle age have accounted for a disproportionate share (about 80%) of costly service use across a society’s health-care, criminal justice, and social-welfare systems.

The university’s Dunedin Multidisciplinary Health and Development Study followed the progress of 1,000 children born in 1972-73 from birth to midlife. The latest findings, published in 2016, measured service use by social welfare benefit months, fatherless child-years, tobacco smoking pack-years, excess obese kilograms, hospital bed-nights, prescription drug-fills, injury insurance-claims, and convictions for crime.

Clearly the pediatric examination in this Study may never be universally available, but it is nonetheless not always difficult to identify the relevant risk factors, such as poverty, trauma, or neglect, or the clinical or common sense signs, such as poor linguistic, social, or motor skills in comparison to the average child.

Prevention and early intervention in these cases has a chance of turning the tide, and hopefully Lesaux and Jones’s research will refine our strategies. I have to applaud their invoking of “everyday problems” and “concrete solutions” to drive home the point that if children’s development in the family setting is not supported, and any weakness not identified, during the rapid neurological development of the earliest years, we will to a large extent have missed the boat.

Susan Ryan, Executive Director  
Parent-Child Mother Goose Program  
Toronto, Canada

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COMMENTARY

## Early-Childhood Research Needs an Update

Preschool improvement starts with accurate data

By Nonie K. Lesaux & Stephanie M. Jones

February 13, 2018

To date, scientific research has played an important role in early-childhood education policy and practice. It has provided us with core knowledge about the role of early learning experiences and environments in shaping child development, shed some light on whether and how early education programs work, and has, at times, addressed key questions about policy and programming—whether measuring the impact of different curricular and instructional approaches or how to structure the preschool day.

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But the research has also provided an incomplete picture. To make early education's case, the field has relied primarily on a handful of seminal studies—most of which began in the 1960s and 1970s—that were conducted with small samples not reflective of the overall population and often focused on one specific program or model. This heavy reliance on a small set of outdated studies for our best evidence on preschool's effects has rightfully fueled skepticism about early education's value in today's policymaking and advocacy conversations.

Nationwide, **only 2 in 10 children have access to a high-quality early education experience.** Research in the last decade about the effects of preschool on children's learning and development shows that high-quality experiences are linked to better learning outcomes, but also underscores the challenge of designing and implementing high-quality education for all students.



—Luis Diaz for Education Week

There is a narrow focus on questions of whether or not preschool "works." What we're missing is clear consensus on the ingredients for a widespread improvement strategy that is effective across today's populations of students and the variety of early education contexts.

What do we, as two researchers studying early-childhood education, think would make the difference? We need a new generation of relevant, rigorous, large-scale research to inform a scalable improvement strategy for early education. This research should explore how different types of classrooms where young children spend their time have an impact on how they learn and grow, thereby providing current and more accurate data to bear on scaling practices and policies.

Getting to a place of evidence-based policymaking for improvement demands a body of evidence that captures and reflects demographic shifts in the population over the last several decades, particularly with respect to linguistic and cultural diversity and increasing immigration rates. Research also needs to reflect an awareness of how childhood stress and trauma affect learning. Critically, early-childhood research must also capture the

**"We need a new generation of relevant, rigorous, large-scale research to inform a scalable improvement strategy for early education."**



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growing number of children (upwards of 75 percent) who are currently in some sort of early-childhood setting and reflect that current landscape, ranging from informal care at home to group-based family or community settings to public or private preschools.

In 2017, we launched our own longitudinal study, which seeks to find out exactly what today's preschoolers need and how to deliver it. We hope it will serve as a model for states across the nation who are ready to build the next generation of scientific research in early education and care. The study is beginning with a statewide representative sample of 3- and 4-year-olds in Massachusetts who are in public, community, or parochial pre-K or in child care with parents, guardians, or relatives. We plan to follow children and families for several decades, as they transition from early education to formal schooling and beyond.

Ultimately, we hope to build a research blueprint that other states and research groups can adapt, thereby creating a richer portrait of the experiences of young children across the nation in their first years of education. Quantitative and qualitative information about early education and care settings, about family and provider experiences, and about the way children learn will, we hope, inform solutions for improvement.

Other researchers in this space should adjust their practices to spend less time on comprehensive interventions that do not lend themselves to scale and more time partnering with practitioners and policymakers to address everyday problems and identify concrete solutions for early education.

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District and school leaders, educators, and early education providers face significant hurdles to deliver on the promise of early education. Only through scientific research can we shed light on the features of settings that boost children's development, help set expectations for providers and policymakers, equip educators with knowledge and strategies to cultivate optimal learning experiences, and ultimately benefit children.

*Nonie K. Lesaux and Stephanie M. Jones are co-directors of the Saul Zaentz Early Education Initiative at the Harvard Graduate School of Education, which recently launched the Early Learning Study at Harvard.*

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