



Studies in the News for



Children and Families Commission

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Introduction to Studies in the News

Studies in the News: Children and Family Supplement is a service provided to the First 5 California Children and Families Commission by the California State Library. The service features weekly lists of current articles focusing on Children and Family policy. Prior lists can be viewed from the California State Library's Web site at <http://www.library.ca.gov/sitn/cffc/>.

How to Obtain Materials Listed in SITN:

- When available on the Internet, the URL for the full-text of each item is provided.
- California State Employees may contact Information Services at (916-654-0261; csinfo@library.ca.gov).
- All other interested individuals should contact their local library - the items may be available there, or may be borrowed by your local library on your behalf.

The following studies are currently on hand:

IMPROVED CHILD DEVELOPMENT

Building the Brain's "Air Traffic Control" System: How Early Experiences Shape the Development of Executive Function: Working Paper No. 11. By the Center on the Developing Child. (The Center, Harvard University, Cambridge, Massachusetts.) February 2011. 17 p.

Full text at:

http://developingchild.harvard.edu/library/reports_and_working_papers/working_papers/wp11/

[“Being able to focus, hold, and work with information in mind, filter distractions, and switch gears is like having an air traffic control system at a busy airport to manage the arrivals and departures of dozens of planes on multiple runways. In the brain, this air

traffic control mechanism is called executive functioning, a group of skills that helps us to focus on multiple streams of information at the same time, and revise plans as necessary. Acquiring the early building blocks of these skills is one of the most important and challenging tasks of the early childhood years, and the opportunity to build further on these rudimentary capacities is critical to healthy development through middle childhood and adolescence.”]

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“Age 26 Cost-Benefit Analysis of the Child-Parent Center Early Education Program.” By Arthur J. Reynolds, University of Minnesota and others. IN: Child Development, vol. 82, no. 1 (January/February 2011) pp. 379-404.

[“For every \$1 invested in a Chicago early childhood education program, nearly \$11 is projected to return to society over the children's lifetimes - equivalent to an 18 percent annual return on program investment, according to a study led by University of Minnesota professor of child development Arthur Reynolds in the College of Education and Human Development. For the analysis, Reynolds and other researchers evaluated the effectiveness of the Chicago Public Schools' federally funded Child Parent Centers (CPCs) established in 1967. Their work represents the first long-term economic analysis of an existing, large-scale early education program. Researchers surveyed study participants and their parents, and analyzed education, employment, public aid, criminal justice, substance use and child welfare records for the participants through to age 26. ‘Our findings provide strong evidence that sustained high-quality early childhood programs can contribute to well-being for individuals and society,’ said Reynolds, director of the Chicago Longitudinal Study and co-director of the Human Capital Research Collaborative at the University of Minnesota. ‘The large-scale CPC program has one of the highest economic returns of any social program for young people. As public institutions are being pressed to cut costs, our findings suggest that increasing access to high-quality programs starting in preschool and continuing into the early grades is an efficient use of public resources.’ The CPC program in the project provided services for low-income families beginning at age three in 20 school sites. Kindergarten and school-age services are provided up to age nine (third grade). Funded by Title I of the Elementary and Secondary Education Act, CPC is the second oldest (after Head Start) federally funded preschool program.” University of Minnesota, News Release (February 3, 2011). NOTE: Age 26 Cost-Benefit Analysis... is available for loan.]

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Strengthening Pennsylvania Businesses through Investments in Early Care and Education: How Investments in Early Learning Increase Sales from Local Businesses, Create Jobs and Grow the Economy. By Stephanie Schaefer and others. (America’s Edge, Washington, DC) 2011. 11 p.

Full text at: <http://cdn.americasedge.org/clips/PAearlyed-economic-analysis-report-2.pdf>

[“Business leaders from around Pennsylvania joined a bi-partisan group of lawmakers at the Capitol in urging state officials to continue investing in early care and education as a way to stimulate the economy. They pointed to a national report, America’s Edge, as the basis for their argument that early education pays off in the short-term and long-term. It shows every \$1 invested in early care and education in Pennsylvania generates \$2.06 in total spending and provides jobs for 45,000 people. In the long run, they say, this investment helps children enter school better prepared, more likely to graduate, more likely to succeed in college and have a higher earning capacity as adults.” The Patriot-News (February 9, 2011.)]

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An Evaluation of the Denver Preschool Program 2009-10. (Part I.) By Augenblick, Palaich and Associates, Inc. Denver Preschool Program: Report on Child Outcomes, 2009-10 School Year. (Part II.) By Mary Maguire Klute, Clayton Early Learning Institute. (Denver Preschool Program, Denver, Colorado) 2010. Part I, 117 p. Part II, 41 p.

[“Assessments measuring the effectiveness of the Denver Preschool Program, which provides tuition credits to families and grants to qualifying preschools, show a majority of kids leaving ready for kindergarten. Kids enrolled in DPP facilities made better than average progress in vocabulary, literacy and math during their preschool year, according to a 2010 evaluation, which also included surveys, interviews and focus groups. Nearly 75 percent scored at average or above on literacy and math assessments given to 200 students among nearly 6,000 who received tuition credits last school year. Nearly one-third of parents said they wouldn’t have enrolled their children in preschool without the financial assistance, according to the survey. Among 74 DPP sites, 96 percent either improved or maintained their rating by Qualistar, which assesses early childhood programs.... Created by a 2006 ballot initiative, the DPP has grown from 628 students in 2007 and is open to all Denver children in the year before they’re eligible for kindergarten.” Denver Post (February 9, 2011.)]

Part I (Parents and Providers): http://dpp.org/literature_50063/2010_APA_Eval

Part II (Child Outcomes): http://dpp.org/literature_50064/2010_Clayton_Eval

Related materials:

http://dpp.org/blog/Media_Room/post/Results_of_DPP's_2010_Evaluation_Now_Available/

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Podcast: Parents, Books and the Roots of Literacy. By Lisa Guernsey with guest Gabrielle E. Miller, National Executive Director of Raising a Reader. Early Ed Watch podcast. (Early Ed Watch Blog, New America Foundation, Sacramento, California) January 24, 2011. Program length: 19:53.

Podcast at:

http://earlyed.newamerica.net/blogposts/2011/podcast_parents_books_and_the_roots_of_literacy-43283

[“‘Early Ed Watch’ spoke with Gabrielle Miller, a former teacher and national expert on early literacy interventions.... Miller is now national executive director for Raising A Reader, a non-profit organization whose aim is to instill a love of reading among parents and children, especially those in poverty or who are otherwise disadvantaged. By working with Head Start centers, childcare centers, school districts and other community groups, the organization circulates 100 books each year to participating families. Family book reading and library usage has gone up among participants and a [study](#) in San Francisco County in 2003 showed that preschool children in the program scored higher than their peers on assessments of pre-reading, comprehension and book knowledge.”]

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IMPROVED FAMILY FUNCTIONING

“Promoting Effective Parenting Practices and Preventing Child Behavior Problems in School among Ethnically Diverse Families from Underserved, Urban Communities.” By Laurie Miller Brotman and others. IN: *Child Development*, vol. 82, no. 1 (January/February 2011) pp. 258-276.

[“This study examines the efficacy of ‘ParentCorps’ among 4-year-old children (N = 171) enrolled in prekindergarten in schools in a large urban school district. ‘ParentCorps’ includes a series of 13 group sessions for parents and children held at the school during early evening hours and facilitated by teachers and mental health professionals. ‘ParentCorps’ resulted in significant benefits on effective parenting practices and teacher ratings of child behavior problems in school. Intervention effects were of similar magnitude for families at different levels of risk and for Black and Latino families. The number of sessions attended was related to improvements in parenting. Study findings support investment in and further study of school-based family interventions for children from underserved, urban communities.” NOTE: Promoting Effective Parenting... is available for loan.]

More information on ParentCorps (NYU Child Study Center) at:

http://www.aboutourkids.org/research/institutes_programs/institute_prevention_science/programs

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“Low-Income Mothers’ Material Hardship and Children’s Socioemotional Well Being. By Afshin Zilanawala and Natasha V. Pilkauskas, Columbia University. *Fragile Families Working Paper*. No. WP11-02-FF. (Center for Research on Child Wellbeing, Princeton University, Princeton, New Jersey) February 2011. 36 p.

Full text at: <http://crcw.princeton.edu/workingpapers/WP11-02-FF.pdf>

[“Research suggests that children from low-income families are more likely to exhibit behavioral problems than children from wealthier families and these adverse behaviors have long-term detrimental effects on academic outcomes, health and earnings. In this paper, we examine the relationship between material hardship, an economic indicator that describes concrete adversities, and child behavior. Specifically, we use data from the Fragile Families and Child Wellbeing Study to examine the following questions; (a) Is material hardship associated with child socioemotional behavior, (b) Are particular hardships associated with socioemotional outcomes, and (c) Are there stronger effects for more recent or long lasting hardships? We find that children in households experiencing material hardship score significantly higher on aggressive, withdrawn, and anxious/depressed behaviors. Additionally, we find that a mother’s inability to pay bills, having utilities cut off, and having unmet medical needs have particular adverse affects on child behavior.”]

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Improving the Lives of Young Children: Opportunities for Care Coordination and Case Management for Children Receiving Services for Developmental Delay. By Carrie Hanlon, National Academy for State Health Policy. (The Urban Institute, Washington, DC) December 2010. 17 p.

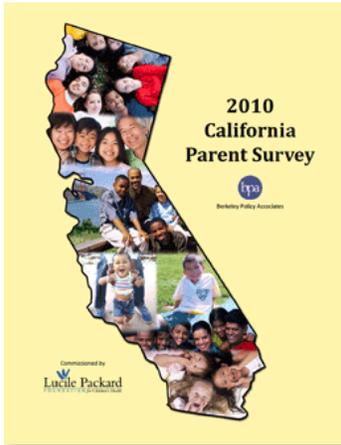
Full text at: <http://www.urban.org/UploadedPDF/412289-improving-lives-young-children-3.pdf>

[“Services that support healthy development in the years before starting school can reduce the incidence of disorders that have high costs and long-term consequences for children's health, education, and well-being. State policy choices can affect the extent to which Medicaid- and CHIP-eligible children receive developmental screenings and follow-up treatment. Unfortunately, access to follow-up care, such as Early Intervention services, continues to be a challenge. This brief examines states' Medicaid and CHIP policy choices that will be available under health reform and other federal legislation to develop a well-coordinated system of care for children receiving early intervention and other ongoing services.”]

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IMPROVED HEALTH

2010 California Parent Survey. By Berkeley Policy Associates. Commissioned by the Lucile Packard Foundation for Children’s Health. (The Foundation, Palo Alto, California) [December 2010.] 45 p.



["California is home to 9.9 million children, the largest child population of any state.... Over the past few years, the well-being of many children in California has been at risk due in large part to the state's protracted economic downturn. In fact, the proportion of California's children living in families with incomes below the federal poverty threshold - about \$22,000 for a family of four - rose from 17.31 percent in 2007 to 19.92 percent in 2009. Due to long-term effects of the Great Recession, child poverty is projected to remain high for at least the next several years. In addition, the state's budget crisis has placed enormous pressure on programs that protect and promote the well-being of children and families.... The Lucile Packard

Foundation for Children's Health commissioned the 2010 California Parent Survey to assess the current status of the state's child population from parents' perspectives. The survey is designed to provide timely information about how children are faring, and to bring attention to, and compel action on, key issues related to the well-being of California children. The survey gathered information on the demographic characteristics of California children and their families including, among others, race/ethnicity, income, parental age and marital status, and the primary language spoken at home. It also asked parents about a wide range of issues, including children's physical and emotional health, medical and dental coverage, education, special health care needs, family time, and child care. For example, questions were asked about children's stress, risk-taking behaviors, child and parental depression, the quality and safety of children's schools, the level of parental involvement in school, the adequacy of household income, how children spend their free time, whether families eat and read together, access and barriers to child care, neighborhood safety, experiences with racism, and the effects of the media. Based on a random-digit-dial phone survey (including cell phones), with a sample size of 1,685 children, the survey is representative of the state's child population. It was conducted in five languages depending on respondent's preference."]

Full text at: <http://www.kidsdata.org/parentpoll/parentsurvey-report.pdf>

Executive Summary and related publications at: <http://www.kidsdata.org/parentpoll/>
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California and U.S. Teen Birth Rates 1991-2009. By the California Department of Public Health. (The Department, Center for Family Health, Office of Family Planning, Sacramento, California) 2010. 11 p.

Full text at: <http://www.cdph.ca.gov/programs/tpp/Documents/MO-TPP-TBR-DataRelease-2009.ppt#266>

[“Continuing a trend in California of nearly two decades, births to teenage mothers dropped again in 2009, reaching a record low, Dr. Mark Horton, director of the California Department of Public Health (CDPH) announced.... There were 47,811 births to teens ages 15-19 in 2009, a reduction from the 51,704 births the previous year. ‘Early teenage childbearing has been recognized to have negative consequences for adolescent mothers, their children, and society as a whole,’ said Horton. ‘For all these reasons, achieving a record low teen birth rate in California is an important accomplishment.’ California’s teen birth rate declined from 35.2 births for every 1,000 teens in 2008 to 32.1 in 2009. In contrast, when teen births reached its peak in California in 1991, the teen birth rate was 70.9, more than twice as high as the rate in 2009. While Hispanic teens continued to have the highest birth rate in 2009, they demonstrated the largest absolute reduction when compared to other major race or ethnic groups. The Hispanic teen birth rate dropped from 61.9 in 2007 to 50.8 in 2009, a striking decrease of 11.1 teen births per 1,000. African-American teens had the second highest birth rate at 40.5 in 2007. The rate for African-American teens dropped to 37.0 in 2009, representing a decrease of 3.5 births per 1,000. The teen birth rate for Asian/Pacific Islander teens fell from 10.9 in 2007 to 8.5 in 2009, while the rate for White teens declined from 13.6 in 2007 to 11.9 in 2009. Despite California’s improvements in reducing births to teens, the state’s teen birth rate remains higher than the rate in many developed nations. The State of California continues to implement a number of programs aimed at preventing teen pregnancy. CDPH funds a variety of teen pregnancy prevention programs that include the Adolescent Family Life Program, Community Challenge Grant Program, the Information and Education Program and the Family PACT (Planning, Access, Care and Treatment) Program. The California Department of Social Services through the CalWORKs program supports the Cal-Learn Program and the California Department of Education funds the California School Age Families Education (Cal-SAFE) Program.” California Department of Public Health, News Release (February 1, 2011.)]

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“A Gradient of Childhood Self-Control Predicts Health, Wealth, and Public Safety.”
By Terrie E. Moffitt, Duke University and others. IN: Proceedings of the National Academy of Sciences. Published online before print. (January 24, 2011.) 6 p.

Full text at: <http://www.pnas.org/content/early/2011/01/20/1010076108.full.pdf+html>

[“Findings from a study following 1,000 children from birth to age 32 show that children who displayed more self-control at age 3 had better health, less dependence on drugs or alcohol and higher annual incomes as adults than children with less self control. They were also less likely to be single parents or to have been convicted of a crime. This was true even after taking into account factors such as IQ and social class. In another cohort of 500 sibling pairs, the sibling with more self-control had better outcomes, despite a shared family background. These findings underscore the importance of addressing self-control issues in the earliest years.” NECTAC eNotes (January 28, 2011.)]

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State-level Indicators for Social-emotional Development: Building Better Systems. By Elizabeth A. Isakson and others. (National Center for Children in Poverty, Columbia University, New York, New York) February 2011. 23 p.

Full text at: http://www.nccp.org/publications/pdf/text_997.pdf

[“Research repeatedly suggests that experiences and skills acquired early in life have a long lasting effect. Many interventions that promote social-emotional well-being and preventing mental health problems in children and their caregivers are clinically sound and cost effective. Social-emotional well-being is also seen as a crucial determinant of school readiness, while school readiness is critical to educational and health outcomes. Research evaluating appropriate interventions and investigating the importance of school readiness makes a strong case for creating a system to monitor social-emotional development in the effort to improve the well-being of young children. Indicators are a key part of this monitoring system and promote accountability by providing decision-makers and researchers with information they need to understand and meet local and state needs, to assess the provision and quality of interventions, and to address gaps in services to young children and families. The ability to track and assess social-emotional development of young children in a community poses a special challenge to policymakers. For many other areas within early childhood it is possible to understand the status and trends for child well-being at the population level. For instance, data on infant mortality, immunizations, and child welfare at the local, state and national level can be accessed to inform health promotion and prevention efforts. Currently, such multi-level data on social-emotional development for young children is not easily available. The challenge to quantify social-emotional wellness at a population level stems in part from the lack of universally accepted indicators and infrastructure for collecting information in this domain of child development. This report addresses the process of creating a system of indicators for social-emotional wellness, examines recent state experiences in this area, and describes a framework for moving forward in the development of social-emotional indicators for state policymakers.”]

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Child Health USA 2010. By U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. (The Department, Rockville, Maryland) October 2010. 80 p.

Full text at: <http://www.mchb.hrsa.gov/chusa10/pdfs/c10.pdf>

[“The Health Resources and Services Administration’s Maternal and Child Health Bureau (MCHB) is pleased to present ‘Child Health USA 2010,’ the 20th annual report on the health status and service needs of America’s children. MCHB envisions a Nation in which the right to grow to one’s full potential is universally assured through attention to the comprehensive physical, psychological, and social needs of the maternal and child population. To assess the progress toward achieving this vision, MCHB has compiled this

book of secondary data for more than 50 health status and health care indicators. It provides both graphical and textual summaries of relevant data, and addresses long-term trends where applicable and feasible.... Data are presented for the target population of the Title V Maternal and Child Health Block Grant: infants, children, adolescents, children with special health care needs, and women of childbearing age. ‘Child Health USA 2010’ addresses health status and health services utilization within this population, and offers insight into the Nation’s progress toward the goals set out in the MCHB’s strategic plan - to assure quality of care, eliminate barriers and health disparities, and improve the health infrastructure and system of care for women, infants, children, and families. Child Health USA is designed to provide the most current data available for public health professionals and other individuals in the public and private sectors. The book’s succinct format is intended to facilitate the use of the information as a snapshot of children’s health in the United States. Population Characteristics is the first section and presents statistics on factors that influence the well-being of children, including poverty, education, and child care. The second section, entitled Health Status, contains vital statistics and health behavior data for the maternal and child population. Health Services Financing and Utilization, the third section, includes data regarding health care financing and utilization of selected health services. The final sections, State Data and City Data, contain information on selected indicators at those levels.”]

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Infants of Depressed Mothers Living in Poverty. By Olivia Golden. (Urban Institute, Washington, DC) January 21, 2011. Video. Program length: 6:18.

Video at: <http://www.urban.org/publications/500205.html>

[“More than half of all infants living in poverty have a mother suffering from depression. Urban Institute Fellow Olivia Golden discusses the dangers and developmental risks these babies and toddlers face. While depression is treatable, many poor mothers do not receive care. But opportunities do exist, Golden explains, to identify these depressed mothers and connect them to help and support.”]

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Infants of Depressed Mothers Living in Poverty: Opportunities to Identify and Serve. By Tracy Vericker and others. (Urban Institute, Washington, DC) 2010. 8 p.

Full text at: <http://www.urban.org/UploadedPDF/412199-infants-of-depressed.pdf>

[“This brief offers a first-time national look at the characteristics, access to services, and parenting approaches for infants living in poverty whose mothers are depressed. Results reveal that eleven percent of infants living in poverty have a mother suffering from severe depression. At the same time, many of these families are connected to services, such as WIC, health care services, food stamps, and TANF, presenting opportunities for

policymakers and service providers to help these families. The Doris Duke Charitable Foundation funded this research as part of an Urban Institute project identifying service strategies to help connect depressed mothers with treatment.”]

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IMPROVED SYSTEMS OF CARE

Child Care and Development Block Grant Participation in 2009. By Hannah Matthews and Teresa Lim. (Center for Law and Social Policy, Washington, DC) January 2011. 4 p.

Full text at: <http://www.clasp.org/admin/site/publications/files/ccdbg-09-participation.pdf>

[“This factsheet provides a national overview of CCDBG participation in 2009. In 2009, CCDBG served a monthly average of approximately 1.63 million children, a slight increase of 6,700 children from 2008. State data on children served vary. About half of states (23) served fewer children in 2009 than 2008, while the other half (24 states) served more children. Less than a third of children served in 2009 were under age 3, while the 3 to 5 and 6 to 13 age groups each comprised more than one-third of children served.” CLASP, Early Childhood Education Update (February 2011.)]

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California Child Care Assistance State Profile. By the Center for Law and Social Policy. (CLASP, Washington, DC) [2011.] 2 p.

Full text at: http://www.clasp.org/admin/site/publications_states/files/ccmap09ca.pdf

[“This fact sheet presents state reported information on child care spending through the Child Care and Development Block Grant (CCDBG) and Temporary Assistance for Needy Families (TANF) funds used for child care, and information on children and families participating in CCDBG.” CLASP.]

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Infants and Toddlers in CCDBG: 2009 Update. By Hannah Matthews and Teresa Lim. (Center for Law and Social Policy, Washington, DC) January 2011. 4 p.

Full text at:

http://www.clasp.org/admin/site/publications/files/ccdbgparticipation_2009babies.pdf

[“This factsheet highlights key information about children under age three served in CCDBG. In 2009, more than 488,000 infants and toddlers received CCDBG-funded child care assistance in an average month. Among 20 states, infants and toddlers made up one-

third or more of all children served. More than half of infants and toddlers in CCDBG were cared for in center-based settings.” CLASP.]

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California Head Start by the Numbers 2009 PIR Profile. By the Center for Law and Social Policy. (CLASP, Washington, DC) November 2010. 4 p.

Full text at: http://www.clasp.org/admin/site/publications_states/files/hsdata2009ca.pdf

[“This fact sheet presents Head Start PIR [Program Information Report] data for all Head Start programs in the state - including preschool programs, Early Head Start, Migrant and Seasonal Head Start, and American Indian/Alaskan Native Head Start.” CLASP.]

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United States Head Start by the Numbers: 2009 PIR Profile. By the Center for Law and Social Policy. (CLASP, Washington, DC) November 2010. 4 p.

Full text at: <http://www.clasp.org/admin/site/publications/files/hsdata2009us.pdf>

[“This fact sheet presents Head Start PIR [Program Information Report] data for all Head Start programs in the nation - including preschool programs, Early Head Start, Migrant and Seasonal Head Start, and American Indian/Alaskan Native Head Start.” CLASP.]

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STUDIES TO COME

[The following studies, reports, and documents have not yet arrived. California State Employees may place requests, and copies will be provided when the material arrives. All other interested individuals should contact their local library - the items may be available there, or may be borrowed by your local library on your behalf.]

“Timing of Solid Food Introduction and Risk of Obesity in Preschool-Aged Children.” By Susanna Y. Huh, Children’s Hospital Boston and others. IN: Pediatrics (Published online February 2011.)

[“Starting formula-fed babies on solid food too early may increase their risk of becoming obese by the time they reach age 3, according to a prospective study. The study, which followed more than 840 young children, found that formula-fed infants introduced to solid food before four months of age had a 6.3-fold increased odds of obesity at age 3... Susanna Y. Huh, MD, MPH, of Children's Hospital Boston, and colleagues reported online in ‘Pediatrics.’ However, the same didn't hold for breastfed infants - who showed no impact of timing of solid food introduction on obesity at age 3... Huh and co-authors wrote. The findings from the longitudinal study support guidelines recommending holding off on solids until at least 4 months of age and preferably to six months of age,

the researchers noted. ‘Additionally, it further confirms the tremendous long-term nutritional value of breast feeding during the first six months of life,’ commented Cliff Nerwen, MD, of Cohen Children's Medical Center of New York City, in a statement sent to reporters. Increasing adherence to the guidelines might be one preventive strategy to reduce the rising incidence of childhood obesity, seen even among infants and pre-school age children, Huh's group suggested.” MedPage Today (February 7, 2011). NOTE: Timing of Solid Food... will be available for loan.]

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CONFERENCES AND OPPORTUNITIES

2011 EdSource Forum: The Future for Public Education in California. March 18, 2011. Hyatt Regency Irvine, California.

For more information and registration: <http://www.edsource.org/event-forum11.html>



[“As California starts a new year and a new decade - with new state leadership - what major forces will affect public education? And how will they either help or hamper our schools’ ability to cope with the dual pressures of financial adversity and the need to improve student achievement? Please join us for this year’s EdSource Forum and get a view of what this new decade holds from state and national leaders who see these issues, and the future for California public education, from a variety of different vantage points.”]

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2011 Society for Research in Child Development Biennial Meeting. March 31 - April 2, 2011. All meeting sessions will be in the Palais des congrès de Montréal, Montréal, Quebec, Canada.

For more information and registration: <http://www.srkd.org/>

[“Attending an SRCD Biennial Meeting is both exhilarating and exhausting. We hope that you will use some time every day to learn, to enhance your social connections, and to enjoy Montreal. We believe that you will find the program to be multidisciplinary, international, and interactive, offering high-caliber, leading-edge presentations and posters with a wide array of opportunities to network and socialize with fellow researchers.”]

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