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CENTER FOR THE CHILD CARE WORKFORCE



Center
for the
Child Care
Workforce

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The Center for the Child Care Workforce, CCW—founded as the Child Care Employee Project and formerly known as the National Center for the Early Childhood Work Force—is a nonprofit, research, education and advocacy organization committed to improving child care quality by upgrading the compensation, working conditions and training of child care teachers and family child care providers. CCW coordinates two major efforts to promote the leadership and career advancement for teachers and providers: the Worthy Wage Campaign and the Early Childhood Mentoring Alliance.

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From Welfare Roll to Child Care Worker

By TAMAR LEWIN

Many day care centers, especially for-profit chains, are hiring welfare recipients to care for young children.

In a survey of 158 centers in five cities, the Center for the Child Care Work Force, a nonprofit research and advocacy group in Washington, found that 35 percent of the centers employed welfare recipients.

But 80 percent of the for-profit chains, the fastest-growing segment of the day care industry, employed welfare recipients as against 40 percent of the independent, nonprofit centers, 30 percent of the church-sponsored centers and 20 percent of the independent, for-profit centers.

"For-profit child care has a history of going after low-wage workers," said Deborah Phillips, an author of the study. "They used to go after grandparents, and now they're going to welfare recipients. They are hired primarily as the lowest-paid assistants at centers with the lowest wages. Absent training and anything like a decent wage, this solution to welfare reform and need for child care is unlikely to provide women a route to self-sufficiency."

The Federal welfare overhaul law requires recipients with young children to find work, and that has increased the demand for both child care services and jobs for many women with little education or job training. Many states have responded to those dual needs by putting those women to work in child care centers, raising concerns both for the women hired and the children they care for.

The centers that pay the lowest wages are the ones most likely to employ welfare recipients. Fewer than half the centers that hire welfare recipients offer on-site training, and only 1 in 5 offers the kind of college-credit training required for the better-paying child care jobs.

"These women are just thrust into classrooms," said Ms. Phillips, who is also director of the National Academy of Science's Board on Children, Youth and Families. "If this was first-grade teachers we were talking

BY THE NUMBERS

Near the Bottom

The median hourly wage of child care workers falls short compared with other workers.

Minimum wage

\$5.15

Child care worker

6.12

Parking lot attendant

6.38

Animal caretaker

6.90

Preschool teacher

7.80

Secretary

10.81

Bus driver

11.56

Flight attendant

16.94

Kindergarten teacher

19.16

Source: Bureau of Labor Statistics

The New York Times

about, I don't think we'd consider doing this."

The new study is based on a sample of child care centers in Atlanta, Boston, Detroit, Phoenix and Seattle. In 1988, the center did an in-depth study of staffing and quality at 227 centers in those cities, finding that the best child care was in nonprofit centers, and those with the highest wages, lowest turnover, best training and fewest children assigned to each teacher.

The centers in the new study represent those from the original sample that were still operating and willing to participate in the follow-up. The 70 percent that survived and were included in the new study, the center said, tended to be the better

Low wages and little training for aid recipients who care for children.

ones.

But even among these centers, wages and turnover remain problems. The average turnover rate was 31 percent, with one-fifth of the centers reported losing half or more of their teaching staff in the past year. Turnover in the for-profit chains was 45 percent, compared with 20 percent in the centers accredited by the National Association for the Education of Young Children.

Centers that pay higher wages have less turnover. But the average child care worker earns less than a parking lot attendant. Entry-level child care jobs pay \$6 an hour, or \$10,500 a year, a rate that, adjusted for inflation, has increased just a penny an hour over the last decade, and one that keeps many child care workers below the Federal poverty line, \$12,830 for a family of three. Even child care teachers in the highest-paid category — mostly people with college degrees and early childhood training — earn \$10.85 an hour, or \$18,988 a year, less than the \$19,656 average salary of working women with a high-school diploma.

The decade between the two studies was a time of increased public funding for low-income families' child care, through the Child Care and Development Block Grant. For-profit chains tripled their revenues from public subsidies over the last decade, the study found, while independent nonprofit centers experienced a 4 percent decrease in revenue from public subsidies.

The center would not say which for-profit chains were included in the study.

The New York Times

WEDNESDAY, APRIL 29, 1998

Rise Seen in Durable Goods And Consumer Confidence

WASHINGTON, April 28 (Bloomberg News) — Consumer confidence rose to nearly its highest level in three decades during April, and orders and shipments for durable goods increased in March, according to reports released today.

The Conference Board's consumer confidence index rebounded to 136.7 points in April from 133.8 in March, putting it just below the 137.4 reported for February, which was the highest since October 1968.

And the Commerce Department reported that factory orders for durable goods increased in March, led by record demand outside the volatile transportation industry. Total orders rose four-tenths of 1 percent in March, after falling a revised eight-tenths of 1 percent in February, while orders excluding automobiles and airplanes rose nine-tenths of 1 percent last month.

U.S. Petroleum Data

In millions of barrels except refinery utilization

	Apr 24 1998	Apr 17 1998	Apr 25 1997
Gasoline production, daily	8.1	8.3	7.7
Distillate production, daily	3.5	3.4	3.3
Gasoline stocks	211.1	212.2	194.1
Distillate stocks	122.0	122.3	94.9
Crude imports, daily	8.3	9.5	8.0
Product imports, daily	1.7	2.1	2.2
Crude stocks	343.0	341.0	314.7
Crude production, daily	6.4	6.4	6.4
Refinery utilization (%)	95.7	97.7	94.0

Source: American Petroleum Institute

The reports suggested that the economy's growth remains robust — perhaps so robust that the Federal Reserve will move to head off inflation by raising interest rates.

"The economy is red hot," said Sung Won Sohn, chief economist at the Norwest Corporation in Minneapolis. "The U.S. economy is going to cool down, or the Fed is going to have to do it for us."

Based on today's durable goods report, economists at Standard & Poor's MMS in Belmont, Calif., raised their estimate of first-quarter gross domestic product growth to a 3.7 percent annual rate, just below the 3.8 percent growth rate posted for all of last year.

Concern increased this week that Federal Reserve policy makers might raise the overnight bank lending rate because they see few signs of an expected slowdown in growth. At their meeting on March 31 they reportedly adopted an inclination toward increasing the overnight bank lending rate.

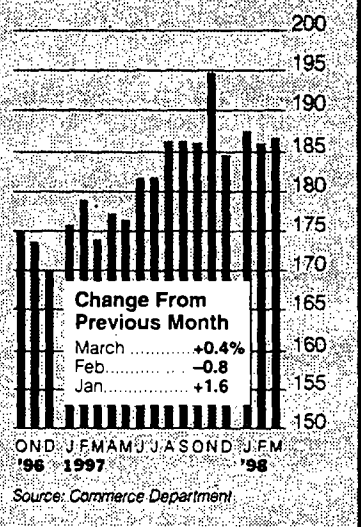
The Fed has been counting on growth to slow as Asian demand for American products declines. Though exports have slowed, so far there is little evidence that the broad economy has cooled.

The consumer confidence numbers suggest that the economy could gain strength. A Conference Board index measuring consumer expectations for the next six months rose to 115.5 in April from 107.9 in March.

The durable goods report showed that factory shipments of such goods,

Durable Goods Orders

Manufacturers' total new orders for durable goods, in billions of dollars, seasonally adjusted.



Source: Commerce Department

The New York Times

those designed to last three or more years, rose 1.4 percent in March after increasing 2.9 percent in February.

Business spending on capital equipment rose 2.5 percent in March, following a 1.8 percent increase in February. Shipments of production machinery rose by more than 30 percent in the first quarter of 1998 — the largest gain in almost 15 years, according to MMS.

Transportation orders, when adjusted for seasonal fluctuations, fell in March, though unadjusted figures showed growth, suggesting the seasonal figures were skewed. And the Boeing Company, the world's largest aircraft maker, reported a rise in March orders to 48 planes from nine in February.

The New York Times

WEDNESDAY, APRIL 29, 1998

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Current Data on Child Care Salaries and Benefits in the United States

March 1998



Center for the
Child Care Workforce

This report presents the most recent salary and benefits data available for the U.S. child care workforce. Although such data are not collected comprehensively or consistently across the country, certain types of occupational information are collected by the federal Bureau of Labor Statistics (BLS), and a number of independent child care salary and benefits studies have been conducted in recent years at the regional, state and local levels.

Center-based child care staff are described by the BLS's Occupational Employment Statistics Survey either as preschool teachers or as child care workers.¹ A "preschool teacher" is defined in this survey as a person who instructs children (normally up to five years of age), in a preschool program, day care center or other child development facility, in activities designed to promote social, physical and intellectual growth in preparation for elementary school. A "child care worker," on the other hand, is defined as a person who performs such duties as dressing, feeding, bathing and overseeing play. Unfortunately, these categories create a misleading division of the child care workforce, when in fact most teaching staff, regardless of title, take part both in promoting intellectual growth and in the caretaking duties described above.

The BLS also aggregates child care data across program types and regions, making it

impossible to study variations among such sectors of the child care field as for-profit and nonprofit centers, infant and school-age programs, or licensed and unlicensed family child care. This compendium, therefore, represents the best information available at the present time, but also points to the need for more consistent, reliable and comprehensive data collection about the child care workforce.

Much additional data have also been collected by the Center for the Child Care Workforce (CCW) and other organizations in a variety of states and communities, and these studies are referenced in the Appendices to this report. A number of these studies *do* compile data on the variations noted above among workers and sectors in the field. Appendix 1 presents compensation and turnover data collected in various states during or after 1995, and Appendix 2 contains a resource list of studies conducted prior to 1995 in those states which have not updated their data more recently. Less information is available, unfortunately, about family child care providers than about child care center employees. Only four states have documented family child care provider earnings.

Appendix 1 describes the average wages of "teachers" and "assistant teachers" (called assistants here), as documented in recent studies. Teachers are defined as those who have primary responsibility for a classroom or group of children, and who are often

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¹The BLS collects child care workforce data through numerous surveys in addition to the OES survey and uses such occupational titles for child care center employees as aides, child care assistants, day care assistants, teacher assistants, child care attendants, day care attendants, and early childhood teacher assistants. The OES definitions and data are used in this report instead of other surveys because these other titles are not mutually exclusive and are not used consistently across states.

April 28, 1998

Nicole Rabner
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear Nicole:

It was good to
see you last week
at the White House for
the Treasury Work Groups
report to the President.
Thanks for your help with
the Worthy Wage Day
message. Marcy and
Marcia

Center
for the
Child Care
Workforce



Because of President Clinton's commitment to improving child care, we are sending you an advance copy of our latest report, *Worthy Work, Unlivable Wages: The National Child Care Staffing Study, 1988-1997*, which will be released to the public on Wednesday, April 29, in anticipation of Worthy Wage Day on May 1. Given the recent increase in attention to child care issues by policy makers and the general public, the report is a timely look at the relationship between child care center quality and the compensation, training and job stability of child care teaching staff.

The original study in 1988 documented the critical relationship between workforce characteristics such as wages, benefits, and staff turnover and the quality of care children receive in center-based child care programs. The new update confirms previous concerns about the detrimental impact of the instability of the child care workforce on the quality of care available to young children. With more than 50 child care bills pending in Congress and the President's own strong commitment to quality child care for all American children, we hope that policy makers will find this report a useful tool as they craft legislation to address these issues.

Enclosed please find a copy of the report along with the related press release, media advisory, talking points, op-ed, and study highlights. On May 1, teachers and providers, directors, parents, policy makers and advocates will be participating in Worthy Wage Day activities nationwide. In recognition of this event, we have also enclosed a state-by-state list of Worthy Wage activities, and our 1998 salary compendium, *Current Data on Child Care Salaries and Benefits in the United States*.

We hope that you will use this new report and the other enclosed resources in your continued efforts to ensure better child care for America's youngest children – and better child care jobs for their teachers and providers.

Sincerely,

Claudia

Claudia Wayne
Co-Director

Marcy

Marcy Whitebook
Co-Director

Encl.

HOLD FOR RELEASE: APRIL 29, 1998

Contact: Marcy Whitebook, (510) 654-1778
Marci Andrews, (202) 737-7700

**Center
for the
Child Care
Workforce**



**New Study Confirms Concerns About Mediocre Quality in U.S. Child Care Centers
Stemming From Low Pay and High Turnover of Teaching Staff**

WASHINGTON, DC -- A new update of the 1988 National Child Care Staffing Study (NCCSS) confirms previous concerns, stemming largely from the instability of the child care workforce, about the mediocre quality of center-based care available to young children and its detrimental impact on children's development. Researchers have consistently found that the cornerstone of child care that promotes healthy development is the presence of sensitive, consistent, well-trained and well-compensated caregivers.

While the nine-year study covers a period of increased public funding of child care, through the Child Care and Development Block Grant first enacted in 1990, these funds were only minimally targeted to improving child care quality, or to rewarding and retaining trained and qualified caregivers. As a result, the new data show, these public funds have had little, if any, effect in stabilizing the child care workforce. The study also found that centers are increasingly hiring welfare recipients as child care workers, but poverty-level wages and poor access to training make these jobs an especially unlikely route to economic independence for women coming off public assistance.

Teacher Turnover Has Direct Impact on Children

Job conditions in the profession remain substandard, according to *Worthy Work, Unlivable Wages*, the NCCSS report released today. Wages have stagnated at near-poverty level, despite above-average levels of education in this workforce. Child care centers report high levels of job turnover and serious difficulty in finding qualified teaching staff, leading to problems of inconsistent care, under-staffing, and the strong potential for unsafe conditions for children. All the more troubling, the study findings come from a sample of above-average child care centers, since a disproportionate number of the lower-quality centers in the original sample has closed since 1988.

The release of these latest data comes at an opportune moment, as the White House and Congress prepare legislative proposals to address child care quality, affordability and staffing. Concerns over quality

are also growing with the surging demand for child care created by welfare reform, and mounting evidence on the significance of brain development during the first three years of children's lives and its lasting effects on their social and intellectual growth. The study was coordinated by the Center for the Child Care Workforce, a Washington-based research, education and advocacy organization, working with researchers from the University of California, Los Angeles, and the National Academy of Sciences.

"As the nation devotes major renewed attention to its child care system," states Marcy Whitebook, Ph.D., one of the study's principal investigators and Co-Director of the Center for the Child Care Workforce, "it is critical to understand and use these findings to make a much more directly targeted child care investment this time around." Like the original 1988 National Child Care Staffing Study and a 1992 update, the study gathered information on staffing and quality from a sample of child care centers in five metropolitan areas, Atlanta, Boston, Detroit, Phoenix and Seattle. The study was funded by the Foundation for Child Development.

Key Findings

- *Wages.* Child care teachers at the lowest-paid level earn an average of \$7.50 per hour or \$13,125 per year. Teaching assistants at the lowest-paid level earn an average of \$6.00 per hour or \$10,500 per year, and \$7.00 per hour or \$12,250 per year at the highest-paid level. Real wages for the highest-paid teachers within child care centers, who constitute a small segment of the overall child care workforce, average \$10.85 per hour or \$18,988 per year--a very modest raise over the past decade of approximately \$1.32 per hour.
- *Staff turnover.* Even in this above-average-quality sample of centers, more than a quarter of child care teachers (27 percent) and 39 percent of assistants left their jobs during the past year, for an average turnover rate of 31 percent for all staff. One-fifth of centers reported losing half or more of their teaching staff during the past year. In 1997, as in 1988, centers which paid better wages experienced less teaching staff turnover.
- *Hiring of welfare recipients.* Approximately one third of child care centers (35 percent) employ welfare (TANF) recipients, and these centers are more likely to pay lower wages across all positions, and to experience higher teaching staff turnover. Among centers owned by for-profit child care chains, fully 80 percent employ TANF workers.

- *Public subsidy.* More child care centers received public dollars in 1997 than in 1988, allowing more of them to assist low-income families with child care costs. But because this increased public funding for child care was rarely targeted to quality improvements or increased compensation, it has not resulted in better wages or lower staff turnover. On the contrary, centers paying the lowest wages--notably the for-profit sector of the industry--are experiencing the greatest increase in public subsidies.
- *Health insurance.* A substantial number of centers have improved their level of health coverage, especially for teachers, during a period of declining levels of coverage by U.S. employers as a whole. The majority of centers, however, still offer their teaching staff limited or no health insurance, despite heavy exposure to illness in child care employment.

Study Recommends Linking Public Funds to Quality Improvement

The study's authors urge an increase in public funds for child care, targeted to quality and compensation; stronger linkages between publicly-funded training and financial reward for child care staff; and reimbursement rate reform to bring public subsidy of child care centers in line with the true cost of providing quality care. The authors further recommend that all centers receiving public funds be required to demonstrate a commitment to the education, training, financial reward and job stability of their teaching personnel--the key element of program quality.

The release of the study also coincides with the seventh annual Worthy Wage Day, Friday, May 1, a nationwide day of action and education on child care quality, affordability and staffing issues by child care workers, parents and other advocates. Events to support the need for higher wages are scheduled across the nation, with particular emphasis in 20 states (CA, CO, FL, GA, IN, MA, MD, MN, NC, ND, NJ, OH, OR, PA, RI, TN, TX, VT, WA, WI). (Local contacts are available in each state. Contact Rosemarie Vardell, CCW, 1-800-879-6784 for Worthy Wage Day information.) Activities for the day include "job shadowing" by public figures in child care programs, promotion of "Model Work Standards" for center-based child care employment, legislative lobbying, and professional recognition events for child care teachers and home-based family child care providers.

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MEDIA ADVISORY

FOR IMMEDIATE RELEASE

Contact: Marci Andrews, Center for the Child Care Workforce, 202-737-4639

**AUDIOCONFERENCE on
IMPACT OF LOW PAY AND HIGH TURNOVER OF CHILD CARE WORKERS
ON QUALITY OF CARE
New Study to be Released April 29**

WHEN: Tuesday, April 28, 11:30 a.m. Eastern Daylight Time

WELCOME: Doug McCormick, President and CEO, Lifetime Television
SPEAKERS: Principal Investigators of the National Child Care Staffing Study:
Marcy Whitebook, Ph. D., Co-Director, Center for the Child Care Workforce
Carollee Howes, Ph.D., Professor of Education, University of California, Los Angeles
Deborah Phillips, Ph.D., Director, Board on Children, Youth and Families, National Academy of Sciences, Washington, DC
SPECIAL GUEST: Judsen Culbreth, Editor-in-Chief, *Working Mother*

WASHINGTON, DC—*Worthy Work, Unlivable Wages*, the new update of the 1988 *National Child Care Staffing Study* by the Center for the Child Care Workforce, confirms previous concerns about the detrimental impact of the instability of the child care workforce on the quality of center-based child care available to young children. The report will be released April 29, 1998, in conjunction with the 7th annual Worthy Wage Day (Friday, May 1), a grassroots effort led by child care workers in all types of settings to improve their working conditions and compensation. Events to support the need for higher wages are scheduled across the nation, with particular emphasis in 20 states (CA, CO, FL, GA, IN, MA, MD, MN, NC, ND, NJ, OH, OR, PA, RI, TN, TX, VT, WA, WI). (State-based contacts are available in each state. Contact Rosemarie Vardell, CCW, 1-800-879-6784 for Worthy Wage Day information.)

The report finds that child care wages have stagnated at near-poverty level, despite above-average levels of education in this workforce. Child care centers report high levels of job turnover and serious difficulty in finding qualified teaching staff, leading to problems of inconsistent care, understaffing, and the strong potential for unsafe conditions for children. These findings are all the more troubling in that they come from a sample of higher-quality child care centers; a large number of the lower-quality centers in the original sample has closed since 1988.

With more than 50 child care bills pending in Congress, this report is a timely look at the relationship between wages and training of child care workers and quality. The nine-year study of teaching staff at over 200 child care centers in five cities covers a period of increased public funding of child care, but finds these funds had little if any effect in stabilizing the child care workforce, and therefore, little impact on the quality of care. The study also examines the extent to which child care centers are hiring welfare recipients as child care workers.

This briefing provides an opportunity for journalists across the country to hear the lead researchers detail their findings about the substandard work conditions of the child care workforce and child care quality. Reporters will be able to ask questions with follow-ups after being recognized by the conference operator.

TO REGISTER FOR THE CALL, or TO OBTAIN A COPY OF THE MEDIA PACKET:
Fill out the form following this page and fax it back to the Center for the Child Care Workforce.

Fax Back Form for Tuesday, April 28, 1998
Child Care Audio Press Briefing
11:30 am Eastern Daylight Time

Please fax this sheet to 202/ 737-0370
by Monday, April 27, 1998
Attention: Marci Andrews, Center for the Child Care Workforce

PLEASE PRINT

Name _____

Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

☐

Yes, I would like to participate in the child care audio press briefing on April 28, 1998. Please send me access information and a press kit.

☐

No, I cannot participate in the child care audio press briefing on April 28, 1998, but please send me the press kit.

☐

No, I am not interested. Please remove me from your list.

WORTHY WORK, UNLIVABLE WAGES: THE NATIONAL CHILD CARE STAFFING STUDY, 1988-1997

Center for the Child Care Workforce, Washington, D.C.

Principal Investigators: Marcy Whitebook, Ph.D., Co-Director, Center for the Child Care Workforce; Carollee Howes, Ph.D., Professor of Education, University of California, Los Angeles; Deborah Phillips, Ph.D., Director, Board on Children, Youth and Families, National Academy of Sciences.

In 1988, the National Child Care Staffing Study first gathered information on staffing and quality from a sample of child care centers in five metropolitan areas—Atlanta, Boston, Detroit, Phoenix and Seattle—and returned to the study sites for updated information in 1992. In 1997, we again had the opportunity to contact the directors of the original sample of centers still in operation in order to collect basic information on staffing and funding nine years after the first data collection. The NCCSS offers a unique opportunity to look at the characteristics and stability of a segment of the child care workforce during a decade when significant new funding was infused into the US child care system. It also offers insight into the differences between centers that did and did not remain in operation during this period. The 1997 sample consisted of 158 centers providing full-day care that were still in operation and willing to participate in a follow-up interview, constituting 70 percent of the original sample.

Highlights of 1997 Findings

Child care teaching staff continue to earn unacceptably low wages, even in a sample of relatively high-quality centers.

- Real wages for most child care teaching staff have remained stagnant over the past decade. Teachers at the lowest-paid level earn an average of \$7.50 per hour or \$13,125 per year. Teaching assistants at the lowest-paid level earn an average of \$6.00 per hour or \$10,500 per year, and \$7.00 per hour or \$12,250 per year at the highest-paid level. (Figures are based on a 35-hour week and 50-week year.)*
- Real wages for the highest-paid teachers within child care centers, who constitute a small segment of the overall child care workforce, average \$10.85 per hour or \$18,988 per year. This translates to a very modest improvement over the past decade of approximately \$1.32 per hour.

Approximately one third of child care centers (35 percent) employ welfare (TANF) recipients, sometimes at less than the prevailing wage and often with limited training.

- Centers employing TANF recipients are more likely to pay lower wages across all positions, and to experience higher teaching staff turnover.
- Eighty percent of for-profit chain centers, 40 percent of independent nonprofit centers, 30 percent of church-sponsored centers, and 20 percent of independent for-profit centers currently employ Temporary Assistance for Needy Families (TANF) recipients.
- Only 16 percent of programs currently offer TANF recipients college-credit-bearing training, which is nearly always required by the better-paying child care jobs that offer the best hope of achieving economic independence.

More child care centers received public dollars in 1997 than in 1988, allowing more of them to assist low-income families with child care costs. But because this increased public funding for child care was rarely targeted to quality improvements or increased compensation, these dollars have not resulted in better wages or lower staff turnover.

- Centers paying the lowest wages are experiencing the greatest increase in public subsidies. For-profit chain centers have experienced a threefold increase in revenue from public subsidies over the past decade, and independent for-profit centers have seen such revenue double. Independent nonprofit centers, by contrast, experienced a four-percent decrease in revenue from public subsidies, and church-sponsored programs received a modest four-percent increase.

Child care centers continue to experience very high turnover of teaching staff, threatening their ability to offer good-quality, consistent services to children.

- More than a quarter of child care teachers (27 percent) and 39 percent of assistants left their jobs during the past year—for an average turnover rate of 31 percent for all staff—at a time when the demand for their services has grown dramatically.
- One-fifth of centers reported losing half or more of their teaching staff during the past year.
- Only 14 percent of child care teachers have remained on the job in the same center over the past decade, and only 32 percent have been employed in their centers for five years or more.
- Independent nonprofit centers are more likely to retain their teaching staff than are other types of programs, particularly those run by for-profit chains. Thirty-nine percent of teaching staff in the independent nonprofits have been employed in their centers for five years or more, compared to 20 percent in the for-profit chains and 29 percent in independent for-profit and church programs. These turnover figures are related to the significantly higher average salaries paid by independent nonprofit vs. for-profit chain centers.

Centers which paid better wages in 1997, as in 1988, experienced less teaching staff turnover. These are also the centers which were rated higher in quality in 1988.

- Centers which are accredited by the National Association for the Education of Young Children (NAEYC) pay higher wages to teaching staff, report lower teacher turnover for the past year, and have retained twice as many staff over ten years.
- Centers that have remained in business over the nine-year span of the study pay higher wages, employ more college-educated staff, and report lower staff turnover than did centers that have ceased operation. Preschool classrooms in centers that remained open were rated higher in quality in the initial study.

A substantial number of centers have improved their level of health coverage, especially for teachers, during a period of declining levels of coverage by U.S. employers as a whole. The majority of centers, however, still offer their teaching staff limited or no health insurance, despite heavy exposure to illness in child care employment.

- Twenty percent of centers offer fully-paid health coverage to teachers only, and 21 percent of centers offer fully-paid health coverage to teachers and assistants. Of those centers, fewer than 23 percent provide dependent health coverage.

*All dollar amounts used in this report are 1997 dollars, thus adjusting for the impact of inflation.

The best long-term solution to the problems identified in this study is a well-targeted new investment of public funding to ease the child care burden on parents and caregivers alike--and the mobilization of a well-informed American public that is ready to support this investment. Such a solution will be costly, and yet we must recognize that the status quo carries an even higher cost, in continuing to place the healthy development of young children at serious risk.

The answer is not simply to grow more programs, but rather, as Military Child Care and Head Start have shown, to foster higher-quality programs staffed by better-trained and better-paid adults. Nor is the answer to shift the burden onto consumers, but instead, to address at once the twin needs of improved workforce compensation and of greater affordability of services for parents. Our recommendations fall into four categories:

- ⇒ **An increase in public funds for child care, targeted to quality and compensation.** Any federal child care legislation should include specific language on targeting funds for child care workforce compensation. As was done in the Head Start Expansion and Quality Improvement Act, at least 25 percent of new child care funds should be targeted to improving the quality of services, and at least half of that amount should go directly to raising child care teacher and family child care provider salaries.
- ⇒ **Linkages between training and financial reward.** Public funding for child care professional development and teacher credentialing programs should be linked to concrete rewards, such as wage supplements or "retention grants," for teachers and providers who pursue further training and education. Without this linkage, such programs will continue to spend an undue proportion of funds on constantly re-training new groups of caregivers, as the best-trained personnel continue to leave the field for better opportunities elsewhere.
- ⇒ **Reimbursement rate reform.** Public reimbursements of child care programs fall far short of covering the true cost of providing quality care; at present, many states pay less than the going market rate. States receiving federal child care funds should be required to pay programs no less than the current market rate, and experimental efforts should encourage differential rates to programs based on such quality indicators as higher wages, low staff turnover, higher educational attainment of teaching staff, and center accreditation.
- ⇒ **Stronger standards tied to public funding.** All child care programs receiving public funds should be required to demonstrate a commitment to the education, training, financial reward and job stability of their teaching personnel--the key element of program quality.

The National Child Care Staffing Study, 1988 Highlights of Major Findings From the Original Study

The quality of services provided by most centers is barely adequate. Better-quality centers have:

- ❖ higher wages
- ❖ better adult work environments
- ❖ lower teaching staff turnover
- ❖ better educated and trained staff
- ❖ more teachers caring for fewer children

Better-quality centers are more likely to be:

- ❖ operated on a nonprofit basis
- ❖ accredited by the National Association for the Education of Young Children
- ❖ located in states with higher quality standards

Children attending lower-quality centers and centers with more staff turnover are less competent in language and social development.

- ❖ Staff turnover nearly tripled from 15 percent in 1977 to 41 percent in 1988.
- ❖ The most important determinant of staff turnover among the adult work environment variables is staff wages. Teaching staff earning the lowest wages are twice as likely to leave their jobs as those earning the highest wages.

The education of child care teaching staff and the arrangement of their work environment are essential determinants of the quality of services children receive.

- ❖ Teaching staff provide more sensitive and appropriate caregiving if they complete more years of formal education, receive early childhood training at the college level, earn higher wages and better benefits, and work in centers devoting a higher percentage of the operating budget to teaching personnel.
- ❖ In 1988, child care teaching staff earned less than half as much as comparably educated women and less than one-third as much as comparable educated men in the civilian labor force. Real child care staff wages (adjusted for inflation) decreased more than 20 percent between 1977 and 1988.

From the
Center for the Child Care Workforce

**Worthy Work, Unlivable Wages:
The National Child Care Staffing Study 1988 -1997**

In 1997, nine years after the original National Child Care Staffing Study, we interviewed directors at the centers still in operation to assess changes in wages, benefits and turnover; whether increases in public investment for child care have benefited the child care workforce; and the extent to which former welfare recipients are employed in center-based child care.

	Price	Quantity	Total
Worthy Work, Unlivable Wages - NCCSS 1988 -1997	*\$19.95		
Special Offer While Supplies Last: Three in One Worthy Work, Unlivable Wages 1988 -1997 & NCCSS Executive Summary (1988) & NCCSS Revisited (1992)	\$25.00		
National Child Care Staffing Study - Final Report (1988)	\$15.00		
DC Residents add 5.75% sales tax to price of report(s)			
*CCW Members take 10% off original price)			
Shipping and Handling: 10% of price Min. \$5.00			
Rush delivery: ☐ next day ☐ 2nd day ☐ 3rd day Order by noon EST: UPS charges + \$10.00 handling fee			
Total Membership Dues and/or Donation (see reverse)			
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I currently work as a:

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☐ family child care provider

☐ CCR&R staff

☐ center director

☐ child care advocate

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Organization _____

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Complete this form and return with your payment to:
CCW, 733 15th Street, NW Suite 1037, Washington, DC 20005-2112
phone (202) 737-7700 fax (202) 737-0370 FED ID: 52-1958363

CCW Mission

The Center for the Child Care Work Force, formerly the Child Care Employee Project, is a nonprofit research, education and advocacy organization committed to improving the quality of child care by upgrading the training, compensation and working conditions of child care center teachers and family child care providers. CCW coordinates two major efforts to promote leadership and career advancement for teachers and providers:

The Worthy Wage Campaign

Whether we call ourselves child care workers, family child care providers, preschool or early childhood teachers, teacher assistants or caregivers, we work in a field where most people are undervalued and underpaid—a field that is continually losing its best workers because of poor wages and benefits. The Worthy Wage Campaign is a nationwide grassroots effort to mobilize to reverse the child care staffing crisis. Together, we strengthen our voices, foster respect, and promote accessible and affordable high-quality early care and education to meet the diverse needs of children and families.

The Early Childhood Mentoring Alliance

Throughout the country, mentoring programs have emerged as one of the most promising strategies to retain experienced teachers and providers, to support newcomers to the field, and to guarantee more reliable, high quality care for young children. Mentor teachers and providers gain new respect from co-workers and parents, renew their commitment to working with children and usually receive additional compensation. The Early Childhood Mentoring Alliance is a national forum for sharing ideas, information and technical assistance among mentors, program developers and policy makers.

CCW Membership Application

Option	Price	Total
Regular Membership—Receive CCW's biannual newsletter and 10% discount on selected CCW resources.	\$30 (teachers and providers pay \$15)	
Comprehensive Membership—Receive all the benefits of regular membership, plus action alerts, resource materials and other mailings from (check one): ☐ both ☐ Early Childhood Mentoring Alliance ☐ Worthy Wage Campaign	\$50 (teachers and providers pay \$25)	
Publications Subscription—Receive a copy of each new CCW report issued during the year.	\$75 (members pay \$50)	
Lifetime Membership—Entitles you to benefits for life of both comprehensive members and publications subscribers. (Choose preferred mailings under Comprehensive Membership.)	\$500	
Total Membership Dues		
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Complete this form (including the reverse side) and return it with your payment to CCW. Please complete one membership application per person. Questions? Call CCW at (202) 737-7700 Fax: (202) 737-0370
E-mail us at CCW@CCW.org



Op-Ed for Worthy Wage Day 1998

by Marcy Whitebook and Claudia Wayne

[Note: Use your own name(s) as author(s) when placing this op-ed with your local media, and add a one-line bio at the end. For example: "(Name) is a family child care provider and parent from Milwaukee."]

Quick: What group of people would do the fastest job of bringing the economy to a halt if they didn't show up for work tomorrow morning?

No, it's not the CEOs of all the multinational corporations. No, it's not your boss and your supervisor. It's not even the President and Congress.

If you're a parent, you've already guessed. You know who holds this country together on a daily basis. It's three million or more under-recognized people who allow the rest of us to seek a livelihood--and often don't earn a decent one themselves, even though they're helping to shape the lives of the next generation at the very tenderest age.

It's the child care teachers and family child care providers.

What would we do without them? As the President and Congress prepare to take a hard look at the American child care system this year, and develop bills and funding plans to make it work better, it's time to take this question very seriously. That's because roughly one in three child care workers leave the job each year--most likely to make a better living elsewhere, according to "Worthy Work, Unlivable Wages," a national study released this week by the Center for the Child Care Workforce. If you use a child care program, chances are your child has recently seen at least one trusted adult (if not several) come and go. And while we adults may talk blandly about "staff turnover" and "unstable arrangements," children view it quite differently. They're experiencing *loss*.

The answer to this child care crisis isn't simply for parents to pay more. If you're like most people, you know you're already stretching. But that doesn't mean that the people taking care of your child, whether in a center or their own home, are well paid--good care costs roughly twice the typical parent fee. As a slogan coined by a seven-year-old coalition of child care workers, parents and other advocates declares, "Parents can't afford to pay. Teachers and providers can't afford to stay. There's got to be a better way."

The coalition is called the Worthy Wage Campaign, and the "better way" is a major, well-targeted public investment that can bridge the gap between what families can afford and what it costs to provide good, reliable, nurturing child care. The campaign's centerpiece event every year is a nationwide Worthy Wage Day, held on May 1.



In *[your city or town]*, _____ will be happening, and here's how you can take part. *[Fill in with one paragraph on local details. You might want to use some of the following paragraph, or cut it if it duplicates what you've written.]*

Throughout the country, public figures of all kinds will be "job shadowing" in child care programs for the day, learning the hard way what demanding work this is, and receiving a symbolic, sobering "paycheck" for it when they're done. Child care workers will descend on legislatures and city halls to hold "story time for policy makers"--a reality check on the frustrations of trying to stay with the work they love. There are plenty of stories to tell: "I go to work sick because I don't have health insurance." (Neither do most child care teachers and providers.) "I have a college degree, but my son in high school earns more as a grocery checker." (The median child care worker wage is \$6.12 an hour, according to the U.S. Bureau of Labor Statistics--well below poverty level for a family of three.) And communities everywhere will be promoting a set of "Model Work Standards" for better child care jobs, drafted this year by the Worthy Wage Campaign.

You can join in by carrying the message to the White House and your elected officials: This country can't work without good child care. Parents depend on it. Many young children are at risk without it. If we're serious about reforming the welfare system, there has to be safe, reliable care for the children while their parents work. And the answer isn't simply to make our poorly-functioning child care system bigger. It's time to focus not only on quantity of care but quality--and Head Start, Military Child Care and several states have shown it can be done, by focusing on training and rewarding the child care professionals who are the cornerstone of quality.

If you use child care, take the opportunity on Worthy Wage Day to thank and honor the caregivers who help to keep your family going. But don't stop there: raise your voice for the kind of well-supported, first-rate child care system that will make the very idea of Worthy Wage Day obsolete.

Marcy Whitebook and Claudia Wayne are co-directors of the Center for the Child Care Workforce in Washington, D.C.

WORTHY WAGE DAY, MAY 1, 1998

STATE CONTACT		WORTHY WAGE DAY ACTIVITIES	AVERAGE SALARY*
WASHINGTON	Seattle		
	Lauren Tozzi (206) 325-2952 Barb Wiley (206) 322-8178	Kickoff union campaign with SEIU with a rally/march. Speakers: Karen Nussbaum (AFL-CIO), Debbie Schneider (District 925), Ingrid McDonald (SEIU) and Marcy Whitebook (CCW). Planning children/adults activities; having a workers' rights board hearing to talk about workplace issues; workshops on Model Work Standards and unionizing campaign. March through downtown to church.	preschool teacher: \$9.00 child care worker: \$7.19
	Olympia		
	Charlotte Dedman (360) 786-8907	Governor signed a proclamation from the Child Care Action Council. They are doing job shadows and a rally.	
WISCONSIN	Madison		
	Jackie Hilmer (608) 241-8843	Lobbying legislators in morning; In-service about worker issues (Model Work Standards, living wage, advocacy), attended by state representatives including Tammy Baldwin (running for Congress), March to Capitol followed by rally; Mayor and County Executives making proclamations; speak-out by providers, music and remarks from guests.	preschool teacher: \$8.39 child care worker: \$6.87

*Salary data are from the Bureau of Labor Statistics., 1996 State Occupational Employment and Wage Data. BLS defines a "preschool teacher" as a person who instructs children in activities designed to promote physical, social and intellectual growth and a "child care worker" as a person who performs such duties as dressing, feeding, bathing and overseeing play.

For additional statewide, regional or local salary data contact the Center for the Child Care Workforce at (202) 727-7700.

WORTHY WAGE DAY, MAY 1, 1998

STATE CONTACT		WORTHY WAGE DAY ACTIVITIES	AVERAGE SALARY*
PENNSYLVANIA	Philadelphia		
	Pamela Haines (215) 963-0094 Denise Dowell (215) 842-3050	Worthy Wage Rally with a "Can't Work for Peanuts" theme. Handing out peanuts downtown with a Worthy Wage message. Lobbying City Council about family child care regulations.	preschool teacher: N/A child care worker: \$6.67
RHODE ISLAND	Providence		
	Shannah Kurland (401) 351-6960	Speak out at state house - Focus on family child care provider contract with DHSS. Lobbying state legislators with May basket messages.	preschool teacher: \$9.71 child care worker: \$6.87
TENNESSEE	Nashville		
	Jane Hussain: (615) 650-8868	April 21, Teachers Night Out: honoring teacher, funds raised by parents. April 22, Directors Day: honoring directors. May 1st, 7th Annual March and Rally; Bill Purcell (former speaker of the house) is speaking.	preschool teacher: \$6.86 child care worker: \$5.57
TEXAS	Fort Worth/Dallas area		
	Jeanie Marberry (817) 577-2273 (817) 498-0064 (fax)	Cash and prizes give-away at the 1st Annual Child Care Professionals Wee-Rard Event.	preschool teacher: N/A child care worker: \$6.01
VERMONT			
	Mindy Deibler (802) 863-8425 (home)	NEAEYC Conference is April 30 - May 2; will be doing presentations during the conference followed by a reception honoring 2 early childhood teachers from Chittendon County; each receiving a \$100.00 professional development check, membership to child care providers associations.	preschool teacher: \$9.73 child care worker: \$7.00

WORTHY WAGE DAY, MAY 1, 1998

STATE CONTACT	WORTHY WAGE DAY ACTIVITIES	AVERAGE SALARY*
NEW JERSEY		
Alexis Holbrook (908) 755-5615 Denise Tepfenhart (973) 927-2768 (973) 927-7458 (fax)	Providers Appreciation Day on Friday, May 8th; using week from May 1 to May 8 to highlight work, wages, etc. of New Jersey providers. Getting packets to chapter representatives with press releases, buttons, job shadowing information.	preschool teacher: \$9.76 child care worker: \$8.94
N. CAROLINA		
Greensboro		
Christina Jeidy (336) 334-5376 Amanda Bennett (336) 621-0555	Job Shadow, followed by town meeting to discuss issues. Tying together "living wage" and "worthy wage" efforts. Child Care Appreciation reception Friday, April 24th. Worthy Wage stickers and Working Together postcards being distributed to all participating centers and homes.	preschool teacher: \$7.56 child care worker: \$6.41
Waynesville		
Betty Rathbone (704) 452-6618	Job shadowing at Haywood Community College. Worthy Wage stickers and Working Together postcards being distributed to parents in the five-county area.	
N. DAKOTA		
Judy Milavitz (701) 775-4473	Putting together action centers for staff and parents. Letter writing to legislators.	preschool teacher: \$7.84 child care worker: \$5.99
OHIO		
Betsy Loeb (614) 224-0222 (work)	Going to every family child care home for a show of appreciation, giving pin, bringing media. Working with center directors to promote accreditation and pledges to Model Work Standards.	preschool teacher: \$8.52 child care worker: \$6.77
OREGON		
Seth Goradietsky (503) 241-9443	Making a public building display from canvas cloths about quality and compensation; centers contributing, unveiling on Worthy Wage Day.	preschool teacher: \$7.31 child care worker: N/A

WORTHY WAGE DAY, MAY 1, 1998

STATE CONTACT		WORTHY WAGE DAY ACTIVITIES	AVERAGE SALARY*
INDIANA	Bloomington		
	Kathy Broughton (812) 336-6600	Taking flag banners to child care centers and homes and getting children's handprints in paints. Will fly banners throughout Bloomington to show how many children in care. TV station displaying children's art at public library. On WWDay, staff paid \$10.00 asking parents to make up the difference then send bill on to government. Also job shadows.	preschool teacher: \$7.29 child care worker: \$6.42
MASSACHUSETTS	Boston		
	Doris Raphael (781) 251-0720 Patty Bradley (617) 569-3221 ext. 21	Inviting many legislators to be job shadows on Friday, May 1. Inviting Senator John Kerry, Ted Kennedy; Mayor Menino is also participating.	preschool teacher: N/A child care worker: \$8.27
	New Bedford		
	Paula Sherman (508) 675-9699 (home)	Collaborating to make a tape to be aired on local access TV. Speakers, legislators and early childhood professionals will gather on April 30 for speak-out. Included will be children's art work and entertainment for children. Working with Coalition for Social Justice.	
MINNESOTA			
	Alvonnda Phoenix (612) 721-5511	Letters being sent to ask centers to make change based on Model Work Standards. Responses will be highlighted during news conference, along with centers that have good working conditions. Suggested wage increase of \$1.00 per hour. Parents sent letters asking them to increase fees by \$5/week and/or work with administration to improve wages/benefits.	preschool teacher: \$9.67 child care worker: \$7.88

WORTHY WAGE DAY, MAY 1, 1998

STATE CONTACT		WORTHY WAGE DAY ACTIVITIES	AVERAGE SALARY*
	Pasadena		
	Anne Chaney (626) 797-6142 (work)	Job shadowing, inviting Assemblyman Jack Scott and Senator Adam Schiff, community college president, city council members mayor. Rally at City Hall presenting shadowers with their checks.	
	San Diego		
	Kim Owen (619) 454-5904 Sue Rogers (619) 233-1744 (619) 233-3824 (fax)	Reception on Worthy Wage evening, giving awards to teachers that have been nominated by parents. Raised money for awards through businesses. Slogan contest for Day in the Park, winners honored at the Worthy Wage Day reception.	
	Redding		
	Donna Montelongo (916) 244-1891	Rally at courthouse.	
COLORADO	Denver		
	Ophelia Mejia (303) 322-3116 (home) (303) 340-7078 (work)	Reception at Governor's mansion, mayor scheduled to speak.	preschool teacher: N/A child care worker: N/A
FLORIDA			
	Marcia Seibert (813) 867-3224 (home) (813) 547-5756 (work) Francie Hunt (352) 375-2552 (home) (352) 392-4918 (work)	Job shadowing, asking businesses to participate. Possible Tampa Bay Devil Ray to job shadow. Having a "Raises not Praises" Reception with raffle, winners get Worthy Wage for a day. Getting feminists and labor speakers, putting up displays throughout the city, doing some job shadowing with city commissioners, participating in Stand for Children downtown. Passing out leaflets at legislative session.	preschool teacher: \$7.23 child care worker: \$6.78
GEORGIA	Atlanta		
	Joy Kale: (770) 463-2828	Rally at State Capitol.	preschool teacher: N/A child care worker: \$6.17

WORTHY WAGE DAY, MAY 1, 1998

STATE CONTACT		WORTHY WAGE DAY ACTIVITIES	AVERAGE SALARY*
CALIFORNIA	San Francisco		
	Kate Ashbey (510)970-2130 (510) 970-7102 (Fax) Pat Johnson Chandra Elstein (415) 776-4010 (415) 776-0276 (fax)	Gathering stories from teachers and providers and inviting Willie Brown to a "storytime" to discuss and illustrate the impact of wages on quality.	preschool teacher: \$9.98 child care worker: \$7.47
	Northern Alameda County		
	Jim Stockinger (510) 642-1123 Alvena Womack Johnnie Fort (510) 653-2984	City task force has allocated money for commitment incentives; rewards to people that have stayed in the field. On May 1st, these rewards will be given to teachers at a ceremony/awards presentation. Parents wearing green ribbons to work on May 1st.	
	Southern Alameda County		
	Adrienne Hodsdon Kathy Bollich (510) 786-6655 (510) 782-9315 (fax)	Rally at Chabot Community College, working on a singular demand they want to put before the County Board of Supervisors (ex: doing a commission on child care compensation).	
	Contra Costa County		
	Lillian Ayroso Nelda Mouton (510) 970-2130 (510) 970-7102 (fax)	Congresswoman Dion Aroner is meeting with them to discuss the California CARES legislation.	
	San Mateo County		
	Marna Caballero Claire Boss (650) 329-4236 (650) 329-4200 (fax)	Teacher's from GeoKids will be organizing Job Shadows for community leaders followed by a lunch and workshop on "Promising Practices for Improving Compensation". Teachers will be leafleting and marching in the local May Day Parade on May 2.	

American Academy of Pediatrics



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San Diego, California

September 11, 1997

Jennifer Klein

Special Assistant to the President for Domestic Policy

2nd Floor, West Wing

The White House

Washington, DC 20502

Dear Ms. Klein:

Thank you for the opportunity to provide suggestions about the Administration's child care policy and the upcoming White House Conference on Child Care. In addition to the recommendations provided in my letter of September 4, the American Academy of Pediatrics (AAP) would like to offer the following specific suggestions, pursuant to a request from your office.

Child care policy

The Academy offers the following suggestions for Administration policy. More detail is provided in the attached AAP testimony presented by James M. Poole, MD, FAAP, before the Senate Committee on Labor and Human Resources on July 17, 1997.

Establish and enforce federal health and safety standards. The Academy urges the President to propose the establishment of federal health and safety standards for all federally funded child care settings and to propose strong federal incentives (including financial resources) for states to adopt and enforce adequate health and safety standards for *all* child care programs. We believe that all out-of-home child care programs (including those for school-aged children) should be subject to standards such as those developed by the American Academy of Pediatrics and the American Public Health Association and published as *Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care* (hereinafter, "National Standards"), sponsored by the Maternal and Child Health Bureau, Health Resources and Services Administration (MCHB/HRSA) and currently under revision. At a minimum, all child care settings should be subject to the standards most essential to prevent death, disease, and disability, as set forth in *Stepping Stones to Using Caring for Our Children -- Protecting Children from Harm* (hereinafter "Stepping Stones"), also sponsored by MCHB/HRSA.

Promote licensing and professionalism of early child care and education professionals.

We recommend that the President establish federal incentives, resources, and guidance to facilitate state licensing, certification or credentialing of all individuals who provide child care or who may be responsible for children or alone with children in a facility.

Standards should be set for education and training of both child care providers and staff of state licensing agencies. (Currently, most states do not have a process for licensing or otherwise regulating individual child care providers. Staff qualifications are evaluated as part of a facility licensing process, and must be re-examined each time an individual changes facilities. This is time-consuming, cumbersome, and leaves room for error.)

One of the characteristics that correlates most closely with better quality child care is the pre-service and ongoing, in-service training of personnel involved in caregiving. In addition, many state agencies employ personnel who lack the skills to make valid observations and to indicate to non-compliant providers how they should improve their performance. These staff should receive both pre-service and in-service training as well.

Make early childhood education and care available and affordable for preschool

children. As he did with respect to health care for children, the President should propose additional public funding to ensure that all children have access to safe, developmentally appropriate, and affordable early childhood education/care for children when they are not being cared for at home. The President is in a position to convey the great need for and importance of high-quality child care, and to help the American public understand that child care is early education and that public education should be funded when it counts the most -- in the earliest years, if parents need or choose to work -- as well as after age five when all children have access to public schools.

Financing of safe and healthful child care must come from a combination of public and private subsidies or tax credits for the cost of care, wherever it is provided, that exceeds the reasonable ability of parents to pay for care themselves. Parents of young children generally have less disposable income than at any other phase of their lives. As a nation, we do not ask parents to pay the full cost of education for their children after they reach kindergarten or first grade. Expecting parents to carry this burden for their younger, most vulnerable-age children results in bargain-hunting that buys inferior care for many infants, toddlers and preschoolers. Just as society supports those elderly who can no longer fully support themselves, we must support the young families raising our next generation who cannot afford quality early care and education for their offspring.

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Immediate Executive Actions

We recognize that the President must enlist the support of Congress and the American people to implement the above proposals. However, we also believe that there are a number of steps that the Administration could take right away:

1. Continue the federal government's ongoing efforts to improve the availability and quality of child care through the activities of the Maternal and Child Health Bureau and the Child Care Bureau, such as the "Healthy Child Care America Campaign" and the National Resource Center for Health and Safety in Child Care.
2. Distribute "Stepping Stones" to all Governors, and publicly challenge the Governors and state legislatures to implement these standards in their states.
3. Direct the Department of Health and Human Services to undertake a comparison of all state laws and regulations with "Stepping Stones" and the "National Standards," and to publicize the adequacy of state health and safety regulations for child care in each state. (Alternatively, incentives and technical assistance could be provided to support each state in comparing its own standards with the "National Standards.") To facilitate periodic assessments, states should be encouraged to code their regulations in accordance with the "National Standards."¹
4. Monitor the effects of changes in welfare policy on the supply and quality of child care, and the resulting consequences for children and families.
5. Encourage states -- perhaps through developing a model law -- to establish, through statute, a state-level commission on child care, charged with developing a child care plan and facilitating cooperation among government, human services agencies, schools, employers, pediatricians and other health care providers, and caregivers, to ensure that the health, safety, and child development needs of children are met by child care services provided in the state.
6. Disseminate (and/or assist states in disseminating) information to parents on child care standards and quality so that they can make wise choices about their child care options.

¹ Currently, comparisons of state and local regulations with the "National...Standards" can be done only by tedious work taking many person-hours. Comparison of state and local standards with the ideal could be conducted much more efficiently if uniform codes (topic headings and numbering) were employed.

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Child Care Conference

As indicated in my letter of September 4, we believe that the conference should address how to ensure access to quality child care for all children (including those from working poor families and children with special health care needs) and ways that child care settings can serve as points of access for health promotion and disease prevention information and services. In addition, we believe the conference should highlight the relationship between early brain development and quality child care. In so doing, we hope that the conference can provide the President with a springboard for launching significant policy proposals, such as those mentioned above, and for conveying the importance of quality child care to the American people, especially in light of welfare-to-work efforts.

As mentioned in my earlier correspondence, we believe that these objectives are best achieved by inviting representatives from the child care advocacy community and others who are in a position to effect change, including educators, business leaders, state and local government officials, health care providers, parents, grandparents, and, child care providers (including staff) from all types of child care settings.

Let me take this opportunity to reiterate the potential role of the Healthy Child Care America *Blueprint for Action*, which identifies five goals for healthy and safe child care, and suggests 10 steps that communities can take to pursue those goals (see attached letter and enclosures). The *Blueprint for Action* could be used as a outline for conference participants to develop their own action plans. If you wish, we would be pleased to make a presentation at the conference about the Healthy Child Care America Campaign -- its accomplishments and its great potential as a resource and framework for change.

Invitees

In my September 4 letter, I suggested that community leaders in a position to effect change should be invited to the conference, including the AAP members in each state who have volunteered to lead child care initiatives, and each state's Health Systems Development in Child Care grantees. We would also like to suggest that the following Academy members be considered as conference "faculty" or presenters, based on their experience and interest in this issue:

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Robert Hannemann, MD, AAP President. Dr. Hannemann, who was a participant in the White House Conference on Early Childhood Development, practices general pediatrics at a multispecialty clinic in Lafayette, Indiana. He is the Associate Medical Editor of *Caring for Your Baby and Young Child*, the AAP's book for parents of children from birth to age five. In addition, he is the medical advisor for the monthly newsletter, "Your Growing Child," which advises parents on child development issues, and holds a visiting professorship in child psychology at Purdue University.

Susan Aronson, MD, AAP Board Member. Dr. Aronson directs "ECELS" -- the Early Childhood Education Linkage System -- a program of the Pennsylvania Chapter of the AAP that works in collaboration with several state agencies, private organizations and volunteer health professionals to provide technical assistance and training to the staff of the state child care licensing agency and to over 12,000 child care facilities. She also writes a column in EXCHANGE, a national magazine for child care directors. In addition, she participated with Hillary Clinton and ten other national leaders in the 1988 "French Study Tour" to learn about the French approach to child care. Dr. Aronson is also a member of the Advisory Committee to the "Healthy Child Care America Campaign," sponsored by the Department of Health and Human Services and administered by the AAP.

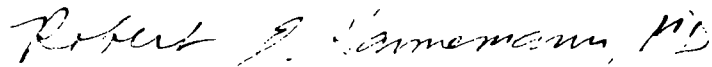
Peter Michael Miller, MD, MPH. Dr. Miller is the Chair of the AAP's national Committee on Early Childhood, Adoption and Dependent Care, which develops AAP policy with respect to early childhood development issues, including child care. He is a public health consultant in San Francisco with particular expertise in programs for children with special health care needs. Dr. Miller also serves on the Advisory Committee to the "Healthy Child Care America Campaign."

Other potential conference leaders include *James Poole, MD* (from Raleigh, NC), and *Jody Murph, MD, MS* (from Iowa City, IA), who are members of the AAP national Committee on Early Childhood, Adoption, and Dependent Care with particular expertise in child care issues. They, too, serve on the Advisory Committee to the "Healthy Child Care America Campaign." Dr. Poole also operates several child care facilities. Other members of the AAP Committee on Early Childhood with child care expertise include *Neal Kaufman, MD, MPH* (from Los Angeles, CA), and *Peter Gorski, MD, MPA* (from Boston MA).

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Again, thank you for the opportunity to comment. We look forward to working with the President to ensure that every child has access to high-quality child care.

Sincerely,

A handwritten signature in cursive script that reads "Robert E. Hannemann, MD".

Robert E. Hannemann, MD
President

REH/jeg
Enclosures:

- September 4, 1997, AAP letter and enclosures on the Health Child Care America campaign
(*Blueprint for Action*)
- July 17, 1997, AAP testimony, "Improving the Quality of Child Care," presented before the
Senate Committee on Labor and Human Resources

American Academy of Pediatrics



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September 4, 1997

Ms Jennifer Klein
Special Assistant to the President
for Domestic Policy
Second Floor, West Wing
The White House
Washington, DC 20502

Dear Ms Klein:

I was pleased to represent the American Academy of Pediatrics (AAP) at the White House Conference on Early Childhood Development and the press conference which preceded it in April 1997. I understand that the White House Conference on Child Care has been scheduled for October 23, 1997, and I would like to provide some suggestions for you to consider as you plan the conference.

To date, a fair amount of effort has already transpired to ensure children are in safe and healthy child care environments. In May 1995, Donna Shalala launched the Healthy Child Care America campaign at a meeting of the National Child Care Health Forum. The campaign was developed through a partnership between the Health Resources and Services Administration's Maternal and Child Health Bureau and the Administration for Children and Families' Child Care Bureau. Health and early childhood professionals from around the country came together to create a nationwide initiative for healthy child care. In partnership they developed the Healthy Child Care America *Blueprint for Action*, which identifies five goals for safe and healthy child care and suggests 10 steps that communities can take to pursue those goals (see enclosed). As you may be aware, the Academy assumed coordination of the campaign in October 1996. If you like, we would be pleased to highlight program accomplishments at the upcoming conference. In fact, I suggest that the *Blueprint for Action* be used as a framework for conference participants to develop their own action plans.

The conference should address how to ensure that quality child care is provided (including how to increase access to quality child care for the working poor) and ways that child care settings can serve as valuable points of access for health promotion and disease prevention. In this way, the conference would enhance ongoing efforts to ensure that every child has a medical home.

The relationship of quality child care to early brain development should be discussed, and strategies to incorporate children with special health care needs into child care environments should be highlighted.

Ms Jennifer Klein
September 4, 1997
Page 2

I suggest that community leaders in a position to bring about change be invited to the conference including the AAP members who have been identified in each state to serve in a position of leadership related to child care initiatives. The Health Systems Development in Child Care grantees who are developing a common vision for child care and fostering support services for families in each state should be included.

Representatives from health and other child care-related organizations should also be invited to participate. Finally, parents of children in a variety of child care situations and child care providers should be invited to participate on the conference planning committee and to attend the meeting, if space allows.

I am very pleased that you are planning to have a conference on child care issues. On behalf of the American Academy of Pediatrics, I and the members of the AAP Committee on Early Childhood, Adoption, and Dependent Care would be pleased to assist you in any way possible. Please feel free to contact me, or Laura Aird, MS, program manager for the Healthy Child Care America campaign at 800/433-9016, ext 7132, if you need additional information or further assistance.

Sincerely,



Robert E. Hannemann, MD

REH/lda
Enclosures

TESTIMONY
of the
AMERICAN ACADEMY OF PEDIATRICS
on
IMPROVING THE QUALITY OF CHILD CARE

before the
SENATE COMMITTEE ON LABOR AND HUMAN RESOURCES

Presented by

James M. Poole, MD, FAAP

July 17, 1997

Good afternoon Mr. Chairman, Members of the Committee. Thank you for the opportunity to testify today about the quality of child care in this country. My name is James M. Poole and I am testifying on behalf of the American Academy of Pediatrics (AAP), an organization of 53,000 primary care pediatricians, pediatric medical subspecialists and pediatric surgical specialists dedicated to the health, safety and well-being of infants, children, adolescents and young adults.

I am a practicing pediatrician in Raleigh, NC, and also serve on the national AAP Committee on Early Childhood, Adoption and Dependent Care, which advises the AAP Board of Directors on medical and public policy matters related to child care. In addition, I direct five child care centers serving 1000 children in the Raleigh area.

The Academy and its members have been, and will continue to be, extensively involved in child care issues. Perhaps most significantly, the AAP literally helped to “write the book” on child care quality. The AAP and the American Public Health Association, with the support of the U.S. Maternal and Child Health Bureau, developed comprehensive health and safety standards for out-of-home child care, published in 1992. This 400-page publication, *Caring for Our Children -- National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care* (“National Health and Safety Performance Standards”), supplies detailed standards with respect to almost every aspect of child care quality. The Academy has also published a video tape series to help child care centers implement the standards, and has published a manual for pediatricians and a brochure for parents concerning the quality of child care.

In addition, the Academy recently assumed coordination of the “Healthy Child Care America Campaign” under a cooperative agreement with the Maternal and Child Health Bureau (in the Health Resources and Services Administration), and the Child Care Bureau (in the Administration for Children and Families) in the Department of Health and Human Services. The “Healthy Child Care America Campaign” is a nationwide effort to ensure safe and healthy child care by linking child care providers, health care providers and families. (See Appendix.)

Background

Six out of 10—nearly 13 million—infants, toddlers and preschool children are enrolled in child care, according to the National Center for Education Statistics (NCES). According to the NCES, nearly 88 percent of children whose mothers work full-time and 75 percent of children whose mothers work part-time are enrolled in child care. As children grow older, they are more likely to be enrolled in child care. About 45 percent of 1-year-olds are in a child care setting for at least part of the day or week, compared to 78 percent of 4-year-olds and 84 percent of 5-year-olds.

When they are not being cared for by their parents, young children may spend their time in one or several of the following types of child care : (1) in-home care -- where a child is cared for by a caretaker in the child’s home; (2) family-based child care -- where one or more children are cared for in the caretaker’s home (some family-based care is for small groups; some is for larger

groups, sometimes with more than one caretaker); or (3) center-based care -- where a number of children are cared for in a non-residential setting designed for that purpose. "Out-of-home" care as used in this testimony, refers to both family-based and center-based care.

Although some early childhood programs are intended to provide "education" (such as "nursery school" and "preschool") and others are intended simply to provide custodial care ("day care"), the Academy believes that "education" and "care" are inseparable in the case of infants and preschool children. Young children are constantly learning while they play and engage in every day activities; young children in "educational" programs still need "care" in terms of comfort and assistance in meeting their physical needs.

Thus, rather than distinguishing between "day care" and "early education programs," the Academy and others in the early childhood field prefer the term "*early childhood education/care programs*" for all out-of-home settings providing services to young children. The latest research on brain development attests to the fact that early childhood care and learning cannot be separated, and that a child's environment and experiences in the earliest years of life have profound, life-long consequences.

While this testimony emphasizes child care/education for young children, most of the recommendations concerning quality apply equally to programs for school-aged children outside of school hours and during the summer.

What kind of child care do children need?

In general

Pediatricians have always recognized the importance of the early years in the physical, social, intellectual and emotional development of children, and the long-term impact of a young child's experience and environment. Recent findings on early brain and child development indicate that the physical and chemical structure of the brain -- and thus, its future capacity for learning -- are influenced significantly by the environment and experiences of a child during the first few years after birth, particularly during the first three years.

Thus, the latest brain research confirms the importance to our society of quality child care -- within the family and outside it. To develop their potential, children must have trust and confidence in their caregivers, and caregivers must be able to provide adequate physical, emotional and mental stimulation in an appropriate environment.

Specific Elements of Quality Care

Research consistently has identified several factors most related to quality in early childhood education/care programs: small groups of children, with sufficient numbers of adults to provide warm, responsive caregiving; well-educated staff and administrators with specific training in early childhood care and education; adequate compensation for caregivers, and a low degree of staff turnover.

Simply put, the key elements of quality child care are: staff, environment, and activities. More specifically, but not exclusively, a high-quality program will include:

- appropriate child:staff ratios, with staff who are professionally qualified, mentally and physically healthy, well-compensated, committed, motivated, and evaluated
- activities to promote healthy child development, with appropriate supervision and discipline
- health protection and promotion (including health education, specific policies for managing child illness and injury, including child abuse and neglect)
- proper nutrition, safe food service practices
- safe and age-appropriate facilities, supplies, equipment, and transportation
- systematic record-keeping on children's health and development

Child care providers have, in many respects, taken on the role of the extended family for many children and their parents. As would an extended family, a good out-of-home child care provider should communicate closely with parents about their children's activities, health and development, and will also help parents with their own parenting questions or problems. It is important for the parent and child care provider to be consistent with one another in rules and discipline.

In addition, a high-quality out-of-home child care provider, particularly an organized center, will serve as an access point for other services a family might need, such as health or social services, and will help to ensure that children have a "medical home" in order to receive immunizations and other preventive health care. The Academy would like to see every child care provider have a health care consultant and encourages its members to provide consultative services to child care providers.

What kind of child care are children getting, and why?

The current state of out-of-home child care

Most people would agree that, at a bare minimum, our nation's children deserve to be **safe** in their out-of-home child care settings. Yet, in at least one study of licensed child care facilities, significant injury hazards were described by facility personnel in response to survey questions.¹

With respect to child development, studies indicate that quality child care is the exception rather than the rule, especially for infants and toddlers. Studies have shown that about 35% of family-based, and 40% of center-based infant and toddler care is inadequate, or even potentially harmful to children's safety and development. One of these studies found that only one in 12 infant/toddler rooms provided developmentally beneficial care.

¹ MA O'Connor, WE Boyle, GT O'Connor, and R Letellier, "Self-reported Safety Practices In Child Care Facilities," *American Journal of Preventive Medicine*, 8(1):14-8, 1992 Jan-Feb. For example, 61.4% of facilities reported that they did not have an impact-absorbing surface under playground equipment; 30.3% of facilities with stairs accessible to children lacked safety gates; only 55.8% of facilities demonstrated access to the phone number for a poison control center; only 80% of providers could demonstrate access to the phone number of the local ambulance service.

The same studies found that only about 10-15% of the out-of-home child care settings offered care that promotes children's healthy development and learning. Another study found that only 12% of regulated family-based child care, 3% of non-regulated care, and one percent of out-of-home care by relatives was found to be *good* for children.

These are but a few of the disheartening data about the state of out-of-home early childhood education/care in this country. We know what high-quality care should look like. Why is it not universally accessible to children who need it?

The economics of child care

Quality child care cannot be attained by merely applying standards to facilities and caregivers; resources are necessary to meet the cost of quality care at a price that parents can afford.

Child care is a labor-intensive service. Staff wages make up the largest cost in providing care, and caregiver wages in the United States are generally too low to attract and retain qualified staff. In effect, the cost of child care in this country is subsidized by the low wages and benefits of caregivers, who leave their jobs at an astonishingly high rate.

High staff turnover adversely affects the health and safety of children. Frequently replaced, untrained, barely oriented, poorly compensated and over-worked staff cannot maintain sanitation routines, be prepared for emergencies, or meet the mental health need of children for constancy in relationships. Facilities cannot benefit from training provided to staff if the staff leave their jobs before the training is implemented.

In addition to better compensation, greater societal respect for caregivers of young children would also help to increase staff tenure and provide an element of professionalism that would attract competent and committed personnel.

Unfortunately, good, quality care costs more than the majority of low-income, and even middle-income families can afford, leaving no alternative for many parents but to purchase substandard, hazardous, and unhealthful arrangements for their children. This situation is likely to be exacerbated as changes in federal welfare law and state policies put more parents of young children into the work force.

Inadequate regulation

Regulation relating to the health and safety of children in out-of-home child care programs varies widely. Center-based child care programs are usually required to be licensed and are regulated to some extent. Some states have no or minimal regulation for before- and after- school child care, family-based child care, and preschool or nursery school programs, particularly if they operate on a part-time basis or if they are sponsored by a religious institution.

One review of state child care regulations in 47 states found that more than half of the states' safety-related regulations had inadequate or no standards for 24 out of the 36 safety topics examined. Most notable were the inattention to playground safety, choking hazards, and firearms.

Another review of state regulations found that the majority of states' child care regulations do not meet basic standards of acceptable/appropriate practice that assures the safe and health development of very young children. Edward Zigler, an expert in early childhood care and education, recently testified before this committee's Subcommittee on Children and Families that a recent analysis of center-based infant and toddler care found that *no* states have regulations that require good child care practice, and only 17 states' regulations can be characterized as minimally acceptable. The remainder of the states were rated "poor" or "very poor." This is especially disturbing in light of the recent findings about early brain and child development.

Moreover, monitoring and enforcement of child care standards varies widely from state to state and is inadequate in many areas. Research indicates that a significant percentage of settings that should be licensed are operating illegally. Even licensed facilities are not always held to applicable regulations.

With the increased demand for child care that should arise from changes in welfare law, states may be increasingly reluctant to implement stringent child care standards for facilities and personnel, and may encourage the provision of care by untrained personnel in order to meet the increased demand for child care and to provide jobs for welfare mothers.

AAP Recommendations: Long-Term Goals And Short-Term Action

The American Academy of Pediatrics would like to suggest the following long-term goals and short-term action steps:

Long-term Goals

In general, we believe that government policy at all levels should reflect a *systematic public commitment -- both moral and financial -- to make high-quality early childhood education/care available to all children who need it*. Accordingly, government policy, should:

Make early childhood education and care available and affordable for preschool children. While there is little disagreement that there should be public funding for the education of children age five and older, most parents have been left to their own devices to find and afford adequate out-of-home education/care for their preschool aged children. Now that most preschool aged children live in families where a single parent or both parents work, and we understand the importance of these early years on brain development, it is incumbent upon our society to ensure that safe, developmentally appropriate, and affordable early childhood education/care is available to all young children when they are not being cared for at home.

Financing of safe and healthful child care must come from a combination of public and private subsidies or tax credits for the cost of care that exceeds the reasonable ability of parents to pay for care themselves. Parents of young children generally have less disposable income than at any other phase of their lives. Just as society supports those elderly who can no longer fully support themselves, we must support young families raising our next generation.

Establish and enforce adequate health and safety standards. We believe that *all* out-of-home child care programs (including those for school-aged children) should be subject to the “National Health and Safety Performance Standards” regardless of what the programs are called or whether they provide care for all, or only part of the day or week. Ideally, these or equivalent requirements (or at least the minimum requirements set forth in “Stepping Stones” [see appendix]) would apply to all federally subsidized child care programs, and the federal government would provide strong incentives for states to adopt and enforce adequate health and safety standards for all child care programs.

Promote licensing and professionalism of early child care and education professionals. We recommend that all persons who provide child care or who may be responsible for children or alone with children in a facility should be individually licensed, certified, or credentialed by a state licensing agency or credentialing body recognized by the state regulatory agency.

Currently there is a rather haphazard manner for ensuring that the individuals who staff a child care facility are qualified. In most states, there is no licensing process for individual early childhood educators/caretakers. Rather, the qualifications of staff generally are evaluated as part of a facility licensing process, and must be re-examined each time an individual changes facilities. This is time-consuming, cumbersome, and leaves room for error.²

Suggestions for short-term action

Obviously, achieving the Academy’s goals with respect to child care will require legislative changes and additional financial resources. Although we encourage you to work toward these changes, there are other, more modest steps that you can take to improve the quality of child care in the near future. These include:

1. Support the federal government’s ongoing efforts to improve the availability and quality of child care, including the Head Start and Early Start programs, and the activities of the Maternal and Child Health Bureau and the Child Care Bureau, including the “Healthy Child Care America Campaign” and the National Resource Center for Health and Safety in Child Care. (See appendix.)
2. Encourage the federal government to distribute “Stepping Stones” (see appendix) to all Governors, and challenge the Governors to implement these standards in their states.

² There are several private organizations that evaluate and accredit child care programs. Most prominent is the National Academy of Early Childhood Programs of the National Association for the Education of Young Children (NAEYC) which has an accreditation process for center-based child care providers through which the quality of programs is judged against a comprehensive set of consensus criteria developed by early childhood professionals. Parents and employers can be assisted in assessing the quality of a program by checking to see whether it has been accredited by NAEYC (or equivalent accreditation program). The availability of accreditation helps to improve quality by providing consumers a means of comparing child care programs.

3. Encourage the federal government to undertake a comparison of all state laws and regulations with “Stepping Stones” and the “National Health and Safety Performance Standards,” and to publicize the adequacy of state health and safety regulations for child care. To facilitate this comparison, states should be encouraged to code their regulations in accordance with the “National...Standards.”³
4. Ensure adequate monitoring of the effects of changes in welfare policy on the supply and quality of child care, and the resulting effects on children and families.
5. Encourage each state to establish, by law, a state-level commission on child care, charged with developing a child care plan and facilitating cooperation among government, human services agencies, schools, employers, pediatricians and other health care providers, and caregivers, to ensure that the health, safety, and child development needs of children are met by child care services provided in the state.
6. Encourage federal and state efforts to disseminate information to parents on child care standards and quality so that they can make wise choices about their child care options.

In addition, we urge you to talk to your constituents and your state and local government officials about the child care situation in your states. As you know, it is often these county or other local officials who are charged with enforcing regulations. To do so properly, they need the resources you can help to provide.

Again, thank you for this opportunity to testify on behalf of the American Academy of Pediatrics. The Academy would be happy to provide you with any additional information you might need.

³ Currently, comparisons of state and local regulations with the “National...Standards” can be done only by tedious work taking many person-hours. Comparison of state and local standards with the ideal could be conducted much more efficiently if uniform codes (topic headings and numbering) were employed.

APPENDIX -- CURRENT EFFORTS TO IMPROVE CHILD CARE QUALITY

Described below are some of the activities of the federal government and the American Academy of Pediatrics related to improving the quality out-of-home child care. As evident from the other witnesses at this hearing, there are many state and local governments, businesses, and private nonprofit organizations (*e.g.*, NAEYC, "Zero To Three") that are undertaking other individual and joint activities to improve the supply and quality of out-of-home child care. At the federal level, President Clinton recently directed the Department of Defense to share lessons learned from the military child development programs to improve civilian out-of-home child care.

"Stepping Stones"

As mentioned in my testimony, the American Academy of Pediatrics and the American Public Health Association developed comprehensive guidelines for child care health and safety that were published by the Maternal and Child Health Bureau ("National Health and Safety Performance Standards"). This publication supplies detailed standards with respect to almost every aspect of child care quality.

To make it easier for regulators and facilities to implement the standards or use them to analyze their current regulations, the Maternal and Child Health Bureau sponsored a project -- commenced in 1994 and completed earlier this year -- to identify the minimal standards directly related to protecting children from harm (injury, morbidity and mortality) in child care settings. The final product, called "Stepping Stones to Using Caring for Our Children -- Protecting Children from Harm" ("Stepping Stones") contains 182 of the 981 standards set forth in the more comprehensive guidelines. This user-friendly publication provides a starting point for regulators to establish *minimal* health and safety requirements, and for regulators, child care personnel, health care personnel and parents to evaluate child care settings.⁴

The "Healthy Child Care America Campaign"

As mentioned in my testimony, the "Healthy Child Care America Campaign," supported by the Maternal and Child Health Bureau and the Child Care Bureau, and administered by the American Academy of Pediatrics, is intended to facilitate cooperation among families, child care providers and health care professionals to promote the healthy development of children in child care, including increasing access to preventive health services and providing safe physical environments.

The goals of the Healthy Child Care America Campaign are to provide:

- a safe, healthy child care environment for all children, including those with special needs;
- up-to-date and accessible immunizations for children in child care;
- access to quality health, dental and developmental screening and comprehensive follow-up for children in child care;
- health and mental health consultation, support and education for all families, children and child care providers; and
- health, nutrition and safety education for children in child care, their families and child care providers.

⁴ Both publications are readily available on the world wide web through the federally supported National Resource Center for Health and Safety in Child Care ("National Resource Center"), located at the University of Colorado Health Sciences Center and the University of Colorado in Denver. The Center's Internet address is: <http://nrc.uchsc.edu>.

More than 40 grants have been awarded by the MCHB to professionals and organizations representing health and child care communities, who will coordinate local activities to meet the goals of the campaign. In addition, communities can create or expand public and private resources that link families, health care professionals and child care providers by following 10 steps included in the *Blueprint for Action*, developed at the 1995 National Child Care Health Forum when the campaign initially began. Some of these steps include increasing immunization rates and preventive services for children in the child care setting, promoting and increasing comprehensive access to health screenings, and strengthening and improving nutrition services in child care.

Training and Recruiting Consultants to Child Care Programs

The Academy encourages pediatricians to be well-informed about child care issues so that they can adequately advise their patients' families about their child care arrangements. To this end, the American Academy of Pediatrics has published a manual for pediatricians, currently under revision, about health in child care, and has published a policy statement urging pediatricians to be prepared to counsel individual patients' families and to provide their health care expertise as consultants to organized child care programs. We hope to enhance these efforts in the future.

THE WHITE HOUSE
WASHINGTON

October 20, 1997

MEMORANDUM FOR THE PRESIDENT

FROM: BRUCE REED
MELANNE VERVEER

CC: THE FIRST LADY

RE: WHITE HOUSE CONFERENCE ON CHILD CARE

On October 23, you and the First Lady will host the White House Conference on Child Care in the East Room. This memorandum outlines the purpose and structure of the conference, the policy initiatives that we recommend you announce at the conference, and the process and direction of our work on a child care proposal to unveil this winter.

Purpose and Structure of the Conference

The White House Conference on Child Care has two purposes. First, it will call national attention to an issue that political leaders and policy makers historically have ignored, notwithstanding its enormous importance to working families. Second, it will provide a basis from which to launch a child care initiative in the State of the Union. (As noted later in this memo, we will provide you with policy options for this initiative -- including a range of price tags -- as part of your normal budget process.)

The conference will address three critical child care challenges -- availability, affordability, and safety and quality. Many parents choose to stay at home and care for their children themselves. Yet millions of Americans, by choice or necessity, rely on child care and after-school programs to care for their children for part of each day. The conference will explore how the public and private sectors can respond to the need that Americans struggling to be both good parents and good workers have for safe, affordable child care.

Morning Session. The morning session will begin with remarks by you and the First Lady and will include a video of children, parents, caregivers and others talking about child care. We believe your remarks should address the importance of child care for America's working families, note past Administration accomplishments on this issue, and announce several new policy initiatives as well as a commitment to unveil a broader child care proposal this winter.

You and the First Lady will then moderate a panel with two parts. The first three panelists will discuss why child care matters -- both to our children's development and to the nation's economy. The second four panelists will examine how well we are doing in meeting the challenge of assuring that good child care is available to working families. The first three panelists are:

- Ellen Galinsky, President, Families and Work Institute, who will discuss the relationship between quality child care and children's healthy development, particularly in the earliest years of life;
- Michelle Seligson, Founder and Director, National Institute on Out-Of-School Time, Wellesley College Center for Research on Women, who will discuss the importance of good after-school programs for youth;
- Secretary Rubin, who will discuss the need to address child care given dramatic changes in the workforce and economy.

The second four panelists are:

- Secretary Shalala, who will discuss the strengths and weaknesses of child care across the country;
- Governor James Hunt of North Carolina, who will discuss how states are doing in meeting the challenge of assuring that working families have access to safe, affordable child care;
- Dr. Valora Washington, Program Director, W.K. Kellogg Foundation, who will discuss community efforts to meet this challenge;
- Patty Siegel, Executive Director, California Resource and Referral, who will share the experiences of parents.

Afternoon Session. The afternoon session will begin with remarks by the Vice President and Secretary Riley. The afternoon panel will consider the roles that states, business and labor leaders, the faith community, health care professionals, and others can play in addressing this challenge. The panelists include: Major General John G. Meyer, Jr., Chief of Public Affairs United States Army; Dr. Susan Aronson, Member, American Academy of Pediatrics; Jane Maroney, State Legislator, Delaware; Bishop Joseph Sullivan, Vicar of Human Services, Brooklyn, New York; and Doug Price, President, FirstBank of Colorado.

Agency and Satellite Sites. An additional 300 people will view the conference at three Federal agencies; and Secretaries Shalala, Riley, Glickman and Herman will host working sessions at these agency sites during the luncheon at the White House. In addition, the entire conference will be transmitted to satellite sites in at least 48 states. The Administration's

regional administrators have helped to organize these satellite conferences, and Cabinet Affairs has encouraged subcabinet officials to participate in them.

Policy Announcements to be Made at the Conference

We recommend that you indicate at the conference that you will propose a child care initiative in your State of the Union address and your fiscal year 1999 budget. We also recommend that you announce three policy proposals at the conference.

1. Child Care Working Group. You can name Secretary Rubin as chair of a working group on child care primarily made up of business leaders, with representation from labor and other community leaders. The Child Care Working Group would report to you within 45 days on efforts that business leaders should undertake to help working families overcome the challenge of managing child care and work responsibilities.

2. Scholarships for Child Care Workers and Background Checks on Child Care Workers. Experts link the quality of child care to the quality of the caregiver. Yet child care providers often receive little training, and occasionally have unsuitable backgrounds for the profession. You can announce steps to support caregivers by ensuring that they are able to afford adequate training. At the same time, you can urge Congress to pass and states to ratify the "National Crime Prevention and Privacy Compact" to protect children from child care workers who have committed crimes.

Scholarships. To help child care workers afford training, you can instruct the Department of Education to develop an outreach plan to inform students and institutions of the potential availability of Pell Grants. You also can announce a new scholarship program for child care workers. Even with Pell and other education programs that you have put in place, many child care workers cannot afford training. The new program would provide assistance to full- or part-time students working toward a Child Development Associate Credential or other degree in child development who agree to remain in the child care field for at least one year.

Background Checks. You can also announce steps to make background checks on child care workers more effective. Today, many states prohibit the release of criminal history records for purposes other than ongoing criminal investigations. The Department of Justice is prepared to transmit to Congress on October 23 the "National Crime Prevention and Privacy Compact." The compact, which must be passed by Congress and ratified by the states, will enable states to share criminal history information for limited other purposes, including background checks on child care workers.

3. Service and School-Age Care. You can launch the "To Learn and Grow Partnership," a

partnership of public and private organizations that will work together to expand access to and improve the quality of after-school programs through service activities. The partnership will encourage national service participants and community volunteers to teach in child care programs, and will engage children in service as part of after-school programs. You also can release the "How-To Manual," describing how to integrate service and school-age care, identifying opportunities for children to learn through service, and highlighting programs that are currently using service to enrich out-of-school time.

Child Care Initiative To Be Announced After the Conference

For the past several months, the Domestic Policy Council and the First Lady's Office have been leading a policy process on child care. The National Economic Council, the Office of Management and Budget, and the Departments of Health and Human Services, Treasury, Education, Labor, Defense, Justice, and Agriculture have participated.

We have identified three key areas: affordability; availability; and safety and quality. In the weeks after the conference, we will prepare a memorandum for you outlining policy options, of several different shapes and sizes, in these areas. We are also exploring ways to support parents who want to stay at home to care for their children.

Affordability. Increasing numbers of working families cannot afford decent child care, which can cost at least \$4,000 a year for one child, and even more for infants and toddlers. While the average family pays about 7 percent of its income for child care, low-income families spend about a quarter of their income.

The Federal government spent \$2.9 billion in direct child care subsidies in fiscal year 1997 through the Child Care and Development Block Grant (CCDBG), which provides payments for about one million children. HHS estimates, however, that we are currently providing child care subsidies to less than a quarter of the families eligible for them. In addition, the Dependent Care Tax Credit provides more than \$2 billion annually in tax relief for child care expenses. We are analyzing whether to expand either of these mechanisms.

Availability. Access to child care is a problem for low-income and middle-income families alike. We are looking at two areas of particular concern -- helping businesses expand on-site care for their employees, and helping states and communities increase their supply of school-age care. We are exploring whether to provide tax credits for businesses that build and operate child care centers for their employees (the Rubin-Weill working group may make additional suggestions). We also are looking at a variety of ways -- including simplifying Federal requirements and funding streams -- to help states and communities create an adequate supply of after-school programs.

Safety and Quality. The quality of child care in this country is too often mediocre or poor. A recent four state study of child care centers found that one in eight centers expose children to unsafe or unsanitary conditions. Infants and toddlers are at the greatest risk, with 40 percent in care that poses a threat to their health and well-being. Only 14 percent of centers provide high quality care -- care that actually enhances growth and development. A study of child care in family-based settings found equally disturbing patterns. Over one-third of programs are rated inadequate, meaning that quality is low enough to harm children's development, and only 9 percent offer high-quality care.

States are currently required to spend 4% of the funds they receive through the CCDBG on quality improvement. We are looking at ways to help states improve quality by providing additional funding to states that agree, for example, to improve and enforce health and safety standards, invest in training for caregivers, or create networks to support family day care providers. We are also developing a consumer information campaign to arm parents with the information they need to chose high quality care for their children.

Marian Wright Edelman
Children's Defense Fund, president
Remarks, October 21, 1997
Child Care Audio Press Briefing

It is not surprising that we are here talking about child care again. This dialogue is occurring in states and communities across the country. We must find new strategies to support parents, both those who work outside the home and those who choose to stay home. There is good reason. The Welfare Act required millions of women to enter the workforce. These women will join women already in low-wage jobs who are struggling to remain independent. It is increasingly clear that their jobs do not cover the costs of safe and decent child care. There are many mothers like this one. "I'm a single mom with a three-year-old, and I make \$6.25 an hour at a medical office. I take home about \$800 a month. My rent is \$332 and my child care runs about \$350 a month. If I didn't have help with child care I'd only have \$110 to pay bills, buy groceries and whatever surprises come up for the month."

There is also growing concern about the quality of child care in light of the heightened awareness about the importance of the first three years of life to a child's development. Yet, the quality of infant and toddler care is shockingly low. A recent national study found that half of rooms in centers serving babies and toddlers provided such poor quality care as to jeopardize children's health, safety, and development. Studies of home-based care produced equally troubling results. In our conversations with parents, we find some willing to visit as many as 50 family child care homes before they find one that they are comfortable enough with to leave their infants.

Communities are also increasingly worried about the large number of school-age children who are spending significant amounts of time in unstructured settings. They are concerned not only about the fact that juvenile crime peaks between 2:00 and 6:00 p.m., but also that it is more difficult for these youngsters to do well in school if they are not engaged in constructive activities during after-school hours.

Over the last decade, we have made some progress in addressing the child care needs of families. In 1990, the first comprehensive federal child care legislation was enacted since the early 1940s when the Lanham Act supported high quality child care centers so women could fill the essential jobs left when our men went to war. When the Welfare Act was enacted last

the worst services for children in Western society." That is why we welcome the debate that will occur at the White House this Thursday, the many bills that have been introduced in Congress over the past year that would expand support for better child care which recognize the strong bi-partisan interest in the issue, the growing interest on the part of state lawmakers, and the contributions made by the private sector. The challenge is to use this dialogue as a launching pad for new investments and strategies by all sectors so that all of our children who need it get the good child care that they deserve to grow up to be healthy and contributing citizens. As the debate on child care occurs once again and the country focuses on the results that it wants for its children and families, we should ask four questions:

Do parents have reliable child care that enable them to feel safe and secure about their children so they can work and support their families?

Are our children getting the kind of care that will help them go to school ready to learn and succeed in life?

Do our older children have places to go that keep them out of trouble and help them do well in school?

Are parents being provided the option to parent well and care for their children at home?

Inadequate Child Care Strains America's Working Families

Every day, three out of five preschoolers are in child care.¹

- Children of working mothers are entering care as early as 6 weeks of age and can be in care for as many as 40 hours a week until they reach school age.

Women work in the overwhelming majority of American families.

- 3 out of 5 women with children under age 6 work, and 3 out of 4 women with children ages 6-17 work.²

Child care costs are unaffordable for many working families.

- About half of families with young children earn less than \$35,000 per year.³ A family with both parents working full-time at minimum wage earns only \$21,400 per year.
- Child care is a major household expense for working families. Full-day child care easily costs \$4,000 to \$10,000 per year -- equal to what families pay for college tuition plus room and board at a public university.⁴ The following are average child care costs for *one* three-year-old child; care for babies and toddlers costs even more:⁵

Boston \$8,840

Durham \$4,630

Dallas \$4,210

Boulder \$6,240

Oakland \$6,500

Minneapolis \$6,030

Child care helps shape the way children think, learn, and behave for the rest of their lives.

- A recent report by the Carnegie Corporation confirmed that the quality of child care has a lasting impact on children's well-being and ability to learn.⁶ Children in poor quality child care have been found to be delayed in language and reading skills, and display more aggression toward other children and adults.⁷

Child care quality for many American children is inadequate.

- 6 out of 7 child care centers provide care that is mediocre to poor, according to a recent national study by a group of universities. One in eight centers were found to be providing care that could jeopardize children's safety and development.⁸ Equally alarming patterns were found in a study of home-based care -- 1 in 3 could be harmful.⁹
- There are major gaps in the basic health and safety standards for child care in many states, and even the standards that are in place are often inadequately enforced. For example, in many states, care in smaller providers' homes is not inspected at all because licensing is not required, and more than half the states do not annually inspect homes that *are* licensed.¹⁰

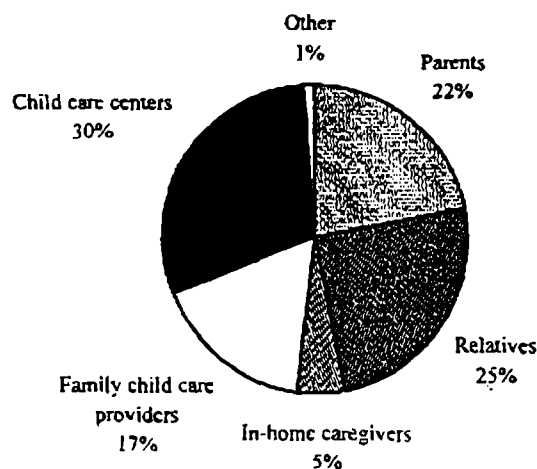
Professional, quality child care is hard to find in a marketplace where child care teachers and providers do not earn as much as bus drivers (\$20,150) or garbage collectors (\$18,100) -- or even bartenders (\$14,450).¹¹ A national wage study found that most child care workers earn only \$12,058 per year (only slightly above minimum wage) and receive no benefits or paid leave.¹²

Child Care Basics

Child care and early education are critical to the success of two national priorities: helping families work, and ensuring that every child enters school ready to learn.

- ✓ Each day, an estimated 13 million children younger than six -- including six million babies and toddlers -- spend some or all of their day being cared for by someone other than their parents.¹ Children of working mothers are entering care as early as six weeks of age and can be in care for 40 hours a week until they reach school age.
- ✓ Child care and early education have become a fact of life for many parents. By 1995, 62 percent of women with children younger than six, and 77 percent of women with children between the ages of six and 17 were in the labor force.²
- ✓ Many women, particularly in low and moderate income families, are essential in helping support their families financially. A national study found that 55 percent of employed women provide half or more of their household income.³ This is not only true of single parents -- who are obviously essential in supporting their children -- but also true for married parents. Between 1973 and 1994, young two-parent families with children lost 12 percent of their income. The mother's earnings helped to offset these losses.⁴ For many families, women do not have a choice; women must work.

Parents all face the same bottom line: they can't go to work unless someone cares for their children.



Definitions of Child Care Settings:

Child care centers -- care provided in nonresidential facilities, usually for 13 or more children.

Family child care providers -- care provided in a private residence other than the child's home.

Relative care -- care provided by a related person other than the parent, either in the child's home or in the relative's home.

In-home caregivers -- care provided within the child's home, by a person other than a parent or relative.

Child Care Arrangements of Children Younger than 5 with Employed Mothers⁵

WHAT PROBLEMS DO PARENTS FACE?

Many parents can't find quality affordable child care. Even middle-class parents are surprised at the cost. Those families that manage to find care they can afford are too often ending up with care that is mediocre to poor quality.

Affordability: Child care is unaffordable for many working families.

- ✓ Child care is a major household expense for working families. Full-day child care for one child easily costs \$4,000 to \$10,000 per year -- equal to what families pay for college tuition plus room and board at a public university.⁶ The following are average child care costs in six different cities for *one* three-year-old child; care for babies and toddlers costs even more:⁷

Boston \$8,840
Boulder \$6,240

Dallas \$4,210
Durham \$4,630

Oakland \$6,500
Minneapolis \$6,030

- ✓ The cost of providing care for children can easily exceed a family's rent, mortgage, car payment, or groceries. For example, a family earning \$25,000 a year could easily spend *one-quarter* of their income to purchase child care for *one* child -- and the average family has two children. Families simply cannot afford the cost of good quality child care in addition to all of the other demands on their weekly or monthly budget.
- ✓ Many hard working families earn too little to be able to afford these costs. About half of families with young children earn less than \$35,000 per year.⁸ A family with *both* parents working *full-time* at minimum wage earns only \$21,400 per year.

Quality: Child care helps shape children's futures, yet the quality of child care for many American children is inadequate.

- ✓ Child care helps shape the way children think, learn, and behave for the rest of their lives. A recent Carnegie Corporation study noted that the first three years of life are critical in the brain development of children, and that brain development is far more susceptible to adverse effects than had been earlier realized. Specifically, "*the quality of young children's environment and social experience has a decisive, long-lasting impact on their well-being and ability to learn.*"⁹
- ✓ What is quality care? Some basic components of good care include:
 - a safe and healthy environment,
 - caregivers who are nurturing and knowledgeable about children's development, and who are a stable presence in children's lives, and
 - small numbers of children per caregiver to make sure the child gets one-on-one attention.

- ✓ Research indicates that nurturing relationships in the early years are critical to a child's positive development and future success. Yet, national studies have found serious problems with the quality of child care in many communities:
 - Six out of seven child care centers provide care that is mediocre to poor, according to a recent national study by a group of major universities. One in eight centers were found to be providing care that could *jeopardize* children's safety and development.¹⁰ Equally alarming patterns were found in a study of home-based care -- one in three could actually be harmful to a child's development.¹¹
 - Children in poor quality child care have been found to be delayed in language and reading skills, and display more aggression toward other children and adults.¹²
 - Low wages are closely linked to rapid turnover rates among child care providers, which breaks the stable relationship that infants and children need to have with their caregivers to feel safe and secure. Yet child care teachers and providers do not even earn as much as bus drivers (\$20,150) or garbage collectors (\$18,100) -- or even bartenders (\$14,450).¹³ A national wage study found that most child care workers in centers earn only \$12,058 per year (only slightly above minimum wage) and receive no benefits or paid leave.
- ✓ Relatively few child care centers meet the higher standards of accreditation -- for example, in 1997, only six percent of all child care centers were accredited by the National Association for the Education of Young Children.¹⁴

Quality: We're Not Protecting Our Children In Care

- ✓ There are major gaps in the basic health and safety standards for child care in many states, and even the standards that are in place are often inadequately enforced. For example:
 - Minimum requirements vary state to state with even basic health and safety requirements -- such as ensuring that children in child care are immunized on schedule, that child care providers have first aid and CPR training, that providers wash their hands before and after diapering and preparing food, and that minimum child-staff ratios are age-appropriate and practical.
 - In many states, care in smaller providers' homes is not inspected at all because licensing is not required -- even, in some states, for homes serving as many as six, eight, and twelve children. And more than half the states do not annually inspect those homes that *are* licensed.¹⁵ Many states also do not license some centers, including those that operate part-time or on a drop-in basis (such as operate in malls and exercise clubs).
 - Staff education and training are among the most critical elements in improving children's experiences in child care. Even though approximately 1,500 hours of training at an accredited school is required to qualify as a licensed haircutter, masseur, or manicurist,¹⁶ 41 states do not require providers who care for children in their homes to have *any* training prior to serving children.¹⁷

Babies and Toddlers: Our youngest children are particularly vulnerable to poor quality care. Many families find it impossible to find quality affordable care for their young children.

- ✓ Many of our youngest and most vulnerable children are being cared for in child care -- almost half of babies younger than twelve months are regularly spending their day in some form of child care.¹⁸
- ✓ A recent national study found that half of rooms in centers serving babies and toddlers provided such poor quality care as to jeopardize children's health, safety and development.¹⁹ Studies of home-based care produced equally troubling results.²⁰
- ✓ This means that many of our young children are being cared for in settings where:
 - basic sanitary conditions are not met for diapering and feeding,
 - safety problems exist endangering infants,
 - warm, supportive relationships with adults are lacking, and
 - books and toys required for physical and intellectual growth are missing.²¹
- ✓ Many parents with young children are struggling to find care for their children -- one national poll found that three out of four parents of young children said there was an insufficient supply of infant care in their communities, and numerous studies have reported serious shortages of care for babies and toddlers.²²

Before & After School Care: Scarcity of programs leaves many school-age children home alone.

- ✓ Nearly 5 million children are left unsupervised by an adult after school each week.²³
- ✓ Although it is often thought that juvenile crime occurs mostly on evenings and weekends, juvenile crime actually peaks between 2:00 and 6:00 p.m. -- the after-school hours when many children are unsupervised.²⁴
- ✓ A 1990 study found that eighth-graders left home alone after school reported greater use of cigarettes, alcohol, and marijuana than those who were in adult-supervised settings.²⁵
- ✓ Good after-school activities for children and teens can be hard to find because options are inadequate in many communities. This problem is even more serious in low-income neighborhoods -- only one-third of schools in low-income neighborhoods offered before- and after-school programs in 1993.²⁶

Federal and State Government: Partners in Child Care

Federal and state governments help families work and children get a strong start in life by helping families pay for child care, working to keep children safe in child care and improving its quality, and improving the nutrition of children in child care settings.

Providing Child Care Assistance for Low-Income Working Families

- ✓ The federal government gives states funds to provide child care assistance to low-income working families and families receiving TANF through two programs:
 - The **Child Care and Development Block Grant (CCDBG)**, funded at \$2.87 billion in FY1997.¹
 - The **Title XX/Social Services Block Grant (SSBG)**, which can be used to support child care (among a broad range of social services), though many states do not use it for this purpose. Funds for Title XX have been virtually level for 15 years at \$2.8 billion, and were reduced to \$2.5 billion by FY97. More cuts are possible for FY98. It is estimated that only about \$500 million of these funds are currently used for child care.
- ✓ Child care assistance is usually provided on a “sliding-fee” basis, meaning that families pay some of the costs of care, with the amount they pay rising as their income rises. Families can get this assistance whether they choose to use a child care center, family child care home, neighbor, or relative.
- ✓ States are given these funds to administer with relatively few strings attached. The CCDBG requires states to:
 - Provide state matching funds in order to receive any of the additional funds available under the 1996 Welfare Act. The level of matching funds required varies by state.
 - Limit assistance to families with incomes below 85 percent of state median income (though most states set their income limits below this level).
 - Establish minimal health and safety protections for those programs that receive these funds that are not required to meet state licensing requirements.
 - Spend at least four percent of the funds on activities to improve quality and supply.
 - Establish reimbursement rates for child care that allow children receiving assistance to have access to child care comparable to children who are not eligible for such help.

- Title XX only requires states to spend funds on a defined list of social services (with child care being one of the allowable services). Funds spent for child care must be used in programs that meet applicable state and local standards.

Helping Families Pay for Care Through Child Care Tax Credits

- ✓ The federal **Dependent Care Tax Credit (DCTC)** helps families by allowing them to claim an income tax credit for a portion of their child care expenses. The credit is on a sliding scale and lower-income families receive slightly larger credits. Poor families receive no help from the DCTC since it is not refundable. The maximum credit a family can receive for one child is \$480 (or \$960 for two or more children) as they can only claim the credit against dependent care expenses up to \$2,400 for one child, or \$4,800 for two or more children. The amount of the credit has not been raised since 1981. In FY96, about \$2.8 billion was claimed. (Approximately half of the states have state tax credits that help families with the costs of child care).

Helping Keep Children Safe

- ✓ State governments are primarily responsible for ensuring the basic health and safety of children because they are responsible for licensing child care providers. They set basic guidelines, determine which programs have to meet these standards, and enforce these requirements. There is wide variation across states in these efforts, with the result that children's safety in child care varies significantly. States vary in the extent to which they exempt programs from any regulation, require licensed programs to meet even basic health and safety standards, and enforce these requirements. Enforcement is often inadequate, with some states visiting child care centers quite infrequently, or
- ✓ -- in the case of many family child care providers -- not at all.
- ✓ At this point, the federal government plays a minimal role in ensuring the basic health and safety of children. The one exception is that it requires that federal funds from the CCDBG only be used in settings that meet at least minimal health and safety protections -- state licensing standards for those programs that are licensed, or other minimal state guidelines for those programs that receive federal funds but are not required to be licensed (except certain relatives). Also, states can spend some of the CCDBG quality funds to hire licensing inspectors if the state chooses.

Improving Quality and Supply

- ✓ The federal government requires states to set-aside at least four percent of the CCDBG to improve the quality and supply of child care. States determine how to allocate these funds, and whether to add additional state funds for this purpose. These funds support efforts such as: training for child care providers, Resource & Referral agencies which help families find care and provide training and recruit providers, grants and loans to providers, start-up costs for programs, staff to inspect and monitor child care programs, and others.

Ensuring Good Nutrition for Children in Child Care and Early Education

- ✓ The federal government plays an important role in improving the nutrition of children through the **Child and Adult Care Food Program (CACFP)**, which was funded at \$1.5 billion in FY96. This program guarantees nutritious meals and snacks for children up to age 12 enrolled in child care centers, family child care homes, before- and after-school programs, and Head Start programs. In FY 1996, more than 2.5 million children were fed through CACFP. The CACFP is particularly important for family child care homes, as it provides a major incentive for providers to become licensed or regulated, and offers training and visits to providers.

Other Important Partners:

Local Government, the Private Sector, and Community Groups

- ✓ **Local government:** Local governments set basic policies that affect the supply of child care, such as zoning requirements and fire and building codes. Some local governments invest in helping low-income families pay for care, leverage funds from foundations or community groups to help families obtain care, support public-private partnerships and the involvement of the private sector, or fund quality enhancement activities.
- ✓ **Private sector:** Some employers have invested in helping their employees with child care, as they recognize the link between child care and a stable workforce. However, as of the early 1990's, only 6,000 employers nationwide were estimated to offer child care benefits to their employees out of a total of 6 million employers.²
- ✓ **Community groups and agencies:** A wide range of community organizations -- such as religious institutions, schools, non-profits, and volunteer organizations -- also play an important role in providing child care in their communities.

Sources:

¹ Prior to the 1996 Welfare Act, the federal government supported four child care assistance programs -- the Child Care and Development Block Grant, the At-Risk Grants to States, the JOBS child care program, and Transitional Child Care program. In 1996, these were combined into the new Child Care and Development Block Grant.

² Families and Work Institute, 1994.

WHITE HOUSE CONFERENCE ON CHILD CARE

On October 23, the President and the First Lady will host the White House Conference on Child Care in the East Room of the White House, bringing together parents, caregivers, business and labor leaders, child care experts and others. The conference will explore how the public and private sectors can respond to the need that Americans who are struggling to be both good parents and good workers have for safe, affordable child care.

Many parents choose to stay home and care for their children themselves. Yet millions of Americans, by choice or necessity, rely on child care and after-school programs to care for their children for part of each day. The conference is intended to begin a dialogue on three critical child care issues -- access, affordability, and assuring safety and quality -- and to highlight the roles that everyone -- including communities, businesses, child care providers, Federal, state and local governments, and parents themselves -- can play in addressing these issues.

I. OPENING SESSION

II. PANEL DISCUSSION: THE CHALLENGE: AVAILABILITY, AFFORDABILITY, AND ASSURING SAFETY AND QUALITY CHILD CARE

The President and First Lady will moderate this session.

Part 1: Why Does Child Care Matter? This panel will address: the relationship between quality child care and children's healthy development, particularly in the earliest years of life; the importance of good after-school programs for youth; and the need for child care given dramatic changes in the workforce and economy.

Part 2: How Are We Doing in Meeting the Challenge? This panel will provide an overview of the strengths and weaknesses of child care in communities across the country.

II. WHITE HOUSE LUNCHEON AND WORKING SESSIONS AT FEDERAL AGENCIES

During the White House luncheon, Secretaries Shalala, Herman, Riley and Glickman will host working sessions at several agencies.

III. PANEL DISCUSSION: LEARNING FROM WHAT WORKS

The Vice President and the First Lady will moderate this session. State and local officials, along with representatives of the military, business, health, labor, and faith communities, will highlight promising efforts around the country and discuss how all members of the community can address the challenges of assuring safe, affordable child care for working families who need it.

IV. SOUTH LAWN RECEPTION

THE WHITE HOUSE

WASHINGTON

If you're a working parent, chances are that you have struggled to find affordable, quality child care. Like millions of others, you know just how important child care is to your family's well being and to your ability to work without worry. Yet for too long, parents across our country have struggled with too little information, too few choices and too much anxiety.

For far too long, America's families have faced this problem alone. Now it is time to move this issue to the top of our country's agenda. We have a special opportunity to do that when the President and I host a White House conference on child care on October 23. We hope that this conference will begin an honest national discussion about child care and build on promising efforts already underway in states and communities.

Here are some of the questions we need to answer -- as individual parents and as a nation: How can we ensure that children in care are safe from harm? What are the best ways to make the hours children spend in care as stimulating and nurturing as possible? How can we do a better job of valuing the important work of child care professionals? How can we encourage employers to provide child care benefits to their employees, a practice that makes sense not just for children, but for the corporate bottom line, as well? How can we put into practice what research tells us -- that when children participate in good after-school programs, they do better in school, don't engage in risky behavior and thrive? And how can we genuinely support parents who choose, often at significant economic cost, to stay at home with their children?

When I was a working mother with a young child, my friends and I shared these concerns. Today, when families are under even greater stress, I continue to worry about how we can meet the challenge of strengthening child care for American families. The President and I believe it will take parents, businesses, child care providers, experts, advocates, and officials at all levels of government working together to ensure that children get the care they need to learn and grow, that parents have peace of mind while on the job, and that employers can count on responsible, attentive workers. I hope you will join in this important discussion.

Hillary Rodham Clinton

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WORTHY WORK, UNLIVABLE WAGES

**THE NATIONAL CHILD CARE
STAFFING STUDY, 1988-1997**



Center for the Child Care Workforce
Washington, D.C.



QUESTIONS AND ANSWERS

Q. I read the article in *The New York Times* and understand that you are considering a national registry to check child care providers' backgrounds. Can you tell us more about that?

A. We should all remember how important child care providers are for our children and families. Millions of people dedicate their lives to caring for children, often at low wages and in difficult work conditions. We need to support them, and we are looking at ways to do that. Naturally, parents also want assurance that their children are safe while in child care. We are exploring a range of ideas to improve the safety and quality of child care but have not yet settled on any one solution.

Q. What does the government do now in child care?

A. The federal government spends about \$3 billion each year to provide subsidies for child care to low-income working families and parents moving from welfare to work. Since 1993, federal support has increased by about 68% and now reaches about one million children. In addition, President Clinton has worked to promote health and safety in child care by issuing regulations to ensure that children receiving federal child care assistance are properly immunized and by launching an initiative to promote partnerships between child care and health agencies. The Administration has also significantly increased investment in Head Start and created Early Head Start to serve young children from birth to age 3.

Q. Are you going to propose legislation at the Child Care Conference?

A. Our goals for this conference are to bring national attention to child care and to launch a policy discussion on child care. After the conference we intend to consult with Governors, Members of Congress, business, labor, experts and others. We may well propose policies that require legislative change at the end of that process.

Q. Can you be more specific about the policies you are considering?

A. As I said, this conference is just the beginning of a discussion about child care. We plan to address three areas: affordability; health, safety

and quality -- particularly for infants and toddlers; and care for school-age children. As we consult with Governors, Members of Congress, business, labor, experts and others after the conference, we will look at proposals in each of those areas.