

4 pages

To: Noa Meyer
From: Fern Tiger for Patty Siegel
Date: October 21, 1997

Following is Patty Siegel's outline for the Panel Presentation of October 23rd. If you have any problems receiving this fax please contact me directly at (510)763-3867.

Panel Presentation: October 23rd

Panelists: Patty Siegel, Fern Tiger, Noa Meyer, and [unclear]



Outline: Panel Presentation / October 23, 1997: White House Conference on Child Care

1. Thank you, Mr. President and Mrs. Clinton... etc.
2. Brief introduction to the world of R&R... from the front lines of child care which are really the phone lines at the more than 600 resource and referral agencies across the country where thousands of counselors talk daily with more than one and a half million parents looking for child care and where resource and referral staff provided training to nearly 350,000 child care providers in the past year ...

Child Care R&Rs have 4 important responsibilities:

- The heart of our work is to help families find and choose the child care that best meets their particular and unique needs;
- In order to make these connections we have to identify and track the supply of all licensed child care in our communities;
- And because that supply is often unavailable or inadequate we work to build and sustain the supply to ensure that good, safe, quality care is available for parents when they need it, where they need it, and at prices they can afford;
- And to inform the broad community about the importance of good child care and how it impacts the world of work, education, health care, and family life...

As you can imagine these are difficult tasks and responsibilities that we take very seriously...

3. What we hear on these phone lines... from providers in centers, in family child care homes, in schools... is...
 - Enormous frustration
 - Child care isn't working ...
 - it's not available;
 - it's not affordable;
 - and.. it's not as good as it should be...
4. Let me first tell you what we hear from parents (my emphasis is California where more than 10% of all of the children of America live...but the stories are similar across the country...)
 - The frustration is at all income levels; (I'll focus on where majority of calls come from - from new parents with babies.. very young children under 2)

- Consider the stress of a parent about to re-enter the workplace .. It's a stressful transition ... but that stress is amplified by the reality of just how difficult it is to find child care for that baby.
 - And that reality is that 2/3 of all child care in California is in centers and only 4% of center spaces are for babies and children under two;
 - If you ever wanted to create an instant community... just bring together a sampling of parents like the ones I've spoken to during the past 24 hours as I traveled from California to D.C. ... the stories they've shared...a flight attendant, a waitress at the conference center, a taxidriver, and an engineer who commiserated with me as we shared seats on the five hour flight... these parents from across all income levels are instantly united in a great family of concern as they face the daunting challenge of finding quality care for their babies and children.
 - Each in this small sampling makes incredible sacrifices and amazingly complicated arrangements in order to hold a job and raise their children.
5. Imagine the plight of the flight attendant when her work schedule rotates and she needs care for her child through the night, or when her flight is delayed and she unexpectedly needs extended emergency care. Imagine the dilemma of the waitress whose salary barely exceeds minimum wage ... a salary of about \$11,000 and whose workday begins at 11 a.m. and ends after 7 p.m.... Imagine how much more complex the plight of the engineer would be if his 2-year-old happened to be blind or deaf or have cerebral palsy. Imagine how any of these added issues would impact your need for child care and the range of options available...

But I have to tell you it's not just the capacity challenge that worries parents. Everyday we hear from parents who know what they want and what's good for their children. They want care givers who know and understand how children grow and learn and caregivers who can provide a stimulating, safe and nurturing environment. But because our child care system in this country has been patched together without the forethought and mindfulness that today's conference begins to generate, good child care with health and safety protections, trained staff and stimulating environments, is hard to find.

- But of all of the frustrations parents face, the inability to find care that is affordable is the most daunting and most frightening ... because this impacts a parent's ability to join the workforce... And for those earning minimum wage and those who have struggled to maintain economic independence in low wage positions, the choices are few....
 - Sadly, the choices of these families are dictated too often by what they can afford, not by what's best for their children.
 - Consider the facts: a single mother in California, working full time at minimum wage will need to use 68% of her income for child care in a licensed center.. If she qualifies for state or federal child care assistance in California and many other states the waiting list could take more than 2 years...
6. But the frustrations are not only from parents... Providers are barely able to make ends meet on their salaries which average less than \$7/hour (making it near impossible to afford care

themselves...) Most providers have no benefits; they don't get paid vacations and they don't get sick leave...

7. Still good providers can't afford to remain in these jobs... if this room was filled today with teachers, child care providers, and center directors...and we reconvened this meeting one year from now, half of the room would be empty.
 - This workforce of dedicated individuals...love their jobs; eager for training... committed to children...but they cannot afford to keep these low-paying jobs...
 - Challenge is not just how to create quality care that is affordable... the challenge is also to find resources to pay for the people to do this job and to honor them as doing important work that supports families, children, and the businesses of America...

8. Closing...

In the face of these formidable challenges... today's conference is a welcome beginning... We who are on the front lines of the crisis, applaud you for hearing the issue and for making it a priority... And we are anxious to report back to the parents and providers who we connect to about the progress and hope from today's new beginnings for improving child care in America.

As we bring this critical issue for families to the forefront of national attention, I urge you to remember that the problem is all around us.. but it's often private, unknown, and unseen

(Close with patchwork quilt metaphor and ... the need to create an infrastructure and expanded resources for delivering quality child care services)



YMCA

We build strong kids,
strong families, strong communities.

Fax Cover Sheet

Date

Number of pages including this one

Please deliver to

Jennifer Klein

Company

Fax

From

K Carline

Direct telephone number

YMCA of the USA

Public Policy

1701 K Street, N.W., Suite 903

Washington, D.C. 20006

800-932-9622 / 202-835-9043

Fax 202-835-9030

Did You Know...

That in 1996, YMCAs served 7.3 million kids? That the most popular children's program was day camp for youth, with 78.9 percent of Ys offering it?

That activity programs for families grew 6.7 percent between 1995 and 1996? That 872 Ys offer Family Night or Family Day?

That YMCA World Fellows have served or are currently serving in 16 countries around the world? That they spend up to two years at Ys overseas, learning new skills in community development and youth work to take back to their U.S. Ys?

Message

*This is the
basic New
direction*

TO: Jennifer Klein
Noa Meyer

FROM: Kathryn Carliver

DATE: October 22, 1997

RE: Revised Remarks

Here's the revised version. I can be reached tonight at (202) 483-2000, otherwise, I will arrive at The White House at 8:45 a.m.

#

My name is Kathryn Carliver.

Since my husband, Jesse, and I had the first of our two amazing sons three years ago, one issue has become central in our lives... and that is the need to find absolutely the highest quality care for our children on those days when we cannot be with them ourselves.

It isn't easy.

- 2 -

I spent the bulk of my pregnancy and too much of my maternity leave desperately trying to make an informed decision about who would take care of my son. I met with frustration every step of the way.

What I found was a total lack of organized or reliable information... and no one to guide me on what was the ~~single~~ most important decision in my life... and certainly for the life of my newborn son.

We decided we wanted to use a childcare center, only to discover an appalling lack of options that would meet our most basic criteria of affordability, proximity, and ~~extended hours~~ ~~to allow us to~~ ~~commute to our jobs in Manhattan~~.
flexible

in our hearts, - 3 -

And, that wasn't even the criteria that mattered.

What mattered, ultimately, was finding a place where we knew our son would not only be taken care of ... but where he would be nurtured ... where he would be stimulated ... and where he would be loved.

Happily, we found that, and more, in a childcare center just minutes from our house. It's a place that has become, for us, an extension of our home ... and, like so many people today with no relatives nearby, a very real and vital extension of our family.

- 4 -

Someone asked me recently how
you can leave a three or
four-month infant at a
childcare ~~daycare~~ center.

Well, I've done it twice, and ^(now) I
know that there is only one
answer. You can leave your
child... and you can go to
work... only when you know
~~in your heart~~ that the person
who takes him out of your
arms every morning will
not only take good care of
him... but will enrich him...
will love him... and ^{will} keep him
very, very safe from harm.

~~I fear that~~ I found that ^{an overwhelming} challenge
finding that quality of care
today is ~~the~~ ^{no} ~~looking for~~
~~needle in a haystack~~. And

-5-

important
beginning

that this conference is taking an
~~great~~ ~~step~~ forward in meeting
this need not just for us...
but for the millions and
millions of working parents who
make up this country today.

It is, therefore, an incredible honor
for me to introduce the person
whose sensitivity to the needs of
working parents and families
has made this conference a
reality. The President of The
United States of America.

#

202. 456. 9412

MEMORANDUM

TO Joan, Jenn and Nicole
FROM Ellen Galinsky
RE The first draft of my comments
DATE October 19, 1997

Here is my first draft. I know it is too long, but I hope it captures what you want: links to brain development research, information on how we measure quality, what good, mediocre and poor quality look like, and how quality can be improved. I have tried to keep the tone "researchy" but "photographic," as you suggested.

I am taking my computer to California so I welcome feedback. Let me know what you think I should cut, change, add, etc.

Thanks for all of your help.

can you send this over to Joan
Lombardi - I can't get through
to her fax. Thanks.

White House Conference on Child Care

Ellen Galinsky

Last April, at The White House Conference on Early Learning, this country heard, many people for the first time, about the recent research on the brain development of young children and learned that

- **The development of the child's brain—following birth—is far more rapid and more extensive than previously believed possible.** At birth, the newborn's brain is about a quarter of its adult weight, but it is not simply a small brain, otherwise complete except for its size. The parts of the brain that handle thinking and feeling and relating to others are yet to be developed.

The brain at birth has about 100 billion brain cells—or neurons—with 50 trillion connections among them. By the time a child is three, there will be a twentyfold increase in the number of synaptic connections among brain cells, numbering about 1000 trillion.

- **We learned that early experience, in an elaborate dance between nature and nurture, affects the way the brain is wired.** The experiences that the young child has, the sound she hears, the sights she sees, the sensations she feels, the things she tastes all will create the synaptic connections, affecting the way the child's brain is wired.
- **We learned that the brain operates on a use it or lose it principle.** In the 1970s, Peter Huttenlocher from the University of Chicago counted the synapses in the frontal cortex of the brain, finding that children's brains have many more than you and me, as adults. After the first decade of life, however, the number of connections begins to decline. By the time the child enters the teenage years, about half of the synapses have been "pruned," or discarded with about 500 trillion remaining. This number stays relatively constant throughout life.

The brain connections that have been reinforced by repeated experience tend to remain while those that are not are discarded. Thus, a child's early experience—whether it is positive or whether it is negative—help shape his brain, affecting to some degree how he thinks, feels, and relates to others throughout his life.

- **Finally, we learned that the early care children receives has a decisive, long lasting impact on how they develop, their ability to learn, and their capacity to regulate their own emotions.** Very young children experience the world through the relationships they have with the important caregivers in their lives.

Scientists have even determined two of the aspects of relationships that are most important to young children's development: **warm and responsive care.**

Brain research helps us understand the "why" behind this finding. Myron A. Hofer from Columbia University College of Physicians and Surgeons has

found that the interactions between the baby and his or her caregiver regulate many of the baby's biological systems such as sleep, body temperature, hunger, arousal and sleep.

The power of this give and take between caregiver and child can be made very visible in the studies in which there is a camera filming the infant and a camera filming the caregiver. Researchers such as Ed Tronick at Harvard University have mapped out in moment by moment detail the patterns of the caregiver/child interaction. These researchers have noted that there is a back and forth exchange that pediatrician Berry Brazelton likens to a dance or what developmental psychologist Urie Bronfenbrenner call a ping pong game. The intensity mounts and then the child will look away, calming down, before re-engaging. During these studies, the caregiver may be told by the experimenter to freeze, to stop responding; then the infant does everything she or he can to get the caregiver's attention. When these bids fail, the baby will often get upset, flail around, and cry. When the caregiver is told to begin responding to the child, the baby calms down. Inside the brain, the stress-response system is turned off. Of course, this does not mean that caregivers have to be "on" and responding every minute, but these studies do show that it is in the everyday moments—in the daily interactions with nurturing caregivers that babies begin to develop the network of brain cells that help them learn to regulate and calm themselves.

Megan Gunnar from the University of Minnesota has looked at the impact of such interactions on the production of the stress hormone cortisol. She has found that by the end of the first year, those children who have received consistent, warm and responsive care from their caregivers produce less cortisol. If they do become upset, they can turn off their stress reaction more quickly than children who have not received this kind of care. Thus, these children will be able to respond better when they face the inevitable difficulties of life.

What are the implication of research on brain development for child care?

According to the National Center for Education Statistics, there were 21 million children under the age of six in the United States in 1995. More than 12.9 million of these children—61 percent— were in child care.

- **Children in child care need what they need in their families. They need warm and responsive care?**

Several years ago, the Families and Work Institute in collaboration with Carollee Howes at UCLA, Susan Kontos at Purdue University, and Marybeth Shinn at New York University conducted a study of family child care and relative care. When we analyzed all the ways that quality—as we measured it—affected children's development, we found that **warm and responsive care** was central. Two other multi-site studies of center-based setting reveal the same thing. Although family life and child care are different and **families are first and foremost in children's lives**, children need warm and responsive care at home and in child care.

Interestingly enough, when we asked parents what was most important to them in child care, parents mentioned the same characteristics. They want their children to be **safe**.

They want their children to be with people who care about them—that is are warm. They want their children to get enough attention, in other words are responsive. And they want caregivers who communicate what is happening to the child during the time the parent and the child are apart.

What does warm and responsive care mean?

When one thinks of "child care quality," or even "warm and responsive" care, these concepts may seem soft and fuzzy and not measurable. Not so. We can observe and quantify these characteristics in valid and reliable ways in the studies we do.

Warm care means being caring. It means expressing joy in who the child is and helping the child feel safe and secure.

Responsive care is a complex concept that encompasses emotional, social, and intellectual development. Emotionally, it may mean comforting a child who is hurt. Socially, it may mean teaching toddlers who bang each other on the head because they both want the same toy that there are other ways to negotiate over a toy. And intellectually, it may mean responding to the baby who points to a ball, by using words: "Do you want the ball?" because we have learned from the brain development research that children learn about language long before they are capable of talking. And when the preschooler gets excited about trucks, the child care provider pulls out a book about trucks to read with the child or writes down what the child says about trucks. In a very real sense, responsive care is early education. It is during the preschool years that the foundations of school readiness and school success are laid.

What does good quality child care look like?

How can families know? Parents can watch the ways teachers behave with children. Are they warm and caring? Do they seem to know what is going on with the child? A parent can ask a child care provider to describe another child she has cared for. If the provider uses pejorative and negative words about that child, chances are the provider will have negative feelings about the parents' child as well.

Parents can tell if the provider is responsive. If they look at a child care classroom, the children should all be busy—exploring, using materials, talking in pleasant voices with each other. If they all run over to the visitor, they are probably bored and the setting is not stimulating enough.

Which child care providers or programs are most likely to provide good quality of care?

Studies have found that it is not the name on the door (preschool/ child care/family child care) that is most important. The range of quality is very similar in all these arrangements.

Our studies and others have, however, uncovered the characteristics associated with higher-quality education and care. They found that children in center-based arrangements fare better emotionally, socially, and cognitively when they are in arrangements that have:

- a sufficient number of adults for each child and smaller group sizes so children receive individual attention;

- child care providers who continue to learn about children and their development;
- low staff turnover—which is affected by how much staff are paid—so that children can form stable relationships.

In care that takes places in the home of the provider—what we call family child care and relative care, children fare better when their providers, among other characteristics:

- are committed to taking care of children and are doing so from a sense that this work is important and it is what they want to be doing;
- seek out opportunities to learn about children's development and child care;
- think ahead about what the children are going to do and plan experiences for them; and
- seek out the company of others who are providing care and are more involved with other providers.

We call this "intentional" care because these providers are intentional about their work.

What have studies found about the quality of care and early education in this country?

Three multi-site observational studies of both center care (in school-based programs, Head Start programs, and child care centers) and family child care conducted between 1988 and 1994 reveal an uneven picture of quality.

As has been said, these studies indicate that 12 to 14 percent of the children are in arrangements that promote their growth and learning while 12 to 21 percent are in arrangements that are unsafe and harmful to their development. For infants and toddlers, the proportion in unsafe settings is even higher: 35 to 40 percent.

What does unsafe child care look like? What does mediocre care look like?

In our research, we have seen many children in unsafe settings. We have seen providers not paying any attention to children. We have seen dangerous objects within children's reach. We have seen children spend their days in cribs and playpens.

We have also seen children in mediocre care. We have seen children running around, from the front of the couch to the back of the couch in home based settings, wandering aimlessly in classrooms, with little to do or to learn.

Can quality be improved?

Not only can quality be reliably measured, it can be improved.

A study of community-based family child care training in three sites conducted by the Families and Work Institute and its colleagues revealed that the children were more likely to

behave as if they felt more safe and secure with their providers following training, and the quality of the caregiving environments had also improved. This initiative was funded by business.

In another study conducted by the Families and Work Institute and its colleagues where the state had legislated improved ratios and higher educational requirements for staff, the changes in children's development were impressive: they behaved as if they felt more safe and secure with their teachers, exhibited better cognitive and social development, were more proficient with language, and even had fewer behavior problems.

New insight into the brain development of young children reveals that we know what it takes to promote the healthy development of young children in child care and early education settings. The question is: Will we act on this knowledge? That, of course, is the purpose of this historic conference.

4 pages



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- Consider the stress of a parent about to re-enter the workplace .. It's a stressful transition ... but that stress is amplified by the reality of just how difficult it is to find child care for that baby.
- And that reality is that 2/3 of all child care in California is in centers and only 4% of center spaces are for babies and children under two;
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(Close with patchwork quilt metaphor and ... the need to create an infrastructure and expanded resources for delivering quality child care services)

~~Oct 20, 1997~~ October 21, 1997

FAX 202-456-9412

To: Jennifer Klein

Fr: Mickey Seligson 617-497-9331

Jennifer -

Here's the latest version of my talk - I've
tried to cover all the bases. Let
me hear from you ^{tonight} ~~today~~. I'll be at home
~~all day~~.

Thanks.

Mickey

P.S. Here's the latest version. Call me
this evening if you still want to go over it.

MS

10-21-97

White House Child Care Conference panel presentation

Opening

President and Mrs. Clinton, I want to thank you both for the honor of asking me to participate in this conference. It is tremendously exciting to know that you are not only interested in this vital issue, but that you want to help.

I first got involved in school-age child care more than twenty-five years ago when I needed after school care for my own children, Sally and Jon. I was lucky to connect with other parents and we started a parent coop center with a small after school program. In that same community of Brookline, Mass I then helped other groups of parents start extended day programs in all the elementary schools, in partnership with the Brookline school committee which provided rent free space so that low-income parents could afford the care. Two tiny articles in the Ladies Home Journal and McCall's magazine brought me 2,000 letters from parents and schools and public and private agencies. I still remember one letter from a mother who drew a map showing me how many big streets her daughter had to cross, the location of a scary field, the number of blocks between school and home.

Is this a problem? What are the dimensions? Where do children go after school?

Many adults over the age of thirty remember out-of-school time as time to play with friends, explore the neighborhood, play records, ride bikes, and above all, eat! Someone's mother or relative was home but mostly invisible. People remember feeling safe. Things are different now. Kids don't speak about feeling safe in their neighborhoods, or even at home. 25 million children in America have working parents, many of whom work full-time once their kids reach school. Children spend less than 20 percent of their waking hours in school. Risks to health and even life are now common among young children. Unsupervised children are at significantly higher risk of truancy from school, stress, receiving poor grades, risk-taking behavior and substance abuse, and either participating in crime or being victimized (Dwyer et al, (1990); Marshall et al (1997); National Center on Juvenile Justice, 1997)

Break
out

Children spend more of their out-of-school time watching television than any other single activity, and we know the impact of that on kids—kids read less, play less, and are more aggressive. On average, American children spend 40 hours a week watching television and playing video games, more hours than they spend in school, and children in low-income households are estimated to spend 50 percent more time watching television than their privileged peers. Our best estimates tell us at least at least 5 million children between 5 and 14 spend ~~too much~~ time on their own during a typical week.

The 1990 National Child Care Study breaks down percentages of after school arrangements--and concludes that while there are a lot of kids who go home to relatives, to child care centers, to family day care homes, it's pretty clear when kids pour out of school buildings at 2 or 3 p.m. they don't all head for the local Y. A lot of kids go to malls, to fast food restaurants, to each others houses where there may or may not be an adult present to supervise.

Parents tell their younger children to go straight home from school, to lock the door, and how to answer the phone so no-one knows they are alone—all good ideas to keep kids safe. But many kids are glued to the t.v. during this time, and often experience loneliness in this kind of social isolation.

What does research have to say about what makes for healthy kids who feel good about themselves and others, and who are competent in school? The key studies point to two factors: caring relationships and constructive activities.

One evaluation of after-school programs (Vandell) finds that the single most important factor is the quality of children's interactions with the program staff. Kids do better in school, are more self assured—if they attend carefully planned programs with plenty of choices where the primary work of the adults is caring about and for the kids. Jerome Bruner has written compellingly that what helps kids learn is the nature of their relationships, our capacity to listen and to hear their stories. We develop a sense of self not in a vacuum but in relation to others.

The Cooperative Extension Service (Riley, et al, 1994) studied the effects of 64 such programs in 15 states, and found that principals and teachers reported their students as doing better academically, behaving more cooperatively, handling conflicts better, showing increased interest in reading, and becoming less involved in vandalism.

Informal learning environments offer the chance to try to learn something you don't know how to do--physical or artistic or intellectual--in a safe place where you don't pass or fail. Good after school programs make that possible. As do adult staff who understand the age group, who are comfortable in a relaxed setting that is different from school, who use their unique talents and personalities and their capacity to engage the children.

What is being done? How are communities dealing with this issue?

Today there are a few more resources in a few communities for parents to get help finding care. There is a national network of child care resource and referral agencies. There has been generous funding from the American Business Collaboration that has helped to develop more programs and improve quality. Some states have enacted enabling legislation so schools can partner with community agencies, others have financed training and new programs. After-school programs exist in schools, in churches, in parks and recreation centers, in youth-serving agencies, child care centers and in family day care homes.

Building collaborations is an effective way to stimulate development of the supply of services, make inroads in improving quality, and leverage both dollars and facilities. This kind of partnering is working well in Boston, Chicago, and Seattle, through a privately funded initiative of the Dewitt Wallace Readers Digest Fund, called MOST (Making the Most of Out-of-School Time). In Chicago a new partnership with the city's Park District is creating new school-age child care spaces for several thousand children; in Boston, Parents United for Child Care has leveraged hundreds of thousands of dollars from the private and public sector to support low-income families' school-age child care; in Seattle anyone can go to a public library or eighty-eight other community access points to log on free to the data base and get information about 300 out-of-school time programs like art centers, sports and recreation, tutorial services.

But there are some big problems.

This is not just about some working families needing after school child care. This is an issue that cuts across all income groups, including families preparing to enter the out-of-home work force. Every family that on this very day is managing the work and family and school and child care whirlwind knows what I mean. Yet some Americans are more in need of help with school-age child care than others. Some don't have the resources to pay for lessons, after school sports, academic programs, summer camps. Some kids don't get the same exposure to ideas, skills, positive relationships with adults and their peers.

The National Before and After School Program Study clearly shows this discrepancy—83 percent of approximately 50,000 school-age child care programs depend on parent fees for their survival. Many families simply can't pay. We know very little about how immigrant and refugee families manage their children's out-of-school time.

We've got much further to go. Programs could serve more children right now with funding targeted for a spectrum of low income families.

While there is widespread agreement on standards of quality established by the field, and a new accreditation system of the national professional organization, NSACA, quality is uneven at best. Parents have the right to expect certain quality standards such as ratios and staff qualifications.

It is more and more difficult to recruit qualified school-age child care staff. Salaries are low and turnover is high, and people move on quickly to better paying work.

Programs often pass along to parents the cost of having to lease school facilities and pay for custodial services. There is a huge transportation problem—who should pay to bus children from school to after school program? Parents? The school district?

Some school boards have welcomed partnerships with community-based organizations, or are running their own programs; others resist them.

Rural areas have special issues such as the distance program participants must travel. And many children with special needs don't have access to the existing system because of inadequate staff training. One group of children—middle schoolers—are the least served group and have some of the most pressing needs.

Conclusion

We know what to do to solve some of these problems. There are three ways national leadership could help:

1. First, following up on this conference, keep the spotlight on this issue both inside and outside government.
2. Finance more school-age care for low and moderate income parents, regardless of their relationship to welfare. School-age care benefits society—the investment will pay off in terms of producing long-term benefits in children and especially as a prevention strategy.
3. Fund community level strategies to enable groups to work across institutions to collaborate on discovering and meeting local needs and expanding services to meet those needs. An official incentive encourages people to cross institutional lines, and funding is an additional incentive.

Thank you

DAVID SHIPLEY

10/21/97 11:06:41 AM

Record Type: Record

To: Jennifer L. Klein/OPD/EOP, Nicole R. Rabner/WHO/EOP

cc:

Subject:

here's a draft of the column. it's too long and needs a better ending. pls call and then i can send it off to our client.

thanks

DRAFT 10/22/97

**FIRST LADY HILLARY RODHAM CLINTON
TALKING IT OVER
OCTOBER 23, 1997**

As Bill and I prepared for today's White House Conference on Child Care, we tried to imagine back to what things were like in our household 20 years ago. If I were writing this column, for example, not only would the keys on the typewriter be sticky with baby food, there would probably have been some sort of low-grade child-care catastrophe. Bill might have had to run off to a meeting in the Capitol. I might have had to try a case in court. The babysitter might have called in sick. Back then, we basically did what most American parents do just about all the time: juggle -- and hope for the best. [*f.y.i. child care story from book used in earlier column*]

And we were lucky. Because we were both employed, because we had flexible schedules, and because we had the privilege of living in a governor's mansion with a staff for all but two years of Chelsea's life when she was young, there was something Bill and I did not have to worry about -- that our daughter was receiving quality child care when we were out of the house.

Unfortunately, that is not the case for most Americans. In the last 4 ½ years, as I have traveled our country talking to parents, no concern has been more prominent than child care. I know the questions by heart, for I have heard them in inner cities and leafy suburbs alike: How can I find quality child care? How can I afford it? Will child care harm my child?

The plain fact is, we have a crisis in child care. There is simply not enough quality care for children who need it.

Studies support what I have learned firsthand. In a survey released this week by "Parents Magazine," nearly 75 percent of American families with young children use some form of child care, and many are unhappy with that care. More than half of these parents worry every week whether their child is looked after properly. A majority of those surveyed believe child care is

not reliable, that available options are too limited, and that quality is not good enough.

Parents have reason to be concerned. According to research by the Families and Work Institute, 13 percent of regulated and 50 percent on nonregulated family child care providers offer care that is inadequate. That means children spend their days with care givers who do not follow basic sanitary practices; who rarely talk, cuddle or play with them; in rooms that lack toys and other materials to encourage development; and in places where the ratio of children to adults is too high for individual attention. A recent University of Colorado at Denver study of child care in four states found that only one in seven child care centers were rated as good in quality

And quality care, when it is available, is often financially out of reach for parents, particularly low-income parents. According to the 1995 Census, families earning under \$1,200 a month pay an average of 25 percent of their income for child care. A single mother I met who works as a secretary said she was able send her child to school only because of a scholarship and because she had moved back in with her parents. Otherwise, she told me, "I would probably have to quit my job and go on welfare...Who would watch my child during the day?"

The urgency of improving child care in America is heightened by new information about the intellectual and emotional development of children. As we learned at a White House Conference on Early Childhood Development in April, what happens to a child in the earliest years can make a difference in how well a child can learn for a lifetime. Given that 45 percent of children under age one are in child care on a regular basis, this is an issue of importance not just for individual children, but also for the future of our nation.

These studies tell us something else: good care, whether that care is given at home or at a child care center, is, well, good care. While there is no replacing the strong bonds of family, quality child care is beneficial for children. [*want to say something about choice here?*]

At today's conference, experts from around the country -- teachers, scientists, policy-makers, parents and others -- will gather in the East Room to discuss what sort of plan of action we should take as a nation to raise the quality and expand the accessibility of child care available to our families.

It is important to remember that whatever solutions come out of the conference will involve all sectors of the American community. The national government has a role to play, but only in partnership with state governments, the private sector, school systems, and individual citizens.

In forging a course, we can look to the models of quality child care around the country. Earlier this month, I saw two of them. At Quantico Marine Base in Virginia, I learned how the military has put in place a superb child care system -- with high standards, mandatory training, and good wages and benefits for the staff. In Florida, I saw how the private sector, working with government, is expanding child care opportunities. Funds raised by the Florida Child Care Executive Partnership are matched by the state and then dispersed in grants to communities with child-care initiatives.

When I asked Quantico's commander and the business leaders from Florida why they were working to improve child care, their answers were remarkably similar. When parents come to work confident that their children are well-cared for, they can make a much more positive contribution. It doesn't matter whether they are Marines or bank tellers.

[*need to work on this*] A couple of weeks ago, I walked into the Center for Young Children at the University of Maryland. There I saw something wonderful: a child care center that is warm and inviting; with workers that are creative, energetic and focused; and a range of books, toys and crafts materials. It's a place any of us would happily stay for juice of naptime. And it's what every American child deserves.

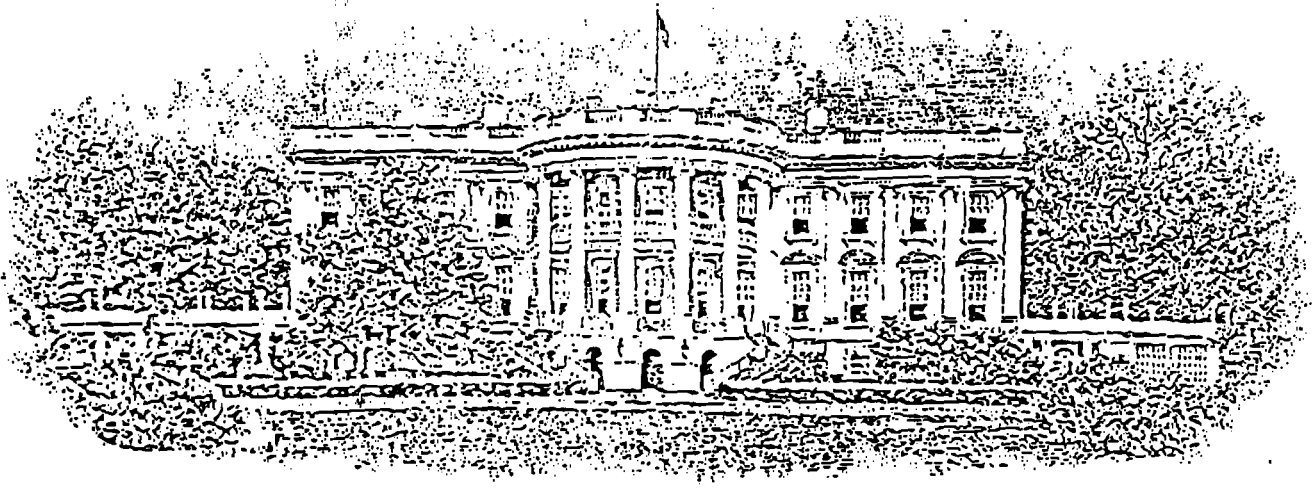
10/21/97

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THE WHITE HOUSE
OFFICE OF INTERGOVERNMENTAL AFFAIRS



FAX COVER SHEET

To: jen

From: Sky

Date: 10-21

No. of Pages: 2

Phone: _____

Fax: 62878

Phone: 202/456-2896

Fax: 202/456-2889

Message:

Following is outline for Gov
Hunt. Emily will not be on
the call — I will start it
off and leave you with them.
Look for my call at 4 — Thanks.

Governor Jim Hunt
White House Daycare Conference
October 23, 1997
Outline

NGA Report - Helene Stebbins

I. NC has one of the highest percentage of working mothers in the country and new research shows that a child's health development is heavily influenced by his or her experiences in the first years of life. How are we responding to this dual challenge?

A) We must provide affordable, accessible, quality daycare

B) Almost every state is addressing or planning to address the needs of very young children. Governors are taking the lead and states are addressing these needs through a diverse array of programs.

II. How is North Carolina meeting this challenge?

A) Smart Start--a comprehensive public-private initiative--brings everyone to the table, including community leaders, child care providers, parents, teachers, religious and business communities. Local communities know what works best for their children and they know that by improving the opportunities for their youngest citizens they are investing in the future of their community. Collaboration is the key to Smart Start success

B) Across the country, teachers of our youngest children are undereducated and paid poorly. That means high turnover rates in child care centers. T.E.A.C.H. addresses those issues. In the past four years, over 5,000 child care teachers, directors and home providers have received scholarships to attend state community colleges and universities. What makes this program unique is that as teachers are more educated, they receive raises and bonuses as incentives to stay in the field.

III. North Carolina has proven that these kind of approaches work. We know that Smart Start has improved the quality of child care in the first counties where it began by 18 percent. While the average turnover rate in child care centers exceeds 40% annually, the turnover rates for T.E.A.C.H. participants is less than 10% annually.

WHITE HOUSE CONFERENCE ON CHILD CARE

Valora Washington

"Jumpstarting Change: The Role of Local Communities In Assuring Child Care That Works"

I. Introduction

- A. Reference to earlier panel on why child care matters.
- B. The opportunity/importance of community involvement.

II. The State of Affairs: How Well Are Communities Doing?

- some working well/some only beginning, mixed picture

III. Jumpstarting Change: What Works in Communities

- some working well/some only beginning, mixed picture.

SUCCESSFUL COMMUNITIES:

- A. Get everyone involved child care professionals, parent and providers cannot do it alone

EXAMPLES: Kellogg Foundation, Early Childhood Funders
Collaborative with ABC

- B. Realize and encourage each sector (business/philanthropy) to add its own value and strength to the process.

- build relationships
- value added of various sectors
 - ✓ civic and business leaders
 - ✓ experts in child care
 - ✓ elected officials
 - ✓ parents
 - ✓ others

EXAMPLE: Florida Education Fund

- C. Are willing to take a look at themselves begin with community assessment/community visioning.

- availability?
- access?
- cost?
- roles?
 - ✓ families are central to communities
 - ✓ everyone creates the communities vision
 - ✓ communities with vision support families

EXAMPLE: Avance, Rio Grand Valley, Texas

D. Develop concrete plans that are comprehensive.

- know what you want to achieve
- focus on goals – identify critical issues/specific gaps
- build on community assets
- assess your community's resources – describe resources, initiatives, programs needed
- cross-community collaboration (human and financial resources that can be tapped/supplemented)
- work for specific indicators of success

EXAMPLE: Battle Creek, Michigan KYIP
Cuyahoga County, Ohio

IV. Jumpstarting Change: A Few Challenges

- A. Importance of preserving the child care diversity in communities while bringing order to chaos and standards that assure child safety and quality.

EXAMPLE: King County, Washington

- B. The issue of cost and what this means for access, availability, quality, compensation. (example of community addressing the cost challenge)
- C. Engaging the majority – the people who don't have children/young children who feel this issue doesn't concern them.
- D. Encouraging personal parental responsibility through recognition of the need for all families to have broader social support.
- E. Need for clearer articulation of outcomes/results that community can understand and buy into.
- F. "We know more than we do" --- looking through the eyes of the child.

V. Next Steps: What We Must Ask Ourselves

- A. Where are our community values/vision that we want for our children (shared vision).
- B. What are our communities' strengths and gaps in building the caring community for children? Community closes the gap between quality and what parents can afford.
- C. Do we have the entire community involved?
- D. In everything we do:
 - look through the eyes of the child putting their needs and interests first
 - do what we know works, focusing on solutions available now
 - bring more accountability into the system
 - look at concrete results and outcomes for children

D. Goethe:

"Knowing is not enough;
we must apply

Willing is not enough;
we must do"

Susan S. Aronson, MD, FAAP
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Fax

To: Noa Meyer	From: Susan S. Aronson, MD, FAAP
Fax: 202/456-8244	Pages: 7, including cover
Phone: 202/456-2787	Date: October 19, 1997
Re: outline of remarks for 10/23/97	CC: Janis Guemey, AAP Washington Office

☐ **Urgent** ☒ **For Review** ☒ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

● **Comments:** I returned home late yesterday and put this draft together today. I realize that there is too much material to cover in a 5 minute presentation and will select highlights to present orally. If you have suggestions about how the material should be edited or presented, please call and leave word on my voice mail at my home. (I will be seeing patients all day tomorrow and will try to check my voice mail when I get home.) If you need to reach me during the day, call me on my beeper. 215/383-2704. I can be reached by beeper when I am in Philadelphia.

By Cc, I am sending a copy to Janis Guemey in the Academy of Pediatrics Washington, DC office so she can give me her comments too.

The White House Conference on Child Care

10/19/97 Draft of Remarks Prepared by
Susan S. Aronson, MD, FAAP
Clinical Professor of Pediatrics
Consultant on Health and Safety in Child Care
Member of the Board of the American Academy of Pediatrics

I speak to you as a pediatrician, an advocate for children, a working mother who was challenged to find good child care when my children were young, and now, as a grandmother of a toddler in a child care center.

Health and Safety is an Essential Component of Child Care

Government has a duty to preserve, protect and promote the potential of young children for the future of society. Newly publicized research on the development of the brain shows that nurturing, brain stimulation and body care in a safe and healthy environment are critical during a child's early life.

HEALTH AND SAFETY ISSUES IN CHILD CARE

Avoiding Harm:

- preventing infections
- preventing injury

Promoting Health:

- Child care is a point of access to children to link them with preventive health care in a "medical home"
- to learn behavior for a lifetime of good health

Avoiding Harm by Preventing Infections - Group care increases the risk of shared infections, but immunization and hygiene are effective control measures.

- Children in regulated child care settings have higher levels of immunization than those in the general population. Most states require some documentation of immunization for children in child care. Requiring immunization of children in child care gets vaccine to children when it can do the most good -- at the age when they are most vulnerable to vaccine-preventable disease. We have a universal requirement for immunization of children attending regular school.

Just
did reg

RECOMMENDATION: There should be a federal requirement for immunization according to the nationally recommended schedule as a condition of attendance in federally subsidized group care. (The nationally recommended schedule is approved annually by the Advisory Committee on Immunization Practice of the Centers for Disease Control, the American Academy of Pediatrics and the American Academy of Family Physicians.)

- Good hygiene prevents the spread of infection in child care. We must teach caregivers and children when and how to wash their hands so they don't feed each other the germs gathered from the surfaces they touch. Child care offers many opportunities for the spread of germs: diapering, assistance in using the toilet, nose-wiping, body-to-body contact and lots of meals and snacks. Hand washing and disinfecting of contaminated surfaces reduces the number of germs.

RECOMMENDATION: Child care regulations should require that facilities have running water and soap in the right places, and sufficient numbers of caregivers so there is time for hand washing and cleaning of surfaces before disease spreads. Every child care group should have a sink. Caregivers should receive training and evaluation on hygiene routines that prevent disease.

Avoiding Harm by Preventing Injuries

Regulated child care centers are safer than the child's own home. Children are injured less often per hour of contact in such child care centers than those who receive care only in their own homes. This is not so for family child care homes where children have an increased rate of injury per hour of contact than in their own homes.

RECOMMENDATION: All federally subsidized child care facilities should be inspected for significant hazards, including home-based care.

Most injuries are preventable. Here are some examples of measures to take to reduce injury associated with child care:

- The largest number of severe injuries that occur while young children are in child care is the result of falls from climbing equipment that is mounted over hard surfaces. Impact-absorbing materials and lower-height of play equipment can prevent these injuries. Installation of impact-absorbing materials can be costly, but death and disability costs much more.

RECOMMENDATION: Develop low-cost loans and partnerships with the corporate community to finance facility modifications that avoid the highest risk problems. Surfacing under climbing equipment both indoors and on the playground should have top priority (along with installation of sinks) among facility improvements.

- Transportation to and from child care exposes children to significant risk from motor vehicle injury. Appropriate use of car seats and seat belts can prevent many of these injuries. Child care is a place where parents can learn how to transport their children safely.

RECOMMENDATION: Expand current programs of the National Highway Traffic Safety Administration to increase teaching and enforcement of correct use of seat restraints for the child care population.

- Many injury prevention measures are inexpensive. Finger-pinching in doors is a less serious, but common injury in child care. The solution is not expensive. Almost a decade ago, during a study of French child care, The First Lady and I were members of a team who observed finger-pinch preventing rubber gaskets installed on every door in child care centers. Australia uses them too. The material is attached with screws onto the door and frame to cover the gap between the hinges and make a forgiving closing edge of the door.
- Many child care buildings are old and full of lead and asbestos. We discover the problem when a child has a high lead level. HUD funds for environmental lead detection and abatement are available to reduce lead in an individual home, but there is no federal program for lead detection and abatement in child care facilities.

RECOMMENDATION: Legislate and finance enforcement of safety codes for buildings where young children receive care. Building codes should address the needs of babies and young children when they are users of a facility, just as they address the needs of individuals with disabilities. Further, we must provide training about low-cost injury prevention measures to inspectors and providers of child care services.

Promoting Health

Widespread use of child care offers unique opportunities to promote the health of children. I have already mentioned that children in group care are better immunized than the population as a whole. Child care attendance offers opportunities to help parents learn about raising their children at the time when they have the least experience with the complex tasks involved. Health risks are most pressing when children are very young. Ironically, we have school nurses

in most school settings for older children, while the majority of child care facilities operate with no health professionals at all.

When child care programs check whether children are up-to-date with routine check-ups, they find and help connect children to preventive medical services. Vision screening at age 3 detects a common condition that if untreated, leads to blindness in one eye. Early hearing screening prevents disabling language delays. Child care programs can check that kids got their vision and hearing screening done.

Child care providers can teach life-long healthy behaviors such as dental hygiene and hand washing. In group care, children can learn to choose nutritious foods, to balance periods of stress and relaxation, and to use appropriate, non-violent outlets for anger.

RECOMMENDATION: Expand good federal initiatives:

Head Start Health Component: I learned about the health component of early education programs when I worked as a Head Start Health Consultant during my residency. Over the years, I have helped improve the national **Head Start Health Performance Standards**. Head Start has led the way and can do more to model health and safety in child care at the national, regional and local level. Head Start has been and should expand its role as a change agent for early childhood in our nation's communities.

The Healthy Child Care America Campaign: During the Clinton Administration, the Administration for Children and Families and the Maternal and Child Health Bureau launched the Healthy Child Care America Campaign. This campaign has publicized the goals of safe and healthy child care, and financed state-by-state initiatives to implement those goals. The campaign's collaboration among ACF, MCHB and the American Academy of Pediatrics links government agencies, health professionals and early childhood educators to promote successful health and safety strategies. Calls for help are welcome at the toll-free number for Healthy Child Care America: 888/227-5409. You can reach the campaign through the Academy's Internet web page too: <http://www.aap.org>.

Much of the recent work to improve health and safety is based on the joint publication of the Maternal and Child Health Bureau, American Academy of Pediatrics and the American Public Health Association called ***Caring for Our Children, National Health and Safety Performance Standards - Guidelines for Out-of-home Child Care***. Production, distribution and revision of these guidelines has been a vital tool provided by MCHB to regulators, early childhood professionals, health professionals and trainers. To help set priorities for implementation, MCHB also funded the publication of a subset of the standards

that have highest priority for the prevention of death, disability and disease — called ***“Stepping Stones.”*** The publications draw together the best research and expert opinion to inform those who work in child care. Another MCHB-funded project, the National Resource Center for Health and Safety in Child Care, put *Caring for Our Children* and *Stepping Stones* on the Internet. The web address is <http://www.nrc.uchsc.edu>.

RECOMMENDATION: Continue support for and expand access to information with viable links for all child care providers, trainers and consultants. All types of caregivers, even those who provide care in the child's own home, should have access to technical assistance. Home-based child care needs home visitors to avoid isolation, neglect and abuse. Centers and homes should have health consultants — nurses linked to Resource and Referral Agencies, as outreach workers from Managed Care Organizations and other health institutions, or from school health programs. We are doing all we can with volunteers, but systematic involvement will come only if health and safety consultation and training are a requirement. Expand the impact of technology by helping more child care providers to obtain and use computers. Even cast-offs computers from local industries and schools would help.

Suggested Questions:

1. How can we build on existing efforts to link health professionals and child care providers?
 - Designate funding for quality improvement in health and safety in child care to encourage states to establish and maintain programs such as those now operating in California, Pennsylvania, and North Carolina. These programs use state funds to improve health and safety in child care by linking health and child care professionals at the local community level. In Pennsylvania, MCHB funding fills in the gaps between categorical sources so the entire state population of children in all types of early childhood programs can benefit.
 - Continue and expand the Healthy Child Care America campaign. Through widespread education about what will keep children safe and healthy, engage parents, child care professionals, health professionals, legislators, regulators, and the corporate sector in reaching for a common set of goals.
2. How can child care providers safely handle children with special health needs and disabilities?

- Over 7 % of children have asthma. Under ADA, we expect caregivers to safely care for children with this chronic illness, with food allergy, developmental and behavioral problems, epilepsy and diabetes. We must provide mechanisms for health professionals to educate child care providers as well as parents by compensating them for the work involved.
 - We need to develop methods to compensate health professionals who work with child care providers and to protect them from the liability exposure specifically excluded from most medical professional insurance policies.
 - Health professionals need training to learn how to function effectively as consultants to child care providers. The American Academy of Pediatrics pledges to help in this task and is working on tools and curricula in collaboration with leading nursing organizations.
3. How do we do a better job of assuring that child care in this nation is safe and healthy in all settings?
- We need a systematic approach. Routinely encourage states, accrediting organizations and funding agencies to use the national health and safety guidelines to define expected performance. Next, establish and provide sufficient funding for an inspection system which reliably and continuously gathers data on how well child care providers are meeting the expectations. Use the data on actual performance to design interventions to correct demonstrated deficiencies. Then, use the data from the ongoing surveillance system to select the interventions that work and funnel the resources to the most effective improvement strategies.
 - Dedicate resources to the ongoing education of everyone involved in child care at all levels. Require that states spend a specific portion of federal service dollars on training for regulators, providers, consultants and parents to improve the quality of child care.

ARTHUR ANDERSEN

ARTHUR ANDERSEN & CO SC

Facsimile

Denver

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Subject/Special Instructions

Deliver to NOAH A.S.A.P.

- I. Intro - Ordinary Guy
White middle-class, middle-aged bank president, raised by a career military officer and a stay-at-home mom whose children have never seen the inside of a child care center.

1. My involvement

- A. Governor Romer asked me to chair Colorado's Business Commission on Child Care Financing

- 1) Designed to re-engineer child care and its financing mechanisms.

- B. Macedonia Baptist Church - Patriotism challenged

- 1) Quote Reverend Alan Boesak formerly of ANC in South Africa.

- a. Greatness of a nation is no longer measured by the size and strength of its arsenal.
- b. Greatness of a nation is measured by the future it provides its children.
- c. Now that I live in America and see how you treat your children, I fear that you have strayed from the path that led to your greatness.
- d. Fortunately the grace of God does not fall like rain from the sky; instead, it manifests itself in the actions of ordinary people.

II. So just what did Reverend Boesak mean?

- A. If you are over 40, please raise your hand.

- 1) 10 - maybe 15% sat down.
- 2) Asked in San Diego of group of high school kids. 8 out of 10 sat down.
- 3) It wasn't until then that it became apparent that the neighborhood in the rearview mirror I left behind in the morning as I went to work had changed. I had been seeing the neighborhood I was born into in 1956, not the neighborhood my children were being raised in, in 1997.
- 4) As a white, middle-aged, middle-class man, I was making decisions that affected my employees' children and my own children, predicated on my own experiences as a child and not based upon the reality of today.

III. How has that world changed and what is the impact?

- A. 14% of women with children under 6 were in the work force in 1950.
- B. Today, that number is 60%.
- C. 31% of children are born out-of-wedlock.
- D. 40% of all kids wake up each morning in a home without a father.

IV. What are we doing each morning with our children?

- A. We turn them over to an industry where...
 - 1) The average wage is \$6.00 per hour yet average profit is < 2%.
 - 2) Their primary caregiver is likely to change more than twice per year.
 - 3) 60% of care is developmentally neutral. 20% negative or unsafe.
 - 4) With 60% of all young children in child care and 80% receiving developmentally neutral or negative care, nearly 50% of all our children arrive at kindergarten with a meager developmental background and questionable preparation to learn.
- B. So here you have it, we have seen the most profound demographic change in the history of our union and not a single institution - not schools, not government, not employment, not even the family - have been re-engineered to accommodate the effects of maternal work force participation. Our collective response has been to remand our children to care each day that is qualitatively suspect and financially nonsensical.

- V. In Colorado, we have grown to understand that absent, systemic change, the concept of affordable, quality care, is an oxymoron. As a result, this past Columbus Day we began our own journey of discovery known as the Educare Colorado Initiative. Funded by Colorado's business and foundation communities and overseen by business, civic and government leaders, this initiative is designed to emerge with a comprehensive, integrated, strategic, business plan to facilitate the formation of a functioning statewide child care system, not just for children on welfare but for children in all care.

This effort is begun with a one sentence vision and four guiding principles:

The Educare vision, building on past experience proposes to create a fully funded; child-centered; parentally involved; permanently sustainable; high quality; universal early care system, that is appropriately monitored and evaluated.

These are the four guiding principles we propose for your consideration. We think that the combined impact of these principles establishes Educare's agenda and advances the vision described earlier.

Principle #1: The system designed must be more than a traditional plan. It must include commitments that will assure its full implementation. While we must implement something of this scale in stages, our focus will be to create a full-scale effort over a defined period of time.

Principle #2: Educare is taking advantage of this moment in time that is characterized by an unprecedented confluence of events and conditions, namely:

- Welfare Reform;
- A Healthy Economy;
- Devolution of Government; and,
- Increasing public awareness of the importance of quality care in the earliest years.

Principle #3: Our goal is to develop a multimedial/delivery system governed by market forces. Educare's purpose is not to compete with or undercut existing early care initiatives. We propose, rather to explore how to combine existing and newly developed initiatives and funding sources in a manner that preserves what is currently working, and builds on that to a point that meets the elements of the vision: full funding; child-centered; parental involvement; sustainable; high quality; universal; systemic; monitored and evaluated.

Principle #4: With regard to the existing initiatives and programs. Educare should provide a way for them to connect with each other to create more of a system. From that point forward, all additions, increments, and enhancements will be made within that system. That system will begin with investments that create the social, physical and financial infrastructure that has long been missing. The infrastructure should include elements of quality service, from training workers to adequately compensating them. That infrastructure should include the education of parents to correct problems they have in knowing how to identify quality early care; a key finding in the "Cost, Quality" study. Educare should then assure parents and providers that parents will have the opportunity to choose care for their children, and, when the parents select quality, that decision will be supported by financial incentives that incrementally reward those who choose to use this system for the primary purpose of Educare, (to quote Ed Zigler) "the delivery to school of a capable child ready to learn."

(Call to action, yet to be written)



THE OFFICE OF THE ASSISTANT SECRETARY OF
DEFENSE

(FORCE MANAGEMENT POLICY)

(OFFICE OF FAMILY POLICY)

BALLSTON TOWERS #3

Room #917

4015 Wilson Blvd

Arlington, VA 22203-5190

Facsimile Cover Sheet

To: Noa Meyer

Organization

Phone: 202-456-2787

Fax: 202-456-6244

From: Linda Amel

Company: Office of Family Policy

Phone: (703) 696-1702

Fax: (703) 696-4276

Date:

Pages including this
cover page:

For your information.

Comments:

Draft remarks for N.G. Meyer's panel discussion (5 min). It was my understanding that he will be asked a separate question on the implementation of the Exec. Memorandum so this is not on the opening remarks. He will be prepared to respond separately. Let me know if this isn't what you envisioned.

Linda

SENT BY: OFF

10-20-97 : 12:20 :

FAMILY POLICY-

202 456 6244 # 07 0

- A “fix, waive, or close” policy
- Note that our standards fall in the middle of state standards.
- What is different is our enforcement of the standards.

4. Wages tied to training

- Caregivers enter \$6.53/hour plus benefits and progress to \$8.98/hour.
- Stringent requirements for training for all caregiving personnel.
- Completion of training leads to promotions.
- Failure to finish training leads to dismissal.
- Our turnover rate, once as high as 300% is now less than 40%.

5. Commitment to national accreditation standards.

- Today over 75% of all eligible military child development centers are accredited by the National Association for the Education of Young Children.
- This compares to 5-8% nationally.
- We think that speaks for itself.

2. A commitment to funding.

- Child care is expensive - Quality costs more than most young families can afford to pay.
- We have a cost sharing system between us and the parents.
- In our centers and school-age care programs, parents pay fees on a sliding scale based on total family income.
- In our family child care program we use appropriated funds to provide training, equipment, and in some cases direct cash subsidies to our providers.
- I should point out that one distinction of our funding is that the government share goes directly to the program as opposed to the parents. This share is used to improve wages and training as well as reduce the fees paid by parents.

3. Strict oversight.

- quarterly unannounced inspections
- a system of checks and balances requiring higher headquarters involvement
- world-wide accessible child abuse and safety hotline

- a DoD Child Development program policy,
- initiated background clearances on all personnel and
- began an aggressive clean-up through inspections and oversight.

We are pleased to share our lessons learned in building a our child care system. Five key factors changed our program from one once referred to as the “ghetto of American child care” to a model for the nation.

1. A systematic approach

- Each component of the system is an equal partner.
 - family child care,
 - child development centers,
 - school-age care.
- Each has equivalent requirements for
 - inspections,
 - training,
 - background clearances.
- There is a single point of entry for child care.

- affects ability to attract and retain a high caliber workforce

Program is very large and growing

- We serve over 200,000 children daily
- at over 800 centers and school age care facilities.
- 9,700 family child care homes.
- nearly 40% of our care is for infants and toddlers.

Our child development program wasn't always good.

- A 1982 GAO Report pointed out:
 - facilities did not meet fire, health and safety codes,
 - there were no program standards
 - no oversight of family child care homes.

In the mid 1980's, like the rest of the country, we experienced a series of highly publicized child abuse allegations.

We had to re-look how we were doing business.

- We issued construction standards,

Proposed Outline for White House Child Care Panel Discussion

On behalf of Secretary of Defense Cohen and the entire Department it is my pleasure to participate on this panel and discuss the Military Child Development Program.

DoD has the largest corporate sponsored child care program in the country.

- Over 1.4 million active duty members
- Over 1.29 million children under the age of 18 years.
- More than 345,000 children are under age 3.
- Each year over 109,000 children are born to our active duty.
- They are at the lower end of the pay scale.
- Military parents are geographically separated from their extended families

Availability and affordability of child care is a real quality of life issue for them. Child care is critical to the DoD "bottom line.

- we consider child care a **workforce issue**
- impacts effectiveness of the force

Oct. 20, 1997

FAX 202-456-9412

To: Jennifer Klein

Fr: Mickey Seligson 617.497.9331

Jennifer —

Here's the latest version of my talk — I've
tried to cover all the bases. Let
me hear from you today. I'll be at home
all day.

— Thanks.

Mickey

- 1 -

DRAFT 10-19-97**White House Child Care Conference panel presentation****Opening**

President and Mrs. Clinton, I want to thank both of you for the honor of asking me to participate in this conference. I have been working for more than twenty years on school-age child care with many others, trying to help parents and children and communities, and so it is tremendously exciting to know that you are not only interested in this vital issue, but that you want to help.

I first got involved in school-age child care when I needed after school care for my own children, Sally and Jon. I was lucky to connect with other parents and we started a parent coop center with a small after school program. In that same community of Brookline, Mass I then helped other groups of parents start extended day programs in all the elementary schools, in partnership with the Brookline school committee which provided rent free space so that low-income parents could afford the care. Two tiny articles in the Ladies Home Journal and McCalls magazine brought me 2,000 letters from parents and schools and public and private agencies. I still remember one letter from a mother who drew a map showing me how many big streets

- 2 -

her daughter had to cross, the location of a scary field, the number of blocks between school and home.

Is this a problem? What are the dimensions? Where do children go after school?

Many adults over the age of thirty remember out-of-school time as time to play with friends, explore the neighborhood, play records, ride bikes, and above all, eat! Someone's mother or relative was home but mostly invisible. People remember feeling safe. Things are different now. Kids don't speak about feeling safe in their neighborhoods, or even at home. 25 million children in America have working parents, many of whom work full-time once their kids reach school. Children spend less than 20 percent of their waking hours in school. Risks to health and even life are now common among young children. Newly reported data from eight states on peak hours for violent juvenile crime show nearly half of crimes taking place between 2 PM and 11 PM. (National Center on Juvenile Justice and the Office for Juvenile Justice and Delinquency Prevention).

Unsupervised children are at significantly higher risk of truancy from school, stress, receiving poor grades, risk-taking behavior and substance abuse (Dwyer et al, (1990); Marshall et al (1997))

-3-

Children spend more of their out-of-school time watching television than any other single activity, and we know the impact of that on kids—kids read less, play less, and are more aggressive. On average, American children spend 40 hours a week watching television and playing video games, more hours than they spend in school, and children in low-income households are estimated to spend 50 percent more time watching television than their privileged peers. Our best estimates tell us at least at least 5 million children between 5 and 14 spend too much time on their own during a typical week.

The 1990 National Child Care Study breaks down percentages of after school arrangements--and concludes that while there are a lot of kids who go home to relatives, to child care centers, to family day care homes, it's pretty clear when kids pour out of school buildings at 2 or 3 p.m. they don't all head for the local Y. A lot of kids go to malls, to fast food restaurants, to each others houses where there may or may not be an adult present to supervise.

Parents tell their younger children to go straight home from school, to lock the door, and how to answer the phone so no-one knows they are alone--all

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good ideas to keep kids safe. But many kids are glued to the t.v. during this time, and often experience loneliness in this kind of social isolation.

What does research have to say about what makes for healthy kids who feel good about themselves and others, and who are competent in school? The key studies point to two factors: caring relationships and constructive activities.

One evaluation of afterschool programs (Vandell) finds that the single most important factor is the quality of children's interactions with the program staff. Kids do better in school, are more self assured—if they attend carefully structured programs where the primary work of the adults is caring about and for the kids. The Cooperative Extension Service (Riley, et al, 1994) studied the effects of 64 such programs in 15 states, and found that principals and teachers reported their students as doing better academically, behaving more cooperatively, handling conflicts better, showing increased interest in reading, and becoming less involved in vandalism.

Jerome Bruner has written compellingly that what helps kids learn is the nature of their relationships, our capacity to listen and to hear their stories. We develop a sense of self not in a vacuum but in relation to others--the chance to try to learn something you don't know how to do--physical or

- 5 -

artistic or intellectual—in a safe place where you don't pass or fail. Good after school programs make that possible. As do adult staff who understand the age group, who are comfortable in a relaxed setting that is different from school, who use their unique talents and personalities and their capacity to engage the children.

This is not just about some working families needing after school child care. This is an issue that cuts across all income groups, including families preparing to enter the out-of-home work force. Every family that on this very day is managing the work and family and school and child care whirlwind knows what I mean.

Yet some Americans are more in need of help with school-age child care than others. Some don't have the resources to pay for lessons, after school sports, academic programs, summer camps. Some kids do not get the same exposure to ideas, skills, positive relationships with adults and their peers. The National Before and After School Program Study clearly shows this discrepancy—83 percent of approximately 50,000 school-age child care programs depend on parent fees for their survival. Many families simply can't pay.

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What is being done? How are communities dealing with this issue?

Today there are a few more resources in a few communities for parents to get help finding care. There is a national network of child care resource and referral agencies. There has been generous funding from the American Business Collaboration that has helped to develop more programs and improve quality. Some states have enacted enabling legislation so schools can partner with community agencies, others have financed training and new programs. After-school programs exist in schools, in churches, in parks and recreation centers, in youth-serving agencies, child care centers and in family day care homes.

Building collaborations is an effective way to stimulate development of the supply of services, make inroads in improving quality, and leverage both dollars and facilities. This kind of partnering is working well in Boston, Chicago, and Seattle, through a privately funded initiative of the Dewitt Wallace Readers Digest Fund, called MOST (Making the Most of Out-of-School Time). In Chicago a new partnership with the city's Park District is creating new school-age child care spaces for several thousand children; in Boston, Parents United for Child Care has leveraged hundreds of thousands of dollars from the private and public sector to support low-income families'

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school-age child care; in Seattle anyone can go to a public library or eighty-eight other community access points to log on free to the data base through and get information about 300 out-of-school time programs like art centers, sports and recreation, tutorial services.

But there are problems.

We've got much further to go. There is not enough affordable school-age. Programs could serve more children right now with funding targeted for a spectrum of low income families.

While there is widespread agreement on standards of quality established by the field, and a new accreditation system of the national professional organization, NSACA, quality is uneven at best. We have the right to expect certain quality standards such as ratios and-----.

It is more and more difficult to recruit qualified school-age child care staff. Salaries are low and turnover is high, and people move on quickly to better paying work.

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Programs depend almost exclusively on parent fees and often pass along to parents the cost of having to lease school facilities and pay for custodial services. There is a huge transportation problem—who should pay to bus children from school to after school program? Parents or the school district?

Some school boards have welcomed partnerships with community-based organizations, or are running their own programs; others resist them.

Rural areas have special issues such as the distance program participants must travel. And many children with special needs do not have access to the existing system because of inadequate staff training.

Conclusion

Finally, this is about kids, it's about families, it's about communities. The singular mission and the most important goal is not only to keep kids safe, but to create wonderful opportunities that let them be kids; opportunities that free them from taking premature responsibility for themselves or their siblings. Wherever programs are housed, no matter the sponsorship, we should expect them all to be places kids like to come to—they do vote with their feet! Programs should respect the power of play as children's work. Good programs understand that the social-emotional needs of children are inextricably linked with school ability and accomplishment. And good programs can serve as the bridge between parents and schools, giving

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parents not only the reassurance their kids are safe while they are at work or preparing for work, but also the knowledge that a trained, caring adult is there to help. Thank you.

to: _____ Distribution
room: _____ date: 10/20/97

Department
of the Treasury
Executive Secretary

Attached for your comments/clearance is a copy of the Secretary's White House Child Care Conference speech. Please review and return all comments to Linda Johnson by 5:30pm today. Thanks.

Distribution

Froman/Solomon
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worky group

Neal C. Comstock

room 3408
phone 622-0064

draft 10/20 1:00 pm; 5 minutes
Remarks Prepared For Delivery
White House Child Care Conference
Secretary Robert Rubin
October 23, 1997

It is a pleasure to speak with you at this historic conference about the importance of child care to the health of our economy.

Over the last five years we have witnessed significant progress in our economy. Five years ago, a high budget deficit kept interest rates high and stifled growth. We had 7.3 percent unemployment and were viewed by many as yesterday's economy. Today, we have nearly eliminated the budget deficit, and that helped keep interest rates low, and sustained the economic recovery. Unemployment is now at 4.9 percent, the economy has generated over 13 million new jobs over the last four and a half years, inflation has remained low, and real wages are rising across the income spectrum. We are clearly once again the strongest major economy in the world.

The source of this success has been a sound economic strategy grounded in fiscal responsibility, opening markets and investing in people. But we should not let this progress mask the challenges we still face in producing a prosperous and competitive economy over the long run. A key question we face is how to create an environment that promotes increased productivity, which, in turn, is critical to raising standards of living. Creating that environment includes several

elements -- investing in people by improving education and training, investing in infrastructure, and increasing access to technology, for example. But there is no doubt that one key to increased productivity is to have a flexible and mobile workforce where all can participate to the full extent of their abilities. And that is where child care is central.

Before joining the Clinton Administration, I worked for a major investment bank on Wall Street for twenty six years. I remember when I first started there were virtually no women at my firm, or on Wall Street in general. Over time we started to get extremely talented women joining the firm, and we faced the challenge of keeping very good people as they started their own families. Today there are 20 million families with employed mothers using child care, including 8 million families with children under the age of five. My experience in the private sector taught me that it is very much in the interest of business to create a work environment that supports the needs of each individual through flex time, telecommuting, and, of course, by providing access to child care. It benefits the individual obviously, and it benefits the company by allowing them to retain talented and knowledgeable people, avoiding the costs of retraining. In turn, the economy at large benefits because it encourages workers to go where their talents dictate.

Handwritten notes:
biz/law schools
of women at
Goldman Sachs
a small segment of
from largest possible
best enabling
enables
function for
potential

Vertical note on left:
Add
FS is
different

Handwritten note:
vast majority - working mothers →

Of course, the challenge of finding affordable child care is particularly

difficult for lower income people, especially those trying to move from welfare to work. For families with preschoolers and annual incomes of less than \$14,000, annual child care costs total, on average, 25 percent of their income. As for the difficulties facing those who are leaving welfare, consider the example of a working mother of two in Pennsylvania. After leaving welfare, losing government benefits and incurring child care costs, her disposable income increases by only 22 cents for every extra dollar she earns <ck: gus/econ policy -- is that assuming she makes minimum wage?> A low income mother should not have to choose between caring for her child and going to work.

Whether we speak of low or middle income mothers, there can be no doubt that providing effective child care is an issue of critical importance to our society and our economy. Clearly, government at all levels -- federal, state, and local -- have roles to play, in partnership with businesses.

* straight business example

more concise { Already, such partnerships are evolving. In Rochester, New York, a public-private partnership, the Rochester/Monroe County Early Childhood Development Initiative, established in 1990, has developed a set of priorities for improving child care. During its first five years, ECD's efforts led to the creation of 2,000 new child care slots, and 86 percent of 3 and 4-year-olds are now in child care, up from 55 percent of 4-year-olds and 20 percent of 3-year-olds in 1989. Working together, Monroe County and United Way created more than 600 new subsidized

slots for low-income families in 1995. Businesspeople, in turn, established a private sector fundraising initiative, Rochester's Child, to provide funds to quality, accredited child care centers, and work with United Way to help family child care providers become accredited. The number of accredited centers has increased from 3 in 1989 to more than 40 in 1996.

By identifying and publicizing programs such as these, we can create that kind of success elsewhere. Doing so is critical not only to the lives of the mothers and children involved, but to business, and the well-being of our ^{community} ~~society~~ as we enter a new century. Thank you very much.



UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF THE SECRETARY

FAX TRANSMITTAL

TO: Nicole / Jen K.

ORGANIZATION: _____

PHONE NUMBER: _____

FAX NUMBER: 6-9412

FROM: Jill Riener

PHONE NUMBER: _____

MESSAGE: ① Script from Riley's
town meeting as ~~discussed~~

② Terry's Co. are open to
the idea of a 2:30 or 3:00
pm conference call. Let's
touch base tomorrow

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PAGE(S) TO FOLLOW

SATELLITE TOWN MEETING - Teleprompter Script
"Back to School: Families and Communities Together for Learning"
Tuesday, September 16, 1997

SECRETARY RILEY: Good evening and welcome to our September Satellite Town Meeting, our first program for the 1997-98 school year. It is a pleasure to be with you again.

Tonight's program will focus on the exciting back to school time when all Americans can commit to improving education across the nation. Improving our schools is a national priority, as well as a local responsibility. Education in our nation will only improve classroom by classroom, school by school, and community by community. As part of the America Goes Back to School initiative, our program tonight will feature ways that schools, families and communities can form partnerships to extend learning, especially in reading and math, before and after-school.

Our program will also showcase Community Learning Centers as safe after-school havens for children, where learning takes place in a building removed from the violence, drugs, and lack of adult supervision that permeate some communities in America. Community Learning Centers are a cornerstone of President Clinton's America Reads Challenge proposal, which seeks to match reading partners with children who have reading difficulties before and after-school and during the summer.

Before we begin our program, I would like to discuss the latest developments in education since the last Satellite Town Meeting. A few weeks ago, President Clinton and Congress enacted an agreement to balance the budget and cut taxes over the next five years. This agreement includes billions of dollars in education tax credits to help millions of Americans pursue college, graduate education or part-time study to improve

or acquire job skills. The balanced budget contains the HOPE Scholarship tax credit for the first two years of undergraduate education, and a 20 percent tuition tax credit to help pay for the junior and senior years of college, graduate, technical or professional education.

There have also been some positive developments concerning the U.S. Department of Education's Voluntary National Testing initiative. To date, seven states, as well as fifteen urban school districts and Department of Defense schools will participate in voluntary national tests in fourth grade reading and eighth grade math that reflect high national standards. The new tests will be available to states and school districts to assess students in the spring of each year, beginning in the spring of 1999.

Now it's time for us to go back to school. My co-host tonight is Gerald Tirozzi, Assistant Secretary for Elementary and Secondary Education. Our moderator is Nancy Mathis, who will introduce our other guests. Nancy?

NANCY MATHIS: Thank you, Secretary Riley. Tonight, our panelists will discuss why better education is everybody's business and how all Americans can get involved with their local schools and communities to improve education across the nation. Our guests this evening are:

Dr. John Hodge Jones, superintendent of Murfreesboro, Tennessee;

Tina Gonzales, a parent of a child at Intermediate School 218 in New York City;

Ron Mertz, president of Eco-Scrap, a Unocal Company in Los Angeles, California; and

Matt DeVore, president of the Associated Students of Oregon State University, who will join us via satellite.

Welcome to our Satellite Town Meeting. I would also like to welcome members of our studio audience, some of whom are students representing the president's Student Summit. As we all know, school consumes only a small part of a student's time. Across the nation, schools and communities are working together to provide extended learning opportunities during the hours outside of school. Let's look at an example of a Community Learning Center at Intermediate School 218 in New York City.

VIDEO: "Community Learning Center"

NANCY MATHIS: Welcome back. I invite our viewing audience around the nation to call us with your comments or questions. The number to call if you are outside the Washington, D.C. area is 1-800-368-5781. In Washington, the number is 202-463-3170 or 3171. For our Spanish-language audience, we have translators standing by to take your telephone calls so that you can ask questions and receive answers in Spanish.

Tina Gonzales, let's start with you. Tell us how Intermediate School 218 started its own Community Learning Center. What have been the benefits of keeping the school doors open during non-traditional hours?

OFF TELEPROMPTER: PANEL DISCUSSION, PHONES AND AUDIENCE QUESTIONS.

NANCY MATHIS: The U.S. Department of Agriculture's Cooperative Extension Service has joined together in local partnerships to run the 4-H After-School Activity Program. Let's look at a videotape that highlights the after-school program in Los Angeles.

VIDEO: "4-H After-School Activity Program, Los Angeles, California"

OFF TELEPROMPTER: PANEL DISCUSSION, PHONES AND AUDIENCE QUESTIONS.

NANCY MATHIS: We are joined via satellite from Corvallis, Oregon, by Matt DeVore, president of the Associated Students of Oregon State University, as well as his colleague Saji Prelis, and Lisa Marie Nelson, who is conference director of the Oregon Goes Back to School Program. Matt, let's start with you. Tell us more about your organization. What prompted you to form the Associated Students of Oregon State University?

OFF TELEPROMPTER: PANEL DISCUSSION, PHONES AND AUDIENCE QUESTIONS.

NANCY MATHIS: As we've heard tonight, schools can be a critical resource to meet the growing need for children to have safe and productive activities during the hours outside of the school day. Let's review a video from Murfreesboro, Tennessee which highlights the benefits of extended learning programs.

VIDEO: "Extended Learning in Murfreesboro, Tennessee"

OFF TELEPROMPTER: PANEL DISCUSSION, PHONES AND AUDIENCE QUESTIONS.

NANCY MATHIS: Let's quickly review what we've learned from tonight's discussion. Parents, educators, community and business leaders are encouraged to:

- 1.) Spend time reading to and with a child so he or she can read well by the end of third grade.
- 2.) Coach a child in math so he or she is motivated and prepared to take algebra by the eighth grade.
- 3.) Educate students to prevent substance abuse and expand after-school programs for elementary and middle-school students.
- 4.) Assist teachers by recruiting and organizing tutors for help after-school, weekends and during the summer.
- 5.) Plan a series of events that connect middle and high school students and their

parents with college, and learn about the education tax cuts contained in the balanced budget agreement that will help families pay for college. And

6.) Learn more about how your school, school district and state can sign-up to take the 1999 national tests in fourth grade reading and eighth grade math to make sure students are mastering the basics.

Before we end the show, I would like to make you aware of some important resources available from the U.S. Department of Education. A copy of the America Goes Back to School kit for families, as well as the U.S. Department of Education's publication *Keeping Schools Open as Community Learning Centers*, is available by calling 1-800-USA-LEARN. Please be sure to join us for our next Satellite Town Meeting entitled "Preparing Classrooms for the Future: Ensuring Access to the Internet" on Tuesday, October 21 at 8 p.m. Eastern time. With Secretary Riley in Washington, D.C., I'm Nancy Mathis. Goodnight.