



DATE: Aug 29, 1997

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
200 INDEPENDENCE AVE., SW
WASHINGTON, D.C. 20201

PHONE: (202) 690-6311

FAX: (202) 69

OFFICE OF THE ASSISTANT SECRETARY FOR LEGISLATION
HUMAN SERVICES LEGISLATION
ROOM 413 H HUMPHREY BUILDING

TO : Cynthia

OFFICE : _____

ROOM NO : _____

PHONE NO : _____

FAX NO : 456-2846 7431

FROM:

- MARY M. BOURDETTE
- BARBARA P. CLARK
- GREG JONES
- PATRICIA SAVAGE
- JOSEPH WARDEN
- LAUREN GRIFFIN
- LULA BARNES

TOTAL PAGES INCLUDING COVER): 3

REMARKS:

per message I left on your voice mail.



THE SECRETARY OF HEALTH AND HUMAN SERVICES
WASHINGTON, D.C. 20201

AUG 28 1997

MEMORANDUM FOR THE FIRST LADY

Following up on our earlier conversation about child care, I want to relay the enthusiasm with which all of us at HHS are preparing for the upcoming White House Child Care Conference and the President's Child Care Initiative. We have made child care a centerpiece of the Department's FY 1999 budget proposal and I want to provide you with a brief overview of our September submission to OMB.

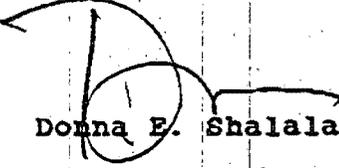
Our FY 1999 budget request includes a comprehensive strategy to help working families secure quality, affordable child care. Consistent with what I understand have been most productive White House staff discussions, our proposal will address both the concerns of working parents and the developmental needs of children. In order to accomplish this, we will propose that the HHS budget be increased by \$2 billion in FY 1999 to produce the following objectives:

- ▶ Double the number of children receiving direct child care assistance by the year 2002 (reaching nearly 2 million low-income children).
- ▶ Improve the quality and accessibility of care in more than 500 communities across the country, with a particular focus on assuring the health, safety, and school readiness of the youngest children in care.
- ▶ Double the number of programs serving school age children in after school and summer programs, including youth sport programs.
- ▶ Improve the training and compensation of the child care workforce, through a variety of approaches.
- ▶ Increase consumer education, innovation, and data collection to develop a more effective child care system for the 21st Century.
- ▶ Explore, with the Treasury Department and other interested agencies, ways of revising the Dependent Care Tax Credit to make it more responsive to the needs of working families without substantial tax liability.

Senior HHS staff will brief your team on the details of the HHS proposal in early September. We are delighted to be part of the

team ensuring that the October Conference and the President's Child Care Initiative are successful.

Once again your leadership for all our children and their families will result in a giant, progressive improvement in the quality of life in our country.



Donna E. Shalala

July 24, 1997

MEMORANDUM FOR DISTRIBUTION

FROM: Jennifer Klein, DPC/OFL
Nicole Rabner, DPC/OFL

RE: Background for Working Group Meeting on Child Care

Attached please find a draft working paper of policy options relating to child care for your review in advance of the working group meeting at the White House, which will take place on Tuesday, July 28 at 5:15pm, in room 180 OEOB. The paper is meant for discussion purposes only and does not represent an exhaustive list of ideas for consideration and discussion. Please bring reactions, as well as other suggestions, to the meeting, and feel free to call either of us at 202/456-6266. Thank you.

DISTRIBUTION:

Elena Kagan, DPC
Jennifer Klein, DPC/OFL
Nicole Rabner, DPC/OFL
✓ Cynthia Rice, DPC 212 OEOB
Olivia Golden, HHS
Cherrie Carter, OPL
Faith Wohl, NPR
Ann Rosewater, HHS
Joan Lombardi, HHS
Mary Bourdette, HHS
Keith Fontenot, OMB
Jeff Farkas, OMB
Jennifer Friedman, OMB
Mark Mazur, DPC/NEC/CEA
Anne Lewis, NEC
Kris Balderston, WH Cabinet Affairs
Emily Bromberg, WH IGA
Lynn Cutler, WH IGA
Janet Murguia, WH Legislative Affairs
Carolyn Beecraft, DOD
Linda Smith, DOD
Carrie Wofford, Labor
Martha Johnson, GSA
Pauline Abernathy, DOE
Michael Barr, Treasury
TBD, Labor
TBD, SBA
TBD, Commerce

FOR INTERNAL DISCUSSION PURPOSES ONLY

Child Care Policy Options Draft Working Paper

1. Make the Dependent Care Tax Credit Refundable for Child Care Expenses and/or Increase the Amount of Credit Available on a Sliding Scale to Reach Low and Moderate Income Working Families

The Dependent Care Tax Credit (DCTC) is an income tax credit for taxpayers who incur employment related expenses for child care or elder care. The credit is now available to single parents who work and to two-parent families in which both parents work. The maximum allowable credit, available on a sliding scale depending on income, ranges from \$480 to \$720 for families with one child and from \$960 to \$1440 for families with two or more children. Since the credit is not refundable, it cannot be used by most low income working families with incomes below the federal income tax threshold (approximately \$24,000 for a family of four).

2. Double the Number of Children from Working Families Receiving Child Care Assistance through the Child Care Development Fund (CCDF) By Increasing CCDF Funds Over Five Years To Reach 2 Million Children by 2002

Low-income families face major obstacles in finding or affording child care services. While the average family spends about 7 percent of their income on child care, low-income families spend approximately a quarter of their income for child care services. An estimated 10 million children from working families will be eligible for federal child care assistance, yet only 1-1.4 million children currently receive assistance. Among working families earning 150% of poverty, 4 out of 5 do not receive federal child care assistance. Among working families earning at or below the poverty line, 2 out of 3 do not receive assistance.

3. Establish a Quality Incentive Grant Fund to Provide Grants to States (With Match from the Private Sector) to Improve Child Care for Young Children Based on the Military Child Care Model, Including Support for Achieving Accreditation

Research confirms that the quality of child care can impact children's language and cognitive development and can affect school-readiness. Yet study after study reveals a crisis in the quality of child care across the country. At the White House Conference on Early Childhood Development and Learning, the President pointed to the military child care program as a model for the rest of the country. Of particular note is the military's focus on establishing family child care networks, achieving outside accreditation of its facilities, and tying professional training to compensation.

4. Launch an Infant/Toddler Family Child Care Initiative by Providing Additional Funds through CCDF or Another Funding Mechanism to Encourage Communities to Establish and Support Family Child Care Networks

As the number of infants and toddlers in care increase, many families are turning to small family child care homes to provide a more home-like setting for their children. One of the most effective strategies for improving the quality of these settings is the establishment of networks of support and training specifically designed for family child care providers.

5. Establish a Scholarship Program for Child Care Professionals By Exploring Loan Forgiveness and Scholarship Funds

Research confirms the importance of early childhood staff to the quality of child care services. Yet child care providers receive inadequate wages and there are limited resources to recruit and retain staff. When scholarships are provided, the quality of care improves (as seen in the TEACH scholarship program in NC).

6. Double the Number of School Age Children Who Have Access to Quality Child Care By Providing Incentive Funding to Stimulate Community-Wide School-Age Child Care Efforts. With Involvement of Schools and Community-Based Organizations

The need for after-school care has grown dramatically in recent years. With the vast majority of parents with school-age children in the workforce, millions of school-age children go home to an empty house after school. Yet most schools close at 3:00 pm and remain closed in the summer months. While the number of school-age programs has grown over the last decade, there are still dramatically few school-age programs for low-income working families, particularly for children aged 10-13. Despite poor access to quality programs, recent research documents the positive effects that school-age programs can have on academic achievement of low-income children. FBI studies report that crime rates increase between 3-6pm.

DCTC

- Spend \$2 - \$3 bi on DCTC

- 20-30% up to \$400

~~100%~~

CCDBG

- ~ \$3 bi

Other issues

- Broaden FMLA

- Subsidizing parental leave

- Set broad goals re universality

- protections within

-

FACSIMILE TRANSMISSION
Assistant Secretary
The Administration for Children and Families

DATE:

6-30-97

TO:

Telephone:

Fax:

Number of Pages (excluding cover): *4*

FROM:

Olivia A. Golden
Assistant Secretary for Children and Families

Telephone: (202)401-2337

Fax: (202)401-4678

MESSAGE:

Elena Kazan 456-2878
Cynthia Rice 456-7431
Nicole Palmer 456-6244
Jennifer Klein 456-2878

Child care options as requested



Department of Health and Human Services
Administration for Children and Families
370 L'Enfant Promenade, S.W., Washington, D.C. 20447
Phone: (202) 401-9200

DRAFT

The Working Family
Child Care Initiative 2002

At the turn of the century, more American families than ever include two working parents or are headed by a single working parent. Yet the child care available for their children is far from adequate. Meeting this critical need calls for major new public and private investment and a bold comprehensive approach based on the following principles:

- o Child care is critical to workforce development and child development
- o The quality of care affects school readiness and academic achievement
- o A broad range of working parents need some assistance in accessing quality affordable care
- o The quality of care is directly related to the investments made in programs and providers

To address these principles, any new initiative must balance the need to address affordability as well as to improve quality. What follows are six sample strategies that could be included in any new investment package. Some of the initiatives address the affordability issue directly: expanding the Dependent Care Tax Credit or increasing funds for subsidy. Others address the quality issue: special incentive grant programs or support for family child care. Some strategies provide funds to programs while others fund parents more directly. Some approaches rely totally on federal dollars, while others combine federal and state resources and still others call for partnerships with the private sector.

1. Expand the Dependent Care Tax Credit

The Dependent Care Tax Credit is an income tax credit for taxpayers who incur employment related expenses for child care. The credit is available to single parents who work and to two-parent families in which both parents work. The maximum allowable credit, available on a sliding scale depending on income, ranges from \$480 to \$720 for families with one child and from \$960 to \$1440 for families with two or more children.

Since the credit is not refundable, it cannot be used by most low income working families with incomes below the federal income tax threshold (approximately \$24,000 for a family of four). Less than one percent of tax filers earning at or below poverty now claim the credit and about 13 percent of filers earning 100-200 percent of poverty claim the credit. In addition, the amount that families can claim and the range of families that can claim the

DRAFT

maximum amount needs to be readjusted to reflect the increasing costs of care and to provide additional assistance to middle class working families.

Option: Make the Dependent Care Tax Credit refundable for child care expenses so that it can be used by the lowest income working families. Increase the amount of credit available on a sliding scale to low and moderate income working families.

2. Double the number of children from working families receiving child care assistance through CCDF

Low-income families face major obstacles in finding or affording child care services. While the average family spends about 7 percent of their income on child care, low-income families spend approximately a quarter of their income for child care services. It is estimated that more than 10 million children from working families will be eligible for federal child care assistance, yet we currently provide such assistance to only 1-1.4 million children. Among working families earning 150 percent of poverty, 4 out of 5 are not receiving federal assistance. Among working families earning at or below the poverty line, 2 out of 3 are not being provided with assistance.

Option: Increase CCDF funds over the next five years to double the number of children served, reaching 2 million children by 2002.

3. Establish A Quality Incentive Grant Fund

The year 1999 will mark the tenth anniversary of the education goals established by the President and the Nation's Governors. The first goal was that all children start school ready to learn. Recent research on brain development reaffirms the importance of the early years. Similarly, the NICHD study on Infant Care underscores the importance of quality care to language and cognitive development. Despite these facts, study after study reveals a serious crisis in the quality of care across the country.

At the Early Childhood Development Conference held at the White House last month, President Clinton pointed to the military child care program as a model for the rest of the country. Of particular note was the focus on establishing family child care networks, accreditation, and training tied to compensation.

Option: Provide grants to states (with match from the private sector) to improve child care for young children based on the military model, including support for accreditation.

DRAFT

4. Launch an Infant Toddler Family Child Care Initiative

As the number of infants and toddlers in care increases, many families are turning to small family child care homes to provide a more home-like setting for their children. One of the most effective strategies to improve the quality of these settings is the establishment of networks of support and training specifically designed for family child care providers. Examples of such networks have been developed through the Child Care and Adult Food program or through the Child Care and Development Fund in the states.

Option: Provide additional funds through CCDF or other funding mechanisms to encourage communities to establish and support family child care networks.

5. Establish a Scholarship Program for Child Care Staff

Over the past two decades research has documented the importance of early childhood staff to the quality of child care services. Yet child care providers receive inadequate wages and there are limited training resources to recruit and retain staff. When scholarships are provided, with linkages to better compensation, the quality of care improves (the TEACH scholarship program in North Carolina).

Option: Explore ways to provide both loan forgiveness and scholarship funds for child care staff, perhaps as part of the Higher Education Act or through a special Child Care Corp.

6. Double the number of school age children who have access to quality child care

Each day, millions of school age children across the country go home to an empty house after school. The vast majority of mothers with school age children are now in the labor market. Despite this fact, most schools still close at 3:00 PM and remain closed for the summer months. While the number of school age programs has grown over the last decade, there are still dramatically few school age programs for low-income working families, particularly for children 10-13. Despite the poor access to quality programs, recent research has documented the positive effects that school age programs can have on academic achievement of low-income children.

Option: Develop an initiative jointly across the Departments of HHS and Education, to provide incentive funding to stimulate community-wide school-age child care initiatives, including involvement of both schools and community based organizations.

DRAFT

There are several models that could be included in a menu of approaches communities could use to address school age issues including: keeping schools open through Title I school-wide projects, establishing 21st Century Schools with extended day components, or more comprehensive strategies such as the MOST model. The MOST initiative (Making the Most out of School Time) is an effort funded by DeWitt Wallace-Readers Digest Fund to improve and expand the supply of child care in three cities.

ENTERPRISE

At Your Service



KIDDIE CARE DOESN'T HAVE TO BREAK THE BANK

In fact, helping workers with family commitments can pay big dividends

For Paula J. Todd, the president and founder of a busy employment agency in San Francisco, a key to smooth office operations is making sure that employees can work when their child-care arrangements don't.

Over the past four years, Todd has seen a blossoming of new parents at Innovations Personnel Services Inc. Today, about half the company's 20 workers have young children—including the boss. And while Todd delights in these kids, she concedes that they've created a little problem: sudden employee absences when the nanny is sick or other unexpected events wreak havoc on child-care plans.

About a year ago, Todd hit upon a solution. She joined a "backup" child-care center located about three blocks from her office that provides care for

children of area employers when their regular arrangements fall through. Todd pays \$2,500 a year to reserve 20 uses of the center, set up by ChildrenFirst Inc., a Boston-based company that is increasingly trying to interest small businesses in its services. "I weighed the cost and thought: 'What a wonderful opportunity to give my staff, so that if something happens they don't have to stay home,'" says Todd.

EMPLOYEE BENEFITS

Many small employers reject out of hand the idea of helping with child care, envisioning huge expenses, such as the often hefty startup and operating costs of an on-site center. But there are a number of relatively out-of-pocket options that can be offered, from backup care to child-care information services to greater scheduling flexibility.

At the Maine Antique Digest Inc. in Waldoboro, Me., for example, employ-

ees with children in full-time or after-school child care can receive subsidies of up to \$50 a week to help defray costs. The program costs the company, which employs 20 people, between \$6,000 and \$7,000 a year and has worked as a great morale booster. "This symbolizes the managers of the company putting their money where their mouth is," says Business Manager Sarah E. McClain, who is reimbursed about \$160 monthly for the sitter who watches her daughters before and after school one day a week. "They say families are important and they back it up."

Sallie C. Creel, who owns four Thrifty Rent-a-CarSystem Inc. outlets in the Birmingham (Ala.) area, with 44 employees, strives whenever possible to offer flexible scheduling to employees with pressing family needs. Over the years, she has done everything from allowing

employees to take off a few hours for parent-teacher meetings to permitting them to cut back to part-time hours. The option is cost-free, says Creel, although it can lead to scheduling heartburn at times. But the advantage is huge: an ability to recruit and retain a band of talented and hardworking employees in a labor market so tight that the latest local unemployment figure was just 2.6%. A case in point is public relations director Lisa O. Christopher, a mother of two. Having started as a full-time worker nine years ago, Christopher now puts in about 20 hours a week, some of it at home. "I feel that I am more dedicated, more passionate than someone who just shows up for the job," she says, adding that if not for the company's flexibility, she would choose to be a stay-at-home mom.

Sometimes all employees need is help locating the right child-care program. wfo, formerly Work/Family Directions Inc., a Boston-based company that helps mostly larger businesses with work and personal-life issues, has in the past 18 months made a resource and referral service available to employees of smaller companies. A call to a toll-free number can provide the employee with everything from referrals to local child-care programs with vacancies to counseling on parenting issues and advice on eldercare matters (table). The fee to the employer varies, depending on how often employees tap the service, but typically costs \$25 to \$30 per employee annually.

CARE-SHARE. One kind of family-friendly policy can even result in savings for a company. At the Bigelow Laboratory for Ocean Sciences, a small not-for-profit research organization in West Boothbay Harbor, Me., employees can set aside up to \$5,000 of their wages yearly in an employer-sponsored account to pay for eligible child- or other family-care expenses. Under these IRS-authorized "dependent care assistance plans," employees are not taxed on the income designated for family care. One

thing to remember: Reimbursements can be made only for licensed, on-the-books child-care providers. The employer, meanwhile, is able to waive the 7.65% Social Security and Medicare tax on the employee set aside. With about seven employees using the program for an average of \$2,000 each annually, Bigelow saves about \$1,070 a year in taxes while spending almost nothing on the program, says Victoria W. Reincke, a financial assistant at Bigelow.

Some employers have hit upon solu-

tions by sharing child-care costs with others. In Louisville, Colo., The Work Options Group Inc. sets up consortiums of employers that wish to pool resources to pay for or subsidize child-care services ranging from resource and referral programs to emergency child care. One of its clients, law firm Chrisman, Bynum & Johnson, belongs to the Boulder Dependent Care Assn., one of seven consortiums Work Options has established in four states. Chrisman paid a \$350 initial fee to join the group and is charged an additional yearly fee of \$21.25 per employee—or \$1,700—to continue its membership.

In return, the consortium gives the firm's employees low-cost use of backup-care agencies that send CRR-trained and background-checked professionals to homes where children are sick or child care has broken down for other reasons. Gregory A. Foraker, human resources director at the 80-person firm, says the service was initially something of a hard sell to employees nervous about letting a stranger care for their kids at home. But the child-care workers have proved excellent, says Foraker, and the service invaluable to Chrisman Bynum's employees.

Jamie R. Nash, an accounts-receivable manager, has used the service several times—most memorably on the weekday last December when her husband was traveling and both her three-year-old twins came down with the flu. "This program makes it possible for me to have a career and at the same time to be a mother," says Nash.

Small businesses may assume that helping employees with child care is out of reach. But between the push of competition for employees and the pull of newly available options, it may be time to think big.

By Pamela Mendels
in New York



WHERE TO GO FOR CHILD CARE

To find a nonprofit child-care information service in your community:

CHILD CARE AWARE

2116 Campus Drive S.E., Rochester, Minn. 55904
800 424-2246, E-mail: hn6125@handsnet.org

To learn what other companies are doing:

FAMILIES & WORK INSTITUTE

330 Seventh Ave., 14th Floor, New York, N.Y. 10001
212 465-2044, www.familiesandwork.org

For information on specific options and ways business can help programs in their communities:

CHILD CARE ACTION CAMPAIGN

Dept. B, 330 Seventh Ave., New York, N.Y. 10001
E-mail: hn5746@handsnet.org

To get details on using workplace flexibility as a solution:

NEW WAYS TO WORK

785 Market St., Suite 950, San Francisco, Calif. 94103
415 995-9860, E-mail: info@nww.org, www.nww.org

For information on what companies do to assist employees who work unconventional hours:

"CARE AROUND THE CLOCK"

U. S. Labor Dept.'s Women's Bureau, 200 Constitution Ave., Room S3005, Washington, D.C. 20210
800 827-5335, www.dol.gov/dol/wb (Click on "Publications available from the Women's Bureau")

More information on this story can be found in BW Plus! at www.businessweek.com or on America Online at keyword: BW Enterprise.

Copyright 1997 Chicago Tribune Company.
Chicago Tribune - August 26, 1997 Tuesday

BUSINESS CARING MORE ABOUT CHILD CARE

BYLINE: Carol Kleiman.

Even before Jasmine Virginia Kerber was born last December, Karen Springen, her mother, began looking for child care in anticipation of her return to work.

Springen, 36, is a reporter for Newsweek magazine. Her husband, Mark Kerber, is an attorney.

"I asked my friends early on if they knew of quality care," said Springen, based in Chicago. "I always knew I could find it—that I had lots of options."

She compiled a list of day-care centers, ruled out group home care and decided to find a baby-sitter to come to her home.

"I interviewed three excellent candidates and finally hired a wonderful woman who lives one block from our home," said Springen. "We pay taxes and Social Security for her—and she pays taxes, too."

Springen returned to her job in June. "I feel so lucky," she said. "I can't imagine what it must be like not to have dependable day care. It's anxiety-producing enough just to leave Jasmine in the mornings."

Springen is lucky that she found and can afford the quality child care she desires. Just a decade ago, employed women with children didn't have the choices she has, regardless of ability to pay.

At that time, quality child care, an endless worry for working women, wasn't of much concern to anyone else.

But it was top priority for Barbara Reisman, who was named executive director of the Child Care Action Campaign in 1986.

The advocacy group, based in New York, is a non-profit organization devoted to expanding the quality of affordable child care.

Reisman, highly respected for putting child care on the national agenda and making it a bottom-line business issue, recently resigned from her post.

She now is executive director of the Schumann Fund for New Jersey, a private foundation in Montclair that focuses on the environment, school reform and early childhood education, including child care.

One of the reasons Reisman took her new job is because it's within walking distance of her home and gives her more time with her two teenagers, instead of spending two hours a day commuting.

It's the old story of working women wanting more time with their kids. That hasn't changed.

But a lot of other things have, particularly in the area of child care, and especially on Reisman's watch. I asked her to describe some of the changes from 1986 to 1997.

While in-home child care used to be a favorite choice, it's declining, she says.

"Karen Springen's decision to have a baby-sitter come to her home represents only 3 percent of child-care arrangements today," said Reisman. "Instead, there's been a shift toward greater use of child-care centers."

Reisman says 40 percent of all children are taken care of by relatives, still first choice in child-care arrangements. But use of child-care centers now is up to 30 percent. That the latter has grown in 10 years is "anecdotal," she says, because no one kept figures on child-care choices a decade ago. But Reisman has watched non-profit and for-profit centers increase.

Please contact Dana Colarulli if you would like to receive the WR Daily Report by e-mail or if you have questions about articles found in this publication. (dcolarulli@acf.dhhs.gov (e-mail) or 202-401-6951 (voice)).

Also, 17 percent of children are in group home care; 8 percent are cared for by their mothers (who work part-time or at home); and 2 percent are in kindergarten and nursery school programs.

"In the last 10 years, there's been a dramatic increase in the number of mothers of young children entering the labor force," said Reisman. "At the same time, I think the Child Care Campaign has been successful in getting the public and business to understand that child care is both a work force development issue and a child-care development issue."

The scope of the change is dramatic: In 1986, 54.4 percent of women with children under the age of 6 were in the work force, according to the U.S. Bureau of Labor Statistics. Today the figure is 62.3 percent.

A decade ago, 8.1 million children under 5 needed child care; today the figure is 9.9 million.

A new area of concern, Reisman points out, is that 56.9 percent of women with children under 1 year old—like Springen—are in the paid labor force.

"Today, there is more focus on the quality of care given, because it is understood it is critical to the child's ability to enter school ready to learn and to the parents' ability to concentrate on the job," said Reisman.

Lawmakers' heightened recognition of the need for child care is a fallout of recent welfare reform. "They understand women can't get and keep jobs without subsidized child care. And there's a fairness issue involved here: The working poor also need financial aid for child care."

Reisman is pleased about the increase in accredited child-care workers, "but they still aren't paid well." But child-care options overall have improved in the last decade, Reisman says.

"Child care now is on people's radar screen," she said.

And that's brand new.

Send e-mail to ckleiman@tribune.com

MORE ON THE INTERNET: Read "Jobs," "Women at Work" and "Your Job" from Carol Kleiman at chicago.tribune.com/career

CQ Hill News — August 26, 1997

SOCIAL POLICY: GINGRICH WILL SEEK TO OVERTURN RULING ON WORK LAWS FOR WELFARE

By Bob Gravely, *CQ* Staff Writer

House Speaker Newt Gingrich, Ga., last week said he will push for legislation this fall to overturn a Clinton administration directive applying a wide variety of federal labor laws to welfare recipients who are required to work.

The issue arose in negotiations over the budget package, with President Clinton eventually prevailing in his insistence that "workfare" recipients get paid the minimum wage and be protected by most federal labor laws.

But in a speech in San Diego last week, Gingrich vowed to take up the cause after Congress reconvenes next week. "The unions and the liberals are trying to destroy welfare reform," Gingrich said. "When we go back in September, we are going to work with the governors, and we're going to pass a welfare reform implementation bill that insists on continuing to make welfare reform work."

Among the House GOP welfare proposals that were dropped in the face of strong White House and Democratic opposition were provisions to allow states to consider food stamps as compensation when determining whether welfare recipients were being paid the minimum wage.

AIDS death rate continues to decline

By Anita Manning
USA TODAY

WASHINGTON — The number of people who died of AIDS declined 19% in the first nine months of 1996 compared with the same period in 1995, continuing a trend that began early last year, federal health officials said Monday.

"We are entering a new era in this epidemic," says Helene D. Gayle of the Centers for Disease Control and Prevention, Atlanta. At a forum sponsored by AIDS Action, an advocacy group, Gayle said the number of AIDS deaths between January and September 1996 was 30,700, vs. 37,900 in the same period of 1995.

Yet, Gayle says, "these trends are not equal across demographic categories."

Among racial groups, blacks now account for the largest proportion of AIDS cases, 41%, she says, and AIDS is "increasing most rapidly among women, particularly minorities."

Heterosexual AIDS cases are increasing at 15% to 20% a year, compared with increases of 5% or less among gay men and injecting drug users.

Gayle attributes the decline in deaths to a drop in the increase of new cases along with powerful new treatments that are helping people live longer. Protease inhibitors, which reduce HIV levels drastically in many patients, were not widely available in early 1996, she notes, so it's likely even a greater reduction in the death rate will become apparent later.

But the high cost of these drugs, estimated at \$10,000 to \$15,000 a year, keeps them out of the hands of many who need them, cautions Christine Lubinski of the AIDS Action Council. She notes that Congress will discuss this week whether to increase funding to provide drugs for indigent AIDS patients.

Such funding, she says, "could well contribute to reducing the disparity in death rates between men and women, white and black."

Child-care programs show improvement

By Karen S. Peterson
USA TODAY

Although many states lag behind in encouraging high-quality child care, the latest annual study by *Working Mother* magazine finds some improvements in day-care programs in almost every state, editor Judsen Culbreth says.

"We have seen a lot of new initiatives, a lot of imagination, a lot of states trying really hard," Culbreth says. Part of the reason, she says: additional federal funds for child care set aside for states as a result of legislation intended to move women from welfare to work.

The magazine names 10 winners, based on child-care quality, safety and availability, plus commitment by state leaders.

► **California.** Continues to support a large pre-kindergarten child-care program and to provide care to tens of thousands of children.

► **Colorado.** Created new funding source by allowing taxpayers to check a box and designate some of

their tax dollars for child care.

► **Connecticut.** Remains a leader, with governor and state lawmakers pledged to more child-care programs statewide by the year 2000.

► **Hawaii.** Remains a model for other states, with its plan for a universal system of child care.

► **Maryland.** Will expand its already impressive resource and referral service this year.

► **Massachusetts.** Allocated an additional \$10 million for pre-kindergarten and other early education programs; allocated \$25 million to improve salaries for caregivers.

► **Minnesota.** Enacted new laws to grant \$200 million to child care; 13,000 more families will get help.

► **Vermont.** Offers two hours of training and guidance to new caregivers and makes sure caregivers' homes are safe.

► **Washington.** Allocated \$100 million in new funds.

► **Wisconsin.** Boosted child-care funds to serve 17,000 more children.

The full survey appears in the July/August issue on newsstands today.

Texaco lawyer: No slurs on tapes

Outside investigator releases full report

By Ellen Neuborne
USA TODAY

The racial epithet which vaulted a Texaco discrimination lawsuit into the national spotlight, was never uttered on tape, an independent investigator says.

"Those words were not spoken," says Michael Armstrong, a lawyer hired by Texaco to investigate whether executives used racial slurs and plotted to destroy evidence in the case. A poor copy of the original tape

made by former Texaco executive Richard Lundwall was to blame for perception the racial slur was made, he says.

Last winter, plaintiffs in the case released tapes of what they said were executives using racial slurs and plotting to withhold evidence. Soon after, Texaco settled for \$176 million.

Armstrong released the report, finished in January, in full Monday. Portions of the report had been previously released. Among new details:

► Armstrong found no evidence documents were shredded, or even very well hidden. "The documents (personnel executives) did withhold they put in a file with a little sticky

on it labeled 'Documents withheld from legal,'" he says.

► A tape expert found deliberate erasures on recordings made by Lundwall. (Lundwall's lawyers say no erasures were made to hide evidence.)

Texaco fired executive David Keough and suspended the benefits of Lundwall and retired treasurer Robert Ulrich. Lundwall and Ulrich pleaded innocent to federal charges of obstruction of justice.

Says plaintiffs' lawyer Daniel Berger: "There was evidence of a much more widespread problem at Texaco. If saying that word was the only thing that happened, they would not have paid us \$176 million."

USA TODAY

TUESDAY, JULY 15, 1997

CLINTON LIBRARY PHOTOCOPY

Secondhand smoke rears its head in court

By Deborah Sharp
USA TODAY

MIAMI — Tobacco companies should pay for a 40-year web of lies and deceit that sickened 60,000 flight attendants from secondhand smoke, an attorney in a landmark lawsuit argued here on Monday.

The \$5 billion case is the USA's first class-action lawsuit

against the tobacco industry to go to trial and the first focusing on the effects of secondhand smoke.

Miami lawyer Stanley Rosenblatt began opening statements Monday. He represents nonsmoking flight attendants who claim secondhand smoke on airliners gave them cancer and other illnesses. The trial is expected to last two months.

"Secondhand smoke causes diseases. Lying, deceit and fraud justifies punitive damages," Rosenblatt told jurors. "The game is over."

But R.J. Reynolds senior vice president Dan Donahue says Rosenblatt's opening statement failed to establish that flight attendants get sick "at any greater rate than anyone else." Donahue is an observer

at the trial.

The tobacco companies will address the jury when opening statements continue today.

The case has taken on new importance not only because it is the first trial over secondhand smoke but because similar cases in the future would be barred under the proposed national tobacco settlement.

"The waitresses and all the

other groups sickened by environmental tobacco smoke are all shut out of court" if the settlement goes through, says Richard Daynard of the Tobacco Products Liability Project in Boston.

However, the tobacco deal would ban smoking in most workplaces.

Contributing: Doug Levy

USA TODAY

TUESDAY, JULY 15, 1997

8/18

Child Care
Legislators

Morning

What is quality child care

Afternoon

How do we get it
- subsidies

Luncheon

Working lunch

→ Members speak?
Open press?

Question: Do we want an amendment or an issue

New Dem's

Blue Dogs

Congr Black Caucus

Women's Caucus

Hispanic Caucus

Approps

W/M

Ed & Welfare

Labo

Finance

CHILD CARE HOW DOES YOU STATE RATE

by Betty Holcomb
with Catherine Cartwright, Shaun Dreisbach
and Anne L. Fritz

File - Child Care
Confere

Child care became a new priority for nearly every state this year, with more initiatives than ever before.

Some were bold and breathtakingly innovative. Rhode Island, for example, began to offer health benefits to many family child care providers, in a creative effort to attract more caregivers to the field. One of the key requirements is that caregivers meet licensing standards. This approach is a practical way to meet the needs of both children and child care workers.

In Colorado, child care advocates invented a new source of money for child care—a checkoff on state income-tax forms. When state residents check this box on their income-tax form, part of their tax money is automatically routed to the new Quality Child Care Improvement Fund.

Georgia continues to enhance its impressive prekindergarten program, which is funded through the state's lottery. Last year, Georgia offered care to 62,000 preschoolers—a remarkable achievement. This year, state officials set up an Office of School Readiness, an indication of Georgia's continuing commitment to early education.

Other states made large investments in child care, allocating millions of dollars to help families who had been on waiting lists for subsidized care. Most notably, Washington's Governor Gary Locke proposed a \$100 million increase for child care, and Florida's Governor Lawton Chiles lobbied for \$49 million in new funds and transferred \$89 million in existing budgets to create more child care. This means that tens of thousands of children will now have access to care that their parents could not otherwise afford.

Caregiver training and pay also got attention this year in the majority of the states. From Maine to Oregon, state officials launched new initiatives to see that caregivers receive more training on child development and safety. North Carolina continues to be a leader on this front, with its Teacher Education and Compensation Helps (T.E.A.C.H.) program. Caregivers who complete this training are rewarded with higher pay from the state—which helps keep better-trained caregivers in the field. Happily, the T.E.A.C.H. program is now being replicated in five other states (Colorado, Florida, Georgia, Illinois and New York).

Most of this activity was prompted by the welfare reform package that

Congress passed last year and President Clinton signed into law. While the new law is specifically aimed at moving women off welfare to work, it contained broad new provisions for child care. \$4 billion in federal funds and new authority for the states to decide how such funds are spent. For the next two years, that means many states are actually getting more child care money than they used to. Because of this funding boost, many states have become more active—creating new programs and improving old ones, as you'll read in the pages of this report.

Many child care advocates sound a cautionary note, however. The nation's supply of child care is still woefully inadequate and quality is lacking in far too many programs. As many WORKING MOTHER readers know from personal experience, there is not even an organized way to find licensed, high-quality child care in most communities across our nation.

In the coming years, the demand for child care will increase—and there will be growing pressure on the states

to trade off quality to expand the quantity of child care. In plain English, that means some people will be willing to sacrifice children's safety and development in the name of supplying more care. Already, there is evidence of such pressure. Wisconsin, for example, created a new class of "provisional" caregivers who do not have to meet training requirements. These caregivers will be paid half as much as those who do have training. The idea is that the state's money will go twice as far and serve twice as many children. Connecticut has also cut some of its funds for inspections, a move that is an additional cause for concern.

While it is true that such measures may save money, you may find your own child's care compromised. It's possible, for example, that your child's center won't be as safe if it is not regularly inspected. You may see a change in the qualifications of your child's caregivers. Without mandated training, they may not be prepared to create activities that challenge and stimulate your child to encourage emotional and

intellectual development. You might even find college-educated caregivers replaced by girls just out of high school. These young women may have the best of intentions, but may be too immature to tolerate the demands of caring for young kids. To make sure these changes don't happen in your state, contact your governor and state legislators and let them know how important caregiver training and health and safety regulations are to you.

While the future holds some questions, the good news is that for this year, at least, our report reveals improvements in nearly every state. Our panel of experts helped to identify the most important changes across the nation and create an updated picture of child care. This careful and thorough investigation of how each state meets its responsibility in caring for kids is simply not available anywhere else. It is a report that readers, advocates and state officials can use to compare their states with others, and work to further improve programs and services for our nation's children.

KEY TO THE RATINGS

▲ Number of children under 6 reports the total number of children under the age of six in each state. These figures were provided by Columbia University's National Center for Children in Poverty.

⊕ Number of accredited centers indicates how many child care centers in the state are accredited by the National Association for the Education of Young Children (NAEYC), the nation's preeminent organization of early-childhood educators. To gain accreditation, a center must be inspected and meet a wide range of standards, including teacher training, adult supervision and a curriculum that encourages children's development. An accredited program is especially valuable in a state with poor standards for adult supervision and caregiver training—parents can rest easier knowing such a center meets NAEYC standards.

🏠 Number of accredited family child care homes indicates how many family child care providers in the state meet standards set by the National Association for Family Child Care, the leading organization for family child care providers. Many states exempt family child care providers from all licensing requirements, including basic health and safety measures, even when they are caring for four or five children besides their own. Accredited caregivers must pass muster in measures of safety and health, be rated as respectful and responsive to children and offer appropriate activities.

★ QUALITY: To evaluate each state, we looked at three key factors identified by researchers as crucial measures of quality:

- **Number of children one adult can care for:** Kids need plenty of attention and supervision to thrive emotionally and to stay out of danger. We used the standards set by NAEYC for child care centers as our ideal for younger children: 3 to 4 infants • 4 to 6 toddlers • 7 to 10 preschoolers. We used recommendations from the National School-Age Care Alliance (NSACA) for school-agers: 8 to 10 children under 6 • 10 to 15 children 6 and older.

- **Group size:** Studies show that children do best in smaller groups, with less noise and chaos. States that meet the group limits set by NAEYC and NSACA are noted as having "Good standards." Those that set some limits are noted as having "Mediocre" to "Poor" standards. States that set no limit at all have "No standards."

- **Caregiver training** is one of the most important indicators of quality, according to the latest research. Child care workers who are familiar with the

stages of child development prove far more responsive than those who are unaware of such information. Wheelock College, one of the nation's leading institutions of early education, provided us with a state-by-state analysis of how much education caregivers are required to have. We report the training as either "hours" or "college credits." In practical terms, three college credits (the equivalent of one college course) works out to about 45 hours of training. We also note which states require center directors to have some management training; a director with good business and employee-management skills can improve the quality of a child care center by creating a stable, upbeat environment for children, staff and parents. We also recognize the special efforts states make to encourage training, such as scholarships or other funding for training.

No state could receive the highest rating in this category without meeting NAEYC standards for adult-to-child ratios and group size, and requiring at least some workers in child care centers to have some college credits in childhood development.

+ SAFETY: A number of key factors help keep kids safe:

- **Adult supervision:** Limiting the number of children an adult can care for (see "Quality" section) also helps to limit injuries in child care. A "Good" rating means the state licensing standards meet or are very close to NAEYC standards; "Mediocre" means that the state's standards allow for only modest supervision; "Poor" means it would be hard for any caregiver to assure a child's safety if she takes in the maximum number of kids the state allows.

- **Size at which family child care is regulated:** The number here indicates how many children a caregiver may take into a private home before she is required to be registered or licensed and therefore meet basic health and safety rules. A plus sign (+) indicates she may take in additional children, under some circumstances. She may, for

example, not have to count her own children or other children related to her, such as nieces or nephews.

- **Immunizations:** Starting in 1995, both the Centers for Disease Control (CDC) and the American Academy of Pediatrics recommend that all children attending an out-of-home program have a full battery of immunizations, including protection against hepatitis B (HepB) and meningitis (HIB). Still, only about half the states have this requirement. Two plus signs (++) indicate the state requires all recommended shots prior to entry; one plus sign (+) means the state requires all recommended shots within 30 days; a minus sign (-) means not all



HOW DOES YOUR STATE RATE

shots are required. We also report when a state allows more than 30 days for proof of vaccinations.

• **Playground surfaces** are important because falls onto hard surfaces are the leading cause of the most severe injuries in child care. States get a plus (+) when they require a surface on outdoor play areas that helps to prevent injuries. States that don't require such surfaces get a minus (-).

• **Hand-washing:** Studies show that the spread of illnesses in child care can be prevented if caregivers wash their hands before preparing food and after diaper changes, toileting and wiping children's noses. States were rated "Good" if they require hand-washing at all key times; "Fair" if they leave out nose wiping or if they don't specify exact times; and "Poor" if they don't require hand-washing before preparing food or after toileting or diapering.

• **Healthy Child Care America:** A plus (+) indicates that the state runs a program funded by the U.S. Department of Health and Human Services to link child care to local health care professionals. Programs vary from state to state, to meet the needs of both kids and child care providers. In some cases, the program may strive to see that all kids get their shots before enrolling in child care; in others, it may set up a registry of health professionals willing to provide advice to caregivers about kids' health needs.

• **Inspections:** This entry explains how frequently states inspect child care providers and whether caregivers have advance warning of those inspections. The best system is, of course, one in which inspectors arrive unannounced—and see how a caregiver operates when no other adults are around.

To get the highest rating in this category, a state had to have "Good" adult supervision, require that family child care providers meet health and safety standards once they care for three children, have unannounced inspections, and rate highly on standards for immunizations, playground surfaces and hand-washing.

☺ **AVAILABILITY:** In this section we note special efforts states make to create more child care. We focused on the growing number of pre-K and school-age initiatives. We also note the truly ambitious efforts, such as Smart Start in North Carolina, which aims to provide high-quality care to every one of its children.

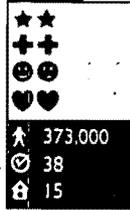
• **State investment:** This figure shows the amount the state spends on child care out of every \$100 collected in state tax revenues. This information was supplied by the Children's Defense Fund.

To get the highest rating in this category, a state had to have a major initiative in place to expand its supply of child care.

• **Resource & Referrals (R&Rs):** Child care resource & referral agencies often play a key role in making child care available to residents. All track the supply of child care in their local communities and refer parents to openings. Some also provide counseling on how to evaluate that care. The National Association of Child Care Resource and Referral Agencies has provided us with information about whether there is a statewide network of R&Rs. A plus (+) indicates the network has funding and staff; a minus (-) indicates the network operates without government funding or a staff.

♥ **COMMITMENT:** Here, we look at whether state officials make child care a high priority. We are especially interested in the actions of the governor and state lawmakers, who have the power to both make policy and set aside money to improve and expand child care.

ALABAMA

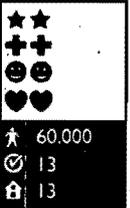


★ **Number of children one adult can care for:** 6 infants • 8 toddlers • 12 preschoolers • 22 (6&7), 25 (8&9) school-agers. **Group size:** Good standards, except for school-age care. **Caregiver training:** Center directors: 20 hours in administration and management of child care centers to start; 8 hours annually. **Center staff:** None to start; 4 hours annually. **Family child care providers:** None to start; 4 hours every 2 years. **Adult supervision:** Poor. **Size at which family child care is regulated:** 1+ children. **Immunizations:** - (no HepB). **Playground surfaces:** -. **Hand-washing:** Poor. **Healthy Child Care America:** +. **Inspections:** All licensed programs have unannounced inspections every 2 years. ☹ This state still has no broad initiatives to increase the supply of child care. **State investment:** 18¢ for every \$100. **R&Rs:** Statewide network (-). ♥ Alabama remains a state with a low commitment to child care.

As we went to press, state lawmakers were considering a proposal to improve the state's very low standards. If it passes, it will improve adult-to-child ratios in child care centers and boost training requirements for family child care providers.

Meanwhile, there was good news in the private sector. Seventeen companies in Lee county banded together to help expand the supply of child care in their community. And the city of Birmingham collaborated with 18 employers there to build and run a new child care center.

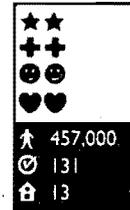
ALASKA



★ **Number of children one adult can care for:** 5 infants • 6 toddlers • 10 preschoolers • 20 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: 12 college credits to start; 15 hours annually. **Center staff:** None to start; 15 hours annually. **Family child care providers:** None to start; 9 hours annually. **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 5+ children. **Immunizations:** - (no HepB). **Playground surfaces:** +. **Hand-washing:** Good. **Healthy Child Care America:** +. **Inspections:** All licensed programs have unannounced inspections every other year. ☹ The Alaska Children's Trust will make modest investments in child care. **State investment:** \$1.70 for every \$100. **R&Rs:** Information on network not available. ♥ A new program to encourage caregiver training is high on the agenda of Governor Tony Knowles.

Alaska is working to create an ambitious statewide education and training program for caregivers. Details aren't final, but the new initiative sounds promising. "This seems particularly noteworthy in a state such as Alaska, where the next town over is often 'an airplane ride away,'" says Claudia Shanley, formerly of the Department of Community and Regional Affairs. "Because of this isolation and lack of access to training, it's much more difficult for caregivers to find the programs they need." Child care will also get a modest boost from the Children's Trust, a fund created by the state which will award \$250,000 in grants to many children's projects.

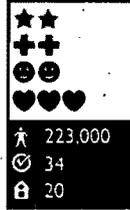
ARIZONA



★ **Number of children one adult can care for:** 5 infants • 8 toddlers • 13 preschoolers • 20 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: 90 hours to start; none annually. **Center staff:** None to start; 12 hours annually. **Family child care providers:** None. **Adult supervision:** Poor. **Size at which family child care is regulated:** 5+ children. **Immunizations:** - (no HepB). **Playground surfaces:** -. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** Centers have unannounced inspections once a year; family child care homes have unannounced inspections twice a year. ☹ The state's pre-K program serves 4,200 children. **State investment:** 32¢ for every \$100. **R&Rs:** No statewide network. ♥ Lawmakers repeatedly fail to fund initiatives that could improve quality and safety.

Arizona has lively advocates who have produced wonderful studies showing how kids benefit from high-quality child care. And these advocates have made some progress. This year, for example, they convinced reluctant lawmakers to pass a bill that requires all school-age programs to be licensed. Yet the legislature still refused to fund additional inspectors to oversee these programs. Without funds for new staff, the average inspector's job caseload jumps by a third—giving them each more than 100 programs to visit.

ARKANSAS



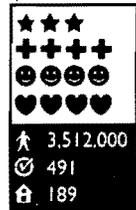
★ **Number of children one adult can care for:** 6 infants • 12 toddlers • 12 preschoolers • 20 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: None to start; 10 hours annually. **Center staff:** None to start; 10 hours annually. **Family child care providers:** None to start; 6 hours annually. **Adult supervision:** Poor. **Size at which family child care is regulated:** 6+ children. **Immunizations:** +. **Playground surfaces:** -. **Hand-washing:** -. **Center staff:** Fair. **Family child care homes:** Poor. **Healthy Child Care America:** +. **Inspections:** All licensed programs have inspections 4 times a year (at least 3 unannounced). ☹ This state continues to fund pre-K for thousands of children, but has no other broad initiatives to expand child care. **State investment:** 35¢ for every \$100. **R&Rs:** No statewide network. ♥ This state still lags behind others on many measures, but state officials have worked hard to improve quality in the past year.

Arkansas made some encouraging progress in helping centers get accredited and getting caregivers to seek more education. With state aid and technical assistance, the number of state-accredited centers grew tenfold in the past year and a half, from 27 to 270. (The state's accreditation standards are not quite as demanding as NAEYC's; but this is still an initiative that boosts quality.) Parents who use accredited centers can double the state tax credit they take for child care. The state also used \$400,000 in federal funds to award scholarships to 300 caregivers who wanted to work toward a Child Development Associate degree.

HOW DOES YOUR STATE RATE

State legislators agreed to upgrade adult-to-child ratios in programs for school-age kids, a positive step. There must now be one adult on hand for every 20 kids, instead of 25. State lawmakers also upheld quality in child care by refusing to pass a bill that would have gutted training requirements for caregivers—a smart move, since so many studies show that caregivers do a better job when they have some training. Finally, a bill that requires babies to have their hepatitis shots before they enter a child care program passed this year.

CALIFORNIA



★ **Number of children one adult can care for:** 4 infants • 12 toddlers • 12 preschoolers • 14 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: 15 college credits to start, including training in management; none annually. **Center staff:** At least: 6

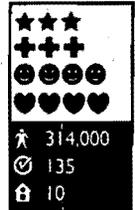
college credits to start; 2 credits each semester or quarter until 12 credits have been completed; after that, none annually. **Family child care providers:** None. **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 2+ children. **Immunizations:** ++. **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** Centers have unannounced inspections once a year; family child care homes have unannounced inspections every 3 years. ☹️ This state continues to support a large pre-K program and to provide care to tens of thousands of children. **State investment:** 95¢ for every \$100. **R&Rs:** Statewide network (+). ❤️ California maintains its place as one of the 10 best states for child care, thanks to the pacesetter programs launched in the past.

Lawmakers here—on both sides of the aisle—have agreed that the state must kick in more money to help working parents find and pay for child care. To that end, Governor Pete Wilson has proposed a significant expansion of the state's child care budget—an additional \$277 million in state and federal funds. The new money would pay for care for about 90,000 more kids a year, and for preschool for another 13,000. In addition, some \$45 million will be spent on recruiting and training caregivers for infants and toddlers.

To help parents become more informed consumers, California passed a law requiring centers and family child care homes to post information about licensing inspections and complaints.

The state also passed a law that many consider a step backward: It allows family child care providers to care for two more kids, without hiring additional help. This means a family child care provider can now care for up to eight kids, instead of six, without additional help. The new rule also worries child care advocates because it may limit infant care in California: When caregivers take in the two extra older children, they must reduce the number of babies in their care.

COLORADO



★ **Number of children one adult can care for:** 5 infants • 7 toddlers • 10 preschoolers • 15 school-agers. **Group size:** Mediocre standards. **Caregiver training:** Center directors: College degree, or 24 semester hours of early education classes to start, plus 2 years experience;

6 hours annually. **Center staff:** None to start; 6 hours annually. **Family child care providers:** None to start; 12 hours within first 3 months, then 6 hours annually. **Adult supervision:** Mediocre. **Size**

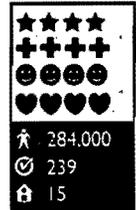
at which family child care is regulated: 2+ children. **Immunizations:** ++. **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Centers: Good. **Family child care homes:** Poor. **Healthy Child Care America:** +. **Inspections:** All licensed programs have unannounced inspections ranging from every month to every 3 years. 🇨🇦 Colorado has launched several new initiatives to expand child care, especially for its rural residents. **State investment:** 48¢ for every \$100. **R&Rs:** Statewide network (+). ❤️ Colorado continues to be an innovator on child care, with a range of new programs that give child care funding and quality initiatives a boost.

State lawmakers developed a new funding source for child care by allowing taxpayers to check off a box on state tax forms, thereby designating part of their tax dollars for child care. The new system routes the money to the Quality Child Care Improvement Fund, which will disburse the funds to centers to buy new equipment, set up training programs for caregivers or take other steps to boost the quality of their programs. Colorado also reinstated a law giving middle-income families a tax break for child care—which could save parents hundreds of dollars a year.

Governor Roy Romer announced a 12-point plan this year to expand and improve child care across the state. Among the more important aspects of the plan: \$2 million is earmarked to help renovate child care facilities in rural areas and to increase money for child care subsidies.

Colorado also overhauled its child care licensing laws to make them more effective. State inspectors will now visit centers that have a history of problems more frequently and inspect those that have achieved accreditation less often. A new law requires all centers to post their latest inspection report so parents can see the results.

CONNECTICUT

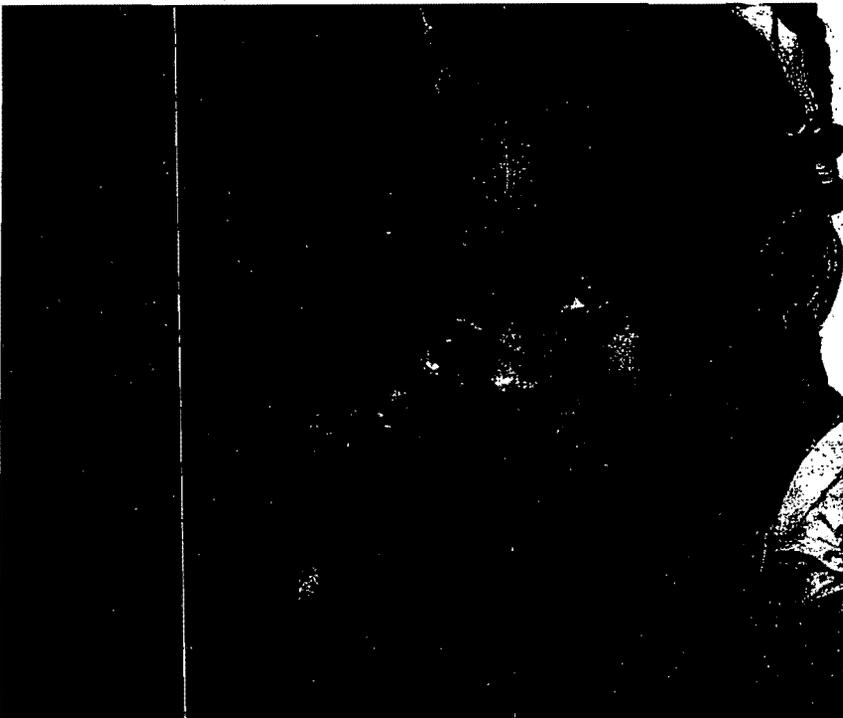


★ **Number of children one adult can care for:** 4 infants • 4 toddlers • 10 preschoolers • 10 school-agers. **Group size:** Good standards. **Caregiver training:** Center directors: 12 college credits to start, plus 1,080 hours of experience; annual hours of training equal

to 1% of hours worked per year. **Master teachers:** 12 college credits to start, plus 1,080 hours of experience; annual hours of training equal to 1% of hours worked per year. **Center staff:** None to start; annual hours of training equal to 1% of hours worked per year. **Family child care providers:** None. **Adult supervision:** Good. **Size at which family child care is regulated:** 1+ children. **Immunizations:** +. **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Poor. **Healthy Child Care America:** +. **Inspections:** Centers have unannounced inspections every 2 years; family child care homes have unannounced inspections at least every 3 years. 🇨🇦 A broad new pre-K initiative will serve thousands of children. The state also increased funding for child care slots—for low-wage working families. **State investment:** 48¢ for every \$100. **R&Rs:** No statewide network. ❤️ Governor John Rowland is taking action to expand and improve child care.

Connecticut remains a leader among the states on the child care front. Even with a tight state bud-

Throughout Georgia, preschoolers like this little girl benefit from a pre-K program. Funded by the state's lottery, the program provides care and education for 62,000 children.



RUTH LEITMAN

HOW DOES YOUR STATE RATE

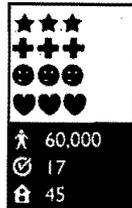
got, the governor and state lawmakers have pledged \$10 million in new funds for early education. This means as many as 2,500 children will now have access to prekindergarten programs in four school districts.

The governor is also committed to establishing many more child care programs across the state by the year 2000. Caregiver training and more pre-K programs are high on the agenda, according to advocate Jude Carroll of the Connecticut Association for Human Services. As we went to press, state lawmakers had just passed a bill to pay a higher rate to caregivers who meet NAEYC training requirements—giving them incentive to meet these higher standards.

In the past year, the state also improved its rules for immunizations—now all kids in child care must have hepatitis shots before they enroll in a program.

Despite these impressive strides, however, the state has taken a step back, drastically cutting funds for inspecting child care facilities. As a result, centers will merely be required to "register" with the state, rather than meet stricter licensing standards and child care facilities will no longer be inspected on a regular basis, unless they receive a complaint.

DELAWARE



★ **Number of children one adult can care for:** 4 infants • 10 toddlers • 12 preschoolers • 25 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: High school vocational program and 9 credit hours to start, plus 3 years experience; 15 hours annually. Center staff: 60 hours to start, plus 1 year of experience; 15 hours annually. **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 1+ children. **Immunizations:** +. **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Good. **Healthy Child Care America:** -. **Inspections:** Centers and 20% of family child care homes have announced inspections at least once a year. **State investment:** 38¢ for every \$100. **R&Rs:** No statewide network. **Delaware** maintains its commitment to both expanding and improving child care.

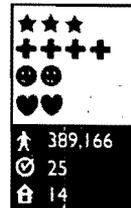
Governor Tom Carper kept his promise to expand child care funding so that all families on the state's waiting list for care would be served. This means that more than 9,000 children now have care.

Delaware's ambitious caregiver training program, called Delaware First, continues to grow. Thousands of caregivers used the program's services last year, taking courses in areas such as early education and child development.

The state has also expanded care for school-age children. Over the past few years, more than 1,000 new slots have opened up across the state. "It's growing slowly, but steadily," says Jan Rheingold of the Family & Workplace Connection, a statewide resource and referral agency. "We realize we still have a long way to go." Child care advocates have been working with the governor to encourage school districts to make their buildings available for more before- and after-school programs—an excellent idea!

Florida stands out among the Southern states for its aggressive action to improve and expand child care. As we went to press, the governor had asked state lawmakers for a significant increase in state funds to create new child care slots. Some \$49 mil-

DISTRICT OF COLUMBIA

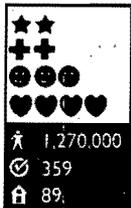


★ **Number of children one adult can care for:** 4 infants • 4 toddlers • 8 preschoolers • 15 school-agers. **Group size:** Mediocre standards. **Caregiver training:** Center directors: At least 2 years college to start; none annually. Center staff: 9 college credits, plus 3 years experience; none annually. **Family child care providers:** None. **Adult supervision:** Good. **Size at which family child care is regulated:** 1+ children. **Immunizations:** ++. **Playground surfaces:** +. **Hand-washing:** Good. **Healthy Child Care America:** +. **Inspections:** All licensed programs have 1 to 3 unannounced inspections a year. **State investment:** NA. **R&Rs:** No district-wide network. **Child care in the nation's capital** is suffering due to the District of Columbia's fiscal woes.

Washington, D.C., has good health, safety and staffing standards in place. But 830 fewer kids under the age of six had access to child care this year because of a \$4 million budget cut over the last two years.

Even with its money problems, Washington, D.C., did manage to give 10 grants last year for school-age care, creating slots for 200 kids in 1996. That, at least, was a help for both working parents and their children. And the District promises that previously cut funding will be restored next year.

FLORIDA



★ **Number of children one adult can care for:** 4 infants • 11 toddlers • 15 preschoolers • 25 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: 30 hours to start; 8 hours annually. Center staff: 30 hours to start; 8 hours annually. The state requires that for every 20 children enrolled, at least one teacher have special training in child development. **Family child care providers:** 3 hours within 60 days of registration or licensing; none annually. **Adult supervision:** Poor. **Size at which family child care is regulated:** 2+ children. **Immunizations:** - (no HepB). **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Centers: Fair. **Family child care homes:** Poor. **Healthy Child Care America:** +. **Inspections:** Centers have inspections at least 3 times a year (2 unannounced); family child care homes are not inspected by the state. **State investment:** 74¢ for every \$100. **R&Rs:** Statewide network (+). **Governor Lawton Chiles** has been an impressive leader in both expanding the supply and boosting the quality of child care in his state.

Florida stands out among the Southern states for its aggressive action to improve and expand child care. As we went to press, the governor had asked state lawmakers for a significant increase in state funds to create new child care slots. Some \$49 mil-

lion would be earmarked for a very important group—16,000 children of low-wage workers.

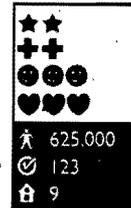
In the past year, the state also boosted funding for its prekindergarten program by \$4 million, bringing its pre-K spending to \$107 million. This translates into free pre-K for 27,000 kids, about 2,000 more than last year. This program is funded with state lottery money and is available in all of Florida's 67 school districts.

The state has also improved its requirements for playground surfaces in child care settings. As of March 1997, all centers were required to have soft surfaces under playground equipment. This is a vital change, given that injuries from falls are the most common in child care.

Finally, lawmakers approved a new program to recognize quality child care programs. Any facility that attains state or NAEYC accreditation can now post a "Gold Seal" certificate and will be listed in a state database as a "Gold Seal" program—to show it meets high standards of care. So far, about 370 centers have received certificates, and about 800 more are in the pipeline.

Georgia

GEORGIA



★ **Number of children one adult can care for:** 6 infants • 10 toddlers • 15 preschoolers • 25 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: None to start; 10 hours annually. Center staff: 10 hours in the first year; 10 hours annually. **Family child care providers:** None to start; 10 hours annually. **Adult supervision:** Poor. **Size at which family child care is regulated:** 3+ children. **Immunizations:** +. **Playground surfaces:** +. **Hand-washing:** Centers: Fair. **Family child care homes:** Poor. **Healthy Child Care America:** +. **Inspections:** Centers and 10% of family child care homes have unannounced inspections once a year. **State investment:** 65¢ for every \$100. **R&Rs:** Statewide network (+). **Georgia** still needs to put more effort into other areas, such as caregiver training.

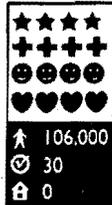
No state does a better job of funding prekindergarten than Georgia, thanks to its lottery, which pays for the program. Last year, the state allocated \$211 million to provide care for about 62,000 children. And now the state has created a formal agency, the Office of School Readiness, to oversee prekindergarten initiatives across the state. Eventually, every four-year-old in Georgia will have free prekindergarten education.

As we went to press, state lawmakers had just begun to consider changes in Georgia's child care licensing laws. Most important, the proposals would impose safety standards on more providers.

The state also decided to use federal funds to pay for a public awareness campaign on the need for quality child care. State officials are asking communities around the state to identify one person—a local elected official, a parent, a caregiver—who can be a champion for child care in that community. Those designated will be given materials and support to advocate for the expansion and improvement of child care. This sounds like a good model to inspire community activism.

HOW DOES YOUR STATE RATE

HAWAII



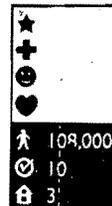
★ **Number of children one adult can care for:** 4 infants • 8 toddlers • 12 preschoolers • 20 school-agers. **Group size:** Good. **Caregiver training:** Center directors: 2 years of college in early-childhood education, plus four years of experience; none annually. Center staff: 2 years of college in early-childhood education, plus experience; none annually. **Family child care providers:** None. **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 3 children. **Immunizations:** - (no HepB). **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Centers: Good. **Family child care homes:** Not regulated. **Healthy Child Care America:** +. **Inspections:** Centers and family child care homes have announced inspections once a year. ☺ The state funds school-age care in every elementary school. Hawaii is also working on a plan to make child care a universal service for all its residents. **State investment:** 75¢ for every \$100. **R&Rs:** Statewide network (+). ♥ Hawaii remains a model for other states, with its plan for a universal system of child care.

Hawaii remains steadfastly committed to improving and expanding child care, despite growing budget pressures. The state already funds after-school care in every elementary school, as well as a variety of other initiatives. It is one of the only states to develop a plan to guarantee care for every child who needs it.

To reach that goal, state lawmakers pressed ahead with the Good Beginnings initiative, a partnership with private businesses to expand child care options for working parents. Under the auspices of this program, every island now has community

councils that are charged with assessing local child care needs and meeting them. The state has directed \$300,000 to these councils.

IDAHO



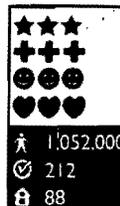
★ **Number of children one adult can care for:** 6 infants • 12 toddlers • 12 preschoolers • 18 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: None to start; 4 hours annually. Center staff: None to start; 4 hours annually. **Family child care providers:** None. **Adult supervision:** Poor. **Size at which family child care is regulated:** 13+ children. **Immunizations:** +. **Playground surfaces:** -. **Hand-washing:** Good. **Healthy Child Care America:** +. **Inspections:** All licensed programs have announced inspections every 2 years. ☹ This state has no broad initiatives to increase the supply of child care. **State investment:** 14¢ for every \$100. **R&Rs:** Statewide network (-). ♥ Idaho deserves recognition for finally passing a law to improve infant care. However, this state still stands out as one of the worst in the nation.

The big news from Idaho is that state lawmakers voted to give infants a little more protection in child care. In the past, it was perfectly legal for one adult in Idaho to care for as many as 12 infants at a time—an impossible task. Last winter, the legislature cut that number in half. That's still too many babies for one adult to handle, as any parent knows! It's also unsafe. Fire-safety experts, for example, recommend a ratio of one adult to three children, because it's hard for any adult to carry more than two or three infants out of a building in an emergency.

Idaho is eligible for \$1 million in federal child care funds—but advocates are concerned the state won't ante up enough of its own money, which it must do in order to get these federal funds.

One bright spot: Employers have contributed \$500,000 to a fund for caregiver training, a program administered by a state advisory group.

ILLINOIS



★ **Number of children one adult can care for:** 4 infants • 8 toddlers • 10 preschoolers • 20 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: 10 to 18 college credits, plus some experience; none annually. Center staff: 6 college credits; 15 hours annually. **Family child care providers:** None. **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 4 children. **Immunizations:** ++. **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Good. **Healthy Child Care America:** +. **Inspections:** All licensed programs have unannounced inspections once a year. ☹ Illinois spends \$112 million on pre-K programs. The state has also created new subsidies for working parents. **State investment:** 97¢ for every \$100. **R&Rs:** Statewide network (-). ♥ Illinois continues to be more dedicated to child care than many of its neighbors.

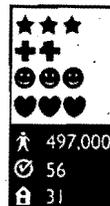
Illinois has made a serious commitment to early

education, funding prekindergarten programs to the tune of \$112 million, almost a 10 percent increase over last year. Some 3,500 more kids now attend pre-K. State officials approved another \$40 million in child care subsidies, which will enable many moms with lower-paying jobs to stay in the work force. As we went to press, the state was also considering a proposal that would make workers earning 40 to 60 percent of the median income in the state eligible for new child care subsidies.

Illinois has also launched a new caregiver training program, modeled after the Teacher Education and Compensation Helps program (TEACH) in North Carolina. Under this initiative, caregivers can apply for scholarships to take courses in early education. Once they have completed the coursework, they are eligible for raises or bonuses.

There's still plenty of room for improvement in the child care picture in Illinois, as in other states, however. An important bill called "Start Early," which would have expanded the funding for prekindergarten programs, only made it as far as the House. This is the third year in a row lawmakers have failed to approve this initiative. This money would have gone toward, among other things, expanding pre-K from a half-day to a full-day program.

INDIANA



★ **Number of children one adult can care for:** 4 infants • 5 toddlers • 10 preschoolers • 20 school-agers. **Group size:** Good standards for infants and toddlers; no standards for preschoolers and school-agers. **Caregiver training:** Center directors: BA with 15 hours in early-childhood or related field; 12 hours annually. Center staff: None to start; 12 hours annually. **Family child care providers:** None. **Adult supervision:** Good. **Size at which family child care is regulated:** 6+ children. **Immunizations:** - (no HepB). **Playground surfaces:** -. **Hand-washing:** Centers: Good. **Family child care homes:** Poor. **Healthy Child Care America:** +. **Inspections:** Centers have inspections 3 times a year (most are unannounced). **Family child care homes** have inspections once a year (most are unannounced). ☹ Indiana law requires every school district to offer school-age care. Former governor Evan Bayh's "Step Ahead" initiative continues to expand the supply of child care. **State investment:** 19¢ for every \$100. **R&Rs:** Statewide network (+). ♥ Indiana continued to break new ground on child care financing. But the state failed to move ahead with several important initiatives that could have improved family child care.

Indiana has come up with some innovative ways to tackle the tough issue of how to pay for child care. About two thirds of the state's 92 counties are now drawing up plans to expand and improve child care with help from private businesses. This new effort grew out of former governor Evan Bayh's Step Ahead initiative, which got all of Indiana's counties to draw up comprehensive plans for child care and other children's services. The program was developed in cooperation with the Child Care Action Campaign, a national advocacy group. Each county is now developing its own approach, with some interesting results. In Howard county, for example, businesses donated toys, supplies and furniture to local child care programs. In Miami county, several employers

Panel of EXPERTS

These nationally recognized experts supplied us with invaluable support, information and advice and helped us choose WORKING MOTHER'S 10 Best States: *Gina Adams and Helen Blank, Children's Defense Fund; Sheri Azer and Gwen Morgan, Wheelock College; Ellen Galinsky, Families and Work Institute; Kay Hollestelle, The Children's Foundation; Evelyn K. Moore, National Black Child Development Institute; Barbara Reisman, Child Care Action Campaign; Michelle Seligson, School-Age Child Care Project at the Center for Research on Women, Wellesley College; Yasmína Vinci, National Association of Child Care Resource and Referral Agencies; Barbara Willer, National Association for the Education of Young Children.*

We would also like to extend special thanks to the following experts for helping us develop a protocol for evaluating state health and safety rules: *Susan Aronson, MD, American Academy of Pediatrics, and Jane Coury, U.S. Public Health Service, Health Resources and Services Administration's Maternal and Child Bureau.*



To bolster its prekindergarten program, Georgia created a formal Office of School Readiness. Shown here: members of the pre-K class at a Sheltering Arms center in Atlanta.

helped pay for a new child care center and are planning to open another in the future.

At the same time, however, Indiana officials weakened rules for family child care, allowing providers to care for larger groups of children than in the past. Some caregivers can now take in as many as 16 kids at a time. State lawmakers also vetoed a proposal to require family child care providers to have six hours of annual training.

IOWA

★★★
 ++
 ☹️☹️
 ♥️♥️
 ↑ 263,000
 ⌚ 124
 🏠 5

★ Number of children one adult can care for: 4 infants • 6 toddlers • 8 preschoolers • 15 school-agers. Group size: No standards. Caregiver training: Center directors: 10 continuing education units, 3 years of experience, and 1 year of experience in administration

to start; 10 hours in the first year, then 6 hours annually. Center staff: None to start; 10 hours in the first year, then 6 hours annually. Family child care providers: None to start; 10 hours annually (2 hours after 3 years). + Adult supervision: Good. Size at which family child care is regulated: 7 children. Immunizations: - (no HepB). Playground surfaces: -. Hand-washing: Centers: Fair. Family child care homes: Poor. Healthy Child Care America: +. Inspections: Centers have inspections at least once a year (some visits are unannounced); 20% of family child care homes have inspections each year (some visits are unannounced). ☹️ State created thousands of new child care slots. State investment: 37¢ for every \$100. R&Rs: Information on network not available. ♥️ Iowa continues to take modest steps to improve both the quality and supply of child care.

State lawmakers approved a \$6 million increase in child care funding this past year, enough to create new slots for several thousand children across the state. A task force made up of state officials and advocates had recommended a \$10 million infusion of state money to expand child care pro-

grams. So while the legislature didn't go the whole way, this is concrete progress.

Iowa also modestly improved training requirements for family child care providers—they must now learn CPR and basic first aid procedures.

Part of the reason Iowa keeps moving ahead in its efforts to improve child care is the number of lively and creative activists. In one recent campaign, for example, the Iowa Child Care Coalition and the state's resource and referral agency produced about 3,000 dolls and displayed them in the rotunda of the state Capitol. Each doll had a note attached that described the needs of a real child in the state.

KANSAS

★★★
 ++
 ☹️☹️
 ♥️♥️
 ↑ 257,000
 ⌚ 46
 🏠 7

★ Number of children one adult can care for: 3 infants • 7 toddlers • 12 preschoolers • 16 school-agers. Group size: Mediocre to poor standards.

Caregiver training: Center directors: 12 college credits to start, plus 6 months experience; 5 hours annually. Center staff: 12 college credits and 6 months experience to start; 10 hours annually. Family child care providers: None. + Adult supervision: Good. Size at which family child care is regulated: 1+ children. Immunizations: - (no Hib or HepB). Playground surfaces: -. Hand-washing: Good. Healthy Child Care America: +. Inspections: All licensed programs have unannounced inspections at least once a year. ☹️ Kansas recently expanded its R&R statewide. State investment: 43¢ for every \$100. R&Rs: Statewide network (+). ♥️ Kansas took some small steps ahead, especially in the area of helping parents find care.

Kansas used federal money to expand its network of resource and referral services, making it easier for parents to learn about child care programs. By December 1997, a statewide R&R network should be in place.

The state is also developing a new career-development program for child care workers. A task

force made up of child care advocates and experts are designing new courses to be used statewide. Kansas already has good standards for training and adult supervision—far better than other Plains states. Its standards on infant care are among the best in the country.

Last spring, the state also set up a system to produce background checks on caregivers and other staff in child care facilities within 48 hours. Under the old system, this process would take weeks or months, during which time the caregivers could already be working.

KENTUCKY

★★
 ++
 ☹️☹️
 ♥️♥️♥️
 ↑ 343,000
 ⌚ 92
 🏠 13

★ Number of children one adult can care for: 5 infants • 10 toddlers • 12 preschoolers • 15 (6 yrs), 20 (7-9 yrs) school-agers. Group size: Mediocre to poor standards. Caregiver training: Center directors: None to start; 12 hours annually. Center staff: None to start; 12

hours annually. Family child care providers: 6 hours of training in first 3 months; 6 hours annually. + Adult supervision: Poor. Size at which family child care is regulated: 4+ children. Immunizations: - (no HepB until August 1998). Playground surfaces: -. Hand-washing: Fair. Healthy Child Care America: +. Inspections: All licensed programs have unannounced inspections once a year. ☹️ The state boosted spending on pre-K programs this year, which are available in every school district. But Kentucky simultaneously reduced funding for other programs and raised fees for some subsidized child care slots. State investment: 86¢ for every \$100. R&Rs: Statewide network (-). ♥️ Kentucky made a bigger commitment to prekindergarten this year, but unfortunately also lowered its total child care spending.

State legislators agreed to spend an additional \$1 million on prekindergarten programs, bringing total funding to more than \$38 million. This boosted the number of children served in pre-K to about 21,000—about 1,000 more than last year. The lawmakers are also earmarking any surplus in the state education budget for pre-K—a wonderful innovation.

At the same time, however, they voted to lower overall child care spending by \$6 million over the next two years and to raise fees for families that use state-sponsored child care. This will impose a hardship on many families who depended on such subsidized child care.

Still, children who do find a space in child care will be safer from disease. Within 30 days of enrolling in a child care program, every child must now have a shot to prevent meningitis. By this time next year children will be required to have a hepatitis shot as well.

LOUISIANA

★
 +
 ☹️
 ♥️
 ↑ 378,000
 ⌚ 43
 🏠 0

★ Number of children one adult can care for: 6 infants • 12 toddlers • 14 preschoolers • 25 school-agers. Group size: Poor standards. Caregiver training: Center directors: 30 hours to start, plus 1 year of experience; none annually. Center staff: None. Family child care

PHOTO BY LARRY WATSON

The 10 BEST states

- | | |
|-------------|---------------|
| California | Massachusetts |
| Colorado | Minnesota |
| Connecticut | Vermont |
| Hawaii | Washington |
| Maryland | Wisconsin |

providers: None. **+** Adult supervision: Poor. **Size at which family child care is regulated:** 7 children. **Immunizations:** ++. **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Centers: Good. **Family child care homes:** Poor. **Healthy Child Care America:** +. **Inspections:** Centers have unannounced inspections at least once a year; family child care homes are inspected only upon complaint. **☹** The state has no comprehensive initiatives to increase the supply of child care. **State investment:** 17¢ for every \$100. **R&Rs:** No statewide network. **♥** State officials have proposed some serious steps to improve child care, a welcome move in a state that ranks among the worst in the nation.

Officials at the state's department of social services have proposed the following: lowering the child/staff ratios, requiring TB tests and mandating more training for caregivers, especially for family child care workers who presently have no training requirements. "We're finally on the verge of having some good things happen this year," says Steve Phillips, director of the bureau of licensing in Louisiana's Department of Social Services.

State officials and activists have also been working to create a career-development program for child care workers. A special advisory council, made up of a group of child care professionals, advocates, state education officials and others will run focus groups and workshops in an effort to design new caregiver training programs. The state's resource and referral agency, as well as local universities and community colleges, will then offer the courses to interested caregivers.

MAINE

★ Number of children one adult can care for: 4 infants • 5 toddlers • 10 preschoolers • 13 school-agers. **Group size:** Mediocre to poor standards, except for school-age. **Caregiver training:** Center directors: 2 years of college including 9 credit hours in child-related topics, plus 6 months experience, to start; 24 hours annually. **Center staff:** None to start; 24 hours annually. **Family child care providers:** None to start; 6 hours annually. **+** **Adult supervision:** Good. **Size at which family child care is regulated:** 3+ children. **Immunizations:** +.

Playground surfaces: +. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** All licensed programs have unannounced inspections once a year. **☹** This state still has no broad-based plan or funding to expand child care services. **State investment:** 29¢ for every \$100. **R&Rs:** Statewide network (-). **♥** Maine launched a statewide program to improve caregiver training this year.

State officials here put together an ambitious career development program that includes courses, degrees and a formal career ladder for caregivers. By next year, the state hopes to develop a computer database that caregivers can use to find out about training opportunities. "Finally, caregivers are being recognized as something more than babysitters," says

Kathy Carey, a child care center director and president of the Central Maine chapter of NAEYC.

Just as important, the state plans to eventually make a caregiver's educational record available to parents via a computer database. Caregivers will be asked to voluntarily provide these records; it will not be mandatory.

As we went to press, state lawmakers were also considering a bill that would require all family child care homes to obtain certification, limit the size of the groups of children they care for and receive state inspections. Without such a law, about 1,351 family child care homes are "registered" with the state, but are not required to follow even minimal safety requirements.

MARYLAND

★ Number of children one adult can care for: 3 infants • 6 toddlers • 10 preschoolers • 15 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: 6 college credits to start; 6 hours annually. **Center staff:** 6 college credits to start;

3 hours annually. **Family child care providers:** 9 hours to start; 6 hours annually. **+** **Adult supervision:** Good. **Size at which family child care is regulated:** 1+ children. **Immunizations:** ++. **Playground surfaces:** +. **Hand-washing:** Good. **Healthy Child Care America:** -. **Inspections:** Centers have 1 announced inspection a year. Family child care homes have 1 announced inspection every other year. **☹** Maryland increased its child care budget by \$1 million, even though funds across the state were tight. **State investment:** 56¢ for every \$100. **R&Rs:** Statewide network (+). **♥** Despite budget constraints, Maryland strengthened its support for child care. The state's impressive resource and referral service will expand this year.

Like officials in many states, those in Maryland found themselves under severe pressure to make budget cuts. Yet even while the over-all state budget declined for the first time since the Depression, child care funding increased by \$1 million last year.

Nevertheless, advocates fear the state will still have trouble meeting the growing demand for child care. "In two years, as more people are moved off welfare, we fear we won't have enough money or

space to provide child care for everyone who needs it," says Sandy Skolnik, executive director of the Maryland Committee for Children.

Maryland has been ahead of most other states in providing extensive child care resource and referral services—and it continues to be a pioneer in this area. Data on child care providers is now being computerized; the Maryland Committee for Children is working to make special software available in a variety of settings, from libraries to businesses to government offices.

MASSACHUSETTS

★ Number of children one adult can care for: 3 infants • 4 toddlers • 10 preschoolers • 15 (6&7 yrs), 13 (8&9 yrs) school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: 14 college credits to start, plus management training;

none annually. **Master teachers:** 12 college credits to start; 20 hours annually. **Center staff:** High school vocational program to start; 20 hours annually. **Family child care providers:** None to start; 5 hours annually. **+** **Adult supervision:** Good. **Size at which family child care is regulated:** 1+ children. **Immunizations:** ++. **Playground surfaces:** +. **Hand-washing:** Good. **Healthy Child Care America:** +. **Inspections:** Centers have announced and unannounced inspections every 2 years. Family child care homes have announced and unannounced inspections every 3 years. **☹** Massachusetts supports a broad array of child care programs and increased the funding for them this year, despite a tight state budget. **State investment:** \$1.18 for every \$100. **R&Rs:** Statewide network (+). **♥** Massachusetts continues to increase funding for child care, significantly boosting the number of children served. Pre-kindergarten and other early education programs got an additional \$10 million.

Governor William Weld proposed increasing spending by \$23 million this year, which would bring the total child care spending in Massachusetts to \$283 million by 1998. Such funding is badly needed in the face of ever-increasing demand for child care across the state.

The state also allocated \$25 million to improve salaries for caregivers in many child care programs, a move that should help reduce turnover in centers. Other states should follow this example.

As long as they hire an assistant, family child care providers here will soon be able to take in up to four more children (for a total of 10). This move increases the supply of care and also boosts its quality. In effect, the new assistants will improve the adult-to-child ratio in many homes.

MICHIGAN

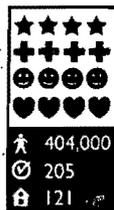
★ Number of children one adult can care for: 4 infants • 4 toddlers • 10 preschoolers • 20 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: 60 college credits to start; none annually. **Center staff:** None. **Family child care providers:** None. **+** **Adult supervision:** Good. **Size at which family child care is regulated:** 1+ children.

Immunizations: Centers: +. *Family child care homes:* Not regulated. **Playground surfaces:** -. **Hand-washing:** Centers: Good. *Family child care homes:* Poor. **Healthy Child Care America:** -. **Inspections:** Centers and large family child care homes have announced and unannounced inspections in alternating years; 10% of small family child care homes have unannounced inspections each year. ☺ Michigan gave child care a lift this year with \$44 million in new funds, creating 14,000 new slots. **State investment:** 37¢ for every \$100. **R&Rs:** Statewide network (+). ♥ Michigan has dramatically increased funding for child care this year, and, so far, maintained its commitment to use the money only for licensed programs.

Michigan increased its spending on child care by \$44 million, which means that nearly 14,000 more kids will be served this year. Next year, the state funding is slated to reach \$201 million, a \$16 million boost over 1997 spending. One key part of the budget: a special program to recruit caregivers who want to specialize in infant care, since demand for such care is so great here.

In this state, as in so many others, there has been a raging controversy over how to expand child care options without diluting the quality of programs. Governor John Engler had previously considered a radical approach to child care, which would have allowed parents to use state funds to pay unlicensed caregivers. Child care activists and providers managed to convince Engler that this was a bad idea and it was never officially proposed. Another idea the governor floated—an elimination of background checks for caregivers—was also shelved.

MINNESOTA



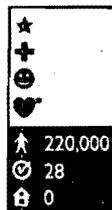
★ **Number of children one adult can care for:** 4 infants • 7 toddlers • 10 preschoolers • 15 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: 9 college credits, plus 6 months supervisory experience, to start; annual training equal to 2% of hours worked. **Center staff:** 24 college credits, plus 2 years experience, to start; 40 hours annually. **Family child care providers:** 6 hours to start; 6 hours annually. ✚ **Adult supervision:** Good. **Size at which family child care is regulated:** 2+ children. **Immunizations:** - (no HepB). **Playground surfaces:** -. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** All licensed programs have 1 unannounced inspection every other year. ☺ Minnesota increased its funding of child care this year, investing \$192 million in new funds. **State investment:** 61¢ for every \$100. **R&Rs:** Statewide network (+). ♥ Minnesota continues to be a leader on child care, with state lawmakers authorizing significant funds to expand and improve parents' options.

Last spring, Minnesota's legislature approved a major package of laws that granted more than \$200 million to child care. This translates into 13,000 more families getting help paying for child care this year. State lawmakers also designated funds to expand resource and referral services to help families find care, and approved Governor Arne Carlson's proposal to give \$1 million in new state money to train and recruit caregivers to meet the new demand.

Minnesota had several other important initiatives pass this year. One new law significantly boosts care-

giver training across the state by funding scholarships for caregivers to get on-the-job training. Another new law gives grants for nontraditional care—such as programs for kids with special needs and care during weekends and other off hours.

MISSISSIPPI



★ **Number of children one adult can care for:** 5 infants • 12 toddlers • 14 preschoolers • 20 school-agers. **Group size:** Mediocre. **Caregiver training:** Center directors: None to start; 15 hours annually. **Center staff:** None to start; 15 hours annually. **Family child care providers:** None. ✚ **Adult supervision:** Poor. **Size at which family child care is regulated:** 6+ children. **Immunizations:** - (no HepB). **Playground surfaces:** +. **Hand-washing:** Centers: Fair. **Family child care homes:** Not regulated. **Healthy Child Care America:** -. **Inspections:** All licensed programs have announced and unannounced inspections once a year. ☹ Mississippi still lacks a plan to expand its supply of child care. **State investment:** 4¢ for every \$100. **R&Rs:** No statewide network. ♥ Despite modest gains, Mississippi still trails most states on important measures of quality in child care.

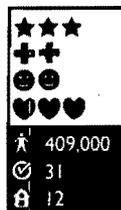
This state's low standards make for some dangerous situations. The licensing director, for example, tells us that she learned of one situation where a woman was looking after 17 children at once in her private home. This was perfectly legal under state law, since restrictions affect only nonrelated children, and all these children were related to the caregiver in some way.

In the past, Mississippi had as few as three inspectors to oversee the 1,500 licensed centers in the state. But this year, lawmakers tripled the budget for inspection, to hire 12 more inspectors and thus reduce caseloads from as many as 500 centers per person to 100. The legislature deserves recognition for this move.

More good news from the legislature: It voted to increase the state tax credit from 25 to 50 percent for employers who work to improve child care. This means companies can write off 50¢ on the dollar for investments in community child care programs or initiatives they undertake themselves.

Finally, the state has also actively worked to improve the training of child care center directors. This year, Mississippi paid tuition for well over 100 directors to take courses in early education and center management, a move that should improve the quality of care for children in this state.

MISSOURI



★ **Number of children one adult can care for:** 4 infants • 8 toddlers • 10 preschoolers • 16 school-agers. **Group size:** Mediocre to poor standards; no standards for preschoolers or school-agers. **Caregiver training:** Center directors: 12 college semester hours, plus 2 years experience, to start; 12 hours annually. **Center staff:** None to start; 12 hours annually. **Family child care providers:** None to start; 12 hours annually. ✚

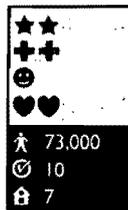
Adult supervision: Mediocre. **Size at which family child care is regulated:** 5+ children. **Immunizations:** +. **Playground surfaces:** +. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** All licensed programs have inspections twice a year (1 unannounced). ☹ Missouri continues to fund some local initiatives to expand care. **State investment:** 32¢ for every \$100. **R&Rs:** Statewide network (-). ♥ Missouri is making some modest progress toward improving the quality of care in some child care programs.

More and more school-age programs in Missouri are earning state accreditation, under a grants program developed three years ago by the state department of education. Happily, the Missouri Center for Accreditation reports it is now swamped with applications for accreditation, which means school-age programs are meeting higher standards. These new rules are not the same as those required for NAEYC accreditation, but they are far better than having no standards at all.

Advocates here managed to beat back a bill in the state legislature that would have hurt many family child care providers by requiring them to be in compliance with all local business zoning laws—a problem that plagues many child care providers across the country.

Child care programs in religious institutions are now subject to inspection, and state officials have asked for funding to hire more inspectors to visit these centers.

MONTANA



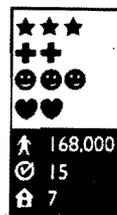
★ **Number of children one adult can care for:** 4 infants • 8 toddlers • 8 preschoolers • 14 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: None. **Center staff:** 8 hours to start; none annually. **Family child care providers:** None. ✚ **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 3+ children. **Immunizations:** - (no HepB). **Playground surfaces:** -. **Hand-washing:** Poor. **Healthy Child Care America:** +. **Inspections:** Centers have inspections twice a year (1 unannounced); 20% of family child care homes have unannounced inspections once a year. ☹ Montana makes only modest investments in expanding child care. **State investment:** 11¢ for every \$100. **R&Rs:** Statewide network (+). ♥ Montana took some modest steps to improve the quality of care this year.

A proposal to require additional training for family child care providers across this rural state was tabled by the legislature this year, but the state did institute an important safety rule: Play areas at family child care homes will now be required to have soft surfaces, which should protect children who fall from jungle gyms, swings and other equipment.

State officials continued to wrangle over requirements that all children have their shots before they enroll in a child care program. Child care providers housed in churches and other religious institutions asked to be exempt from such rules and provoked a heated debate. So far, state officials have resisted the pressure to loosen requirements.

HOW DOES YOUR STATE RATE

NEBRASKA



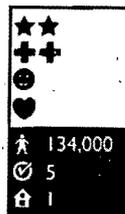
★ Number of children one adult can care for: 4 infants • 6 toddlers • 10 preschoolers • 15 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: None to start; 12 hours annually for those who work with children. Center staff: None to start; 12

hours annually. **Family child care providers:** None to start; 10-12 hours annually, depending on date of licensure. **Adult supervision:** Good. **Size at which family child care is regulated:** 4+ children. **Immunizations:** - (no HepB). **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** Child care centers have inspections every 2 years (may be announced or unannounced). Family child care homes are inspected only upon complaint. ☹ This state increased its spending to expand the supply of child care. **State investment:** 63¢ for every \$100. **R&Rs:** No statewide network. ♥ Nebraska is working to improve caregiver training. But the state lacks a comprehensive plan to improve and expand care.

Nebraska expanded the offerings at its caregiver training center this year. The center, located in Omaha, has a lending library and information hotline as well as classes. Through these classes, child care workers can meet licensing requirements and work toward gaining credentials in early-childhood education. Nebraska's training standards still lag behind those of its neighbors, however—especially Kansas. That state requires all child care center teachers to take college courses in child development before they start work.

The Nebraska legislature is expected to pass a bill that will require annual unannounced inspections of all child care programs. Currently, centers must only be inspected once every two years. And there is good news for parents of preschoolers in eight communities: The state funds collaborative preschool projects in one urban and seven rural areas.

NEVADA



★ Number of children one adult can care for: 6 infants • 10 toddlers • 13 preschoolers • 13 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: Combination of child-related education and experience to start; 3 hours in the first 6

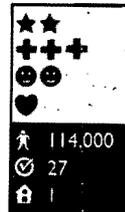
months, then 3 hours annually. Center staff: None to start; 3 hours in the first 6 months, then 3 hours annually. **Family child care providers:** None to start; 3 hours in the first 6 months, then 3 hours annually. **Adult supervision:** Poor. **Size at which family child care is regulated:** 5+ children. **Immunizations:** - (no HepB). **Playground surfaces:** +. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** All licensed programs have unannounced inspections twice a year. ☹ This state still has no broad initiatives to expand child care services. **State investment:** 17¢ for every \$100. **R&Rs:** No statewide network. ♥ Governor Bob Miller's leadership on child care has become stronger, but the state legislature has not shown the same improvement.

Governor Miller is showing new interest in child care: He is now the co-chair of the National Governors Association's Children's Task Force. He has also urged the legislature to increase child care funding, which among other benefits would allow the state to apply for federal child care money. To do that, however, state lawmakers must pledge to put up state matching funds; a move which had not yet been approved by the state legislature as we went to press. Advocates in this state describe the legislature as apathetic on child care issues.

Licensing standards here remain inadequate, but there has been an effort to improve them. The state's child care licensing board has proposed new rules, including one that would require more training for directors and teachers at child care centers.

A statewide summit on child care and economic development looked at how high-quality child care helps a community's economy. The meeting was sponsored by a private child care organization in conjunction with the governor's office. Participants vowed to make child care better by improving licensing standards. These plans are still vague, however.

NEW HAMPSHIRE



★ Number of children one adult can care for: 4 infants • 6 toddlers • 8 preschoolers • 15 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: None. Master teachers: 144 hours of workshops to start; none annually. Center staff:

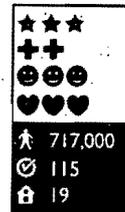
72 hours of workshops to start; none annually. **Family child care providers:** None. **Adult supervision:** Good. **Size at which family child care is regulated:** 4+ children. **Immunizations:** +. **Playground surfaces:** +. **Hand-washing:** Good. **Healthy Child Care America:** +. **Inspections:** All licensed programs have inspections once a year (may be announced or unannounced). ☹ New Hampshire still does little to expand child care services for its residents. **State investment:** 52¢ for every \$100. **R&Rs:** Statewide network (+).

♥ This conservative state continues to have a mixed record on child care.

New Hampshire is one of the few remaining states that doesn't provide public kindergarten for its kids. But Governor Jeanne Shaheen, a working mother of three, says she wants to change that. We hope she does—and then turns her attention to the education and care of even younger children.

State lawmakers seem divided about their commitment to child care. On the one hand, a bill which would have provided more money to pay for caregiver training was defeated. But more families are now eligible for child care help, and standards for caregivers who receive state funds have been improved slightly.

NEW JERSEY



★ Number of children one adult can care for: 4 infants • 7 toddlers • 10 preschoolers • 18 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: None. Master teachers: 6 college credits in early-childhood education and 4 years experience

to start; none annually. Center staff: 15 college credits to start; none annually. **Family child care providers:** None. **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 6+ children. **Immunizations:** - (no HepB). **Playground surfaces:** -. **Hand-washing:** Good. **Healthy Child Care America:** -. **Inspections:** Centers have inspections every 3 years; 20% of family child care homes have monitoring visits once a year (may be announced or unannounced). ☹ The state will expand its supply of child care under the governor's new budget. **State investment:** 50¢ for every \$100. **R&Rs:** Statewide network (-). ♥ Prodded by welfare reform changes, New Jersey is taking a greater interest in child care than it has in the past.

New Jersey Governor Christine Todd Whitman highlighted children's issues in her budget proposal this year, increasing child care spending by about \$27 million. "A budget is always a competition for prior-



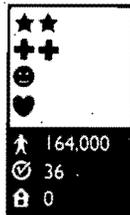
Tiene Anderson creates a loving, safe environment for babies, thanks to special infant/toddler training. She's one of just over 1,000 North Dakota caregivers who've received the training.

HOW DOES YOUR STATE RATE

ities, and we're pleased that children were one of her priorities," says Ciro Scalera, executive director of the Association for Children of New Jersey.

The governor wants to spend the great majority of the money to help thousands more families with the cost of child care. Like many states, New Jersey wants to move some women from welfare to work as child care providers—a controversial concept. New Jersey is approaching the idea with some important safeguards, however. These new providers will have to meet health and safety standards and take special training sessions. The state will also pair providers with mentors and pay for them to join an association of family child care providers.

NEW MEXICO



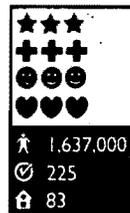
★ Number of children one adult can care for: 6 infants • 12 toddlers • 12 preschoolers • 15 school-agers. **Group size:** No standards. **Caregiver training:** 24 hours annually. **Center staff:** None to start; 24 hours annually. **Family child care providers:** None to start; 6 hours annually. †

Adult supervision: Poor. **Size at which family child care is regulated:** 5+ children. **Immunizations:** +. **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Good. **Healthy Child Care America:** +. **Inspections:** All licensed programs have unannounced inspections twice a year. ☹️ This state still has no major initiative to expand the supply of child care. **State investment:** 24¢ for every \$100. **R&Rs:** Statewide network (-). ♥️ State officials here have not made child care a high priority.

New state rules for child care facilities went into effect last spring. The maximum number of toddlers one teacher can care for was reduced from 12 to 10 in many centers. That's still too many, but it's a start. New Mexico also launched a new measure to promote quality; child care centers meeting higher standards can now get more state money.

But parents may have trouble finding these centers. The state has completely eliminated funding for resource and referral. Existing state-funded R&Rs no longer help families find care; they are now devoted to training and technical assistance for caregivers and some consumer education for parents. Such training and education is valuable, but now parents will have a harder time finding good care even when they know what it is.

NEW YORK



★ Number of children one adult can care for: 4 infants • 5 toddlers • 7 preschoolers • 10 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: Bachelor's degree with 18 credits in early-childhood education and experience to

start; 15 hours in first year and then 15 hours every 2 years. **Master teachers:** Bachelor's degree with 6 courses in early-childhood education to start; 15 hours annually. **Center staff:** None to start; 15 hours annually. **Family child care providers:** None to start; 15 hours in the first year, then 7.5 hours annually. † **Adult supervision:** Good. **Size at which family child care is regulated:** 3+ children. **Immunizations:** ++. **Playground sur-**

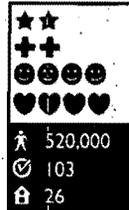
faces: -. **Hand-washing:** Good. **Healthy Child Care America:** -. **Inspections:** Centers and large family child care homes have unannounced inspections every 2 years; 20% of small family child care homes have unannounced inspections once a year. ☺️ New York funds many child care programs, but funding did not increase by much this year. **State investment:** 90¢ for every \$100. **R&Rs:** Statewide network (+). ♥️ Governor George Pataki's commitment to child care continues to be weak, but an infusion of federal funds will probably help the state expand the supply of care this year.

Governor Pataki recommended that child care aid be available only to parents with kids under the age of six. This proposal would obviously save New York State money—but it would be a blow to many working moms, and a big loss to school-age programs across this state.

State lawmakers did provide some minimal help for many families. In 1996, the legislature expanded the state child care tax credit by allowing it to be added to parents' tax refunds. That will provide many families with a refund as high as \$432.

Over all, child care in New York seems to be in a holding pattern. Nearly a million kids in this state will need state-subsidized child care in 1997; so far, only 110,000 receive it.

NORTH CAROLINA



★ Number of children one adult can care for: 5 infants • 10 toddlers • 15 preschoolers • 25 school-agers. **Group size:** Mediocre standards. **Caregiver training:** Center directors: None to start; 20 hours annually. **Center staff:** None to start; 20 hours annually. **Family child care providers:** None. †

Adult supervision: Poor. **Size at which family child care is regulated:** 3+ children. **Immunizations:** +. **Playground surfaces:** -. **Hand-washing:** Centers: Good. **Family child care homes:** Poor. **Healthy Child Care America:** +. **Inspections:** Centers have 1 announced inspection a year; 5% of family child care homes have announced inspections every 2 years. ☹️ The state continues to expand its supply of child care, with more than \$21 million in new funding. **State investment:** 58¢ for every \$100. **R&Rs:** Statewide network (+). ♥️ Governor Jim Hunt remains staunchly committed to improving child care across the state. His ambitious "Smart Start" program has led to new child care spaces for thousands of kids.

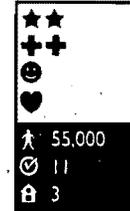
No state has more action or more enthusiasm for improving child care than North Carolina. And no governor deserves more credit for fighting for child care than Jim Hunt. His "Smart Start" program has as its goal affordable, quality early-childhood education for every child who needs it. In the past four years, the state has created more than 30,000 new slots for child care and improved care for more than 150,000 kids.

The program ran up against some resistance in the state legislature in the past, but now a solid majority embrace the core tenets of Smart Start. This year, for example, state lawmakers decided to award permanent funding for the state's caregiver training program, Teacher Education and Compensation Helps (TEACH.)—more than \$1 million a year in recurring funds. That means child care advocates won't have to come back every

year to fight for money for early education. The TEACH program is now being copied by other states, including Illinois.

With all this progress, it's a shame that North Carolina's key standards aren't better. One adult is still allowed to care for up to five babies, and caregivers are not required to have any education or training before they start work (a bill now before the legislature may change this). This state could do better on these critical aspects of child care.

NORTH DAKOTA



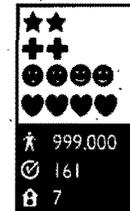
★ Number of children one adult can care for: 4 infants • 5 toddlers • 7 preschoolers • 18 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: Some college credits and experience to start; none annually. **Center staff:** None to start; 10 hours annually. **Family child care providers:** None to start; 5 hours annually. †

Adult supervision: Good. **Size at which family child care is regulated:** 6 children. **Immunizations:** - (no HepB). **Playground surfaces:** -. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** Centers and family child care homes have inspections (some unannounced) every 2 years. ☹️ This state still lacks a plan to expand its supply of child care. **State investment:** 11¢ for every \$100. **R&Rs:** No statewide network. ♥️ North Dakota legislators have not made child care a priority.

North Dakota's child care advocates do manage to make important progress, though often without much support from state lawmakers. Most impressive in recent years: The state now has a training program dedicated to caregivers who work with infants and toddlers—a crucial issue across the country. Over the last two years, more than 1,000 caregivers attended the \$1 million infant/toddler development program, funded by a private foundation. The principles of that program are now being incorporated into state licensing laws and voluntary guidelines for caregivers across the state, which should improve care for babies.

A bill introduced into the legislature in early 1997 could have improved services in this state: It proposed a \$4 fee on birth certificates to create a Children's Fund. Half the money would be earmarked for child care. The bill was defeated, but will be resubmitted next year.

OHIO



★ Number of children one adult can care for: 5 infants • 7 toddlers • 12 preschoolers • 18 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: 4 college courses to start; none annually. **Center staff:** None to start; 15 hours annually

for 3 years. **Family child care providers:** None to start; 12 hours of training in the first year, then 6 hours annually until they have completed 30 hours. † **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 7 children. **Immunizations:** - (no HepB). **Playground surfaces:** +. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** All licensed programs have inspections (at least 1 unannounced)

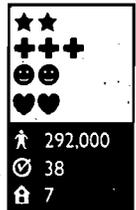
HOW DOES YOUR STATE RATE

twice a year. ☺ Child care slots are rapidly expanding here, thanks to a big infusion of new state funds. **State investment:** 68¢ for every \$100. **R&Rs:** Statewide network (+). ♥ Ohio maintains a strong commitment to child care under Governor George Voinovich's leadership.

Ohio has been working hard to create child care for its residents and has put serious money into the effort. As we went to press, the governor and state lawmakers appeared ready to boost funding significantly, so that 80,000 kids would receive care by 1998, an increase of 20,000 in two years. That's real progress. Ohio also expanded its pre-K programs.

The state now helps to fund an innovative program called RISE (Resources and Instruction for Staff Excellence) to train child care teachers to build closer relationships with parents. The \$1.25 million grant is being used to create parent-teacher sessions on child development. Such sessions not only cement relationships between teachers and parents, but also help answer parents' questions about discipline and development.

OKLAHOMA



★ **Number of children one adult can care for:** 4 infants • 8 toddlers • 12 preschoolers • 20 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: Approved child care training program and some management training to start; 20

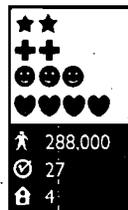
hours annually. **Master teachers:** None to start; 12 hours annually. **Center staff:** None to start; 12 hours annually. **Family child care providers:** None to start; 10 hours annually. **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 1+ children. **Immunizations:** - (no HepB). **Playground surfaces:** Centers: +. **Family child care homes:** -. **Hand-washing:** Good. **Healthy Child Care America:** +. **Inspections:** All licensed programs have unannounced inspections three times a year. ☺ This state continues to make child care funding a low priority. **State investment:** 79¢ for

every \$100. **R&Rs:** No statewide network. ♥ Oklahoma's commitment to child care remains relatively weak, especially on requirements for caregiver training.

Oklahoma's Governor Frank Keating and state lawmakers have done little to expand or improve child care options for their constituents this year. State child care officials have promoted some measures, however, which could eventually improve the quality of care and help parents find care. Hearings were held this winter on the need to expand the state's resource and referral agencies: At the moment, the state has only three R&Rs, and they cover only half the state. Oklahoma is now planning to use federal funds to add six more R&Rs.

School-age care got a modest boost: The state hired two consultants to work with local communities to develop before- and after-school programs. This is a baby step, but it deserves recognition.

OREGON



★ **Number of children one adult can care for:** 4 infants • 4 toddlers • 10 preschoolers • 15 school-agers. **Group size:** Good standards. **Caregiver training:** Center directors: None to start; 15 hours annually. **Master teachers:** None to start; 15 hours annually. **Center staff:**

None to start; 15 hours annually. **Family child care providers:** None. **Adult supervision:** Good. **Size at which family child care is regulated:** 4+ children. **Immunizations:** - (no HepB). **Playground surfaces:** -. **Hand-washing:** Centers: Good. **Family child care homes:** Poor. **Healthy Child Care America:** +. **Inspections:** Centers and larger family child care homes (7 or more children) have inspections twice a year (at least 1 unannounced); smaller homes are inspected only upon complaint. ☺ The state launched no significant new initiatives to expand the supply of care. **State investment:** 68¢ for every \$100. **R&Rs:** Statewide network (+). ♥ Oregon has laid out its goals for improving child care in its

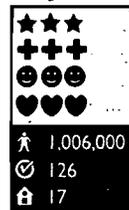
"benchmark" program—and steadily works to meet them.

Oregon has taken a number of small steps to improve child care: A new background check on caregivers has been instituted, which includes an FBI check for criminal offenses. The state has also mandated an orientation session for anyone who wishes to open a family child care business. The two-hour briefing offers an overview of what it takes to make a home-based child care business work, and what training and support is available from the community and the state. The idea is to put the brakes on anyone who might enter the profession thinking it's an easy job and then close up shop and leave parents in the lurch—a fairly common scenario. The innovation seems to be working. "Our certifier said she has not yet had to go out on a complaint for anyone who has gone through this overview," says Janis Sabin Elliot of the state's Child Care Division.

Oregon has also stepped up its efforts to insure children's health and safety. For instance, it now has more power to revoke the licenses of child care providers in serious violation of rules.

Family child care could be improved in this state if a bill pending before the legislature becomes law. Among other things, it would require providers to have training in CPR and first aid, which should be a basic standard for any good child care program.

PENNSYLVANIA



★ **Number of children one adult can care for:** 4 infants • 6 toddlers • 10 preschoolers • 12 school-agers. **Group size:** Good standards. **Caregiver training:** Center directors: Associate's degree with 30 credit hours in early-childhood education or a related topic, plus

4 years experience, to start; 6 hours annually. **Master teachers:** Associate's degree with 30 hours in early-childhood education or a related topic, plus 2 years experience, to start; 6 hours annually. **Center staff:** None to start; 6 hours annually. **Family child care providers:** None to start; 12 hours every 2 years. **Adult supervision:** Good. **Size at which family child care is regulated:** 4+ children. **Immunizations:** +. **Playground surfaces:** +. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** Centers have announced inspections once a year; 5% to 10% of family child care homes have inspections once a year (may be announced or unannounced). ☺ The state aims to create a statewide R&R system this year. **State investment:** 41¢ for every \$100. **R&Rs:** No statewide network. ♥ Governor Tom Ridge has talked a lot about child care, but hasn't always backed up his words with action—or money.

The situation in this state is a mixed bag: Ratios and training requirements are quite good, but child care centers and family child care homes rarely get surprise inspection visits, and there's no statewide resource & referral (R&R) system to help parents find care. But change is in the works. The state is using some of its federal money to create an R&R network this year, and legislation is pending to require unannounced inspections. Both would be welcome developments.

As we went to press, parents and child advocates here were responding to Governor Tom Ridge's latest budget proposal. He says he's made the largest-ever increase in child care funds—\$68 million. But nearly all of that is federal money; the governor

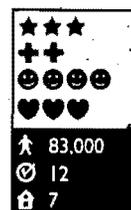


This young artist is cared for at a family child care home in Bothell, Washington. The state is recruiting more of these caregivers, since they are often willing to provide off-hours care.

HOW DOES YOUR STATE RATE

allotted only \$1 million in new state funds for child care aid to parents in low-income jobs. Meanwhile, 11,700 children needing subsidized care are on a waiting list, and the state has a budget surplus of nearly \$500 million!

RHODE ISLAND



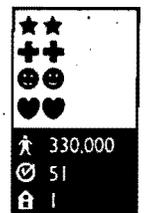
★ **Number of children one adult can care for:** 4 infants • 6 toddlers • 9 preschoolers • 13 school-agers. **Group size:** Good standards. **Caregiver training:** Center directors: None to start; 20 hours annually. Master teachers: Bachelor's degree, must meet standards for

Rhode Island Early Childhood certification; 20 hours annually. Center staff: Bachelor's degree, must meet standards for Rhode Island Early Childhood certification; 20 hours annually. Family child care providers: None to start; 10 hours every 2 years. **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 4+ children. **Immunizations:**— (no HepB). **Playground surfaces:** Centers: +. Family child care homes: -. **Hand-washing:** Centers: Good. Family child care homes: Poor. **Healthy Child Care America:** +. **Inspections:** Centers have unannounced inspections twice a year; family child care homes have inspections every 2 years (may be unannounced). ☺ This state eliminated its waiting list for child care this year and created an innovative program to expand the supply of family child care. **State investment:** 46¢ for every \$100. **R&Rs:** Statewide network (+). ♥ Rhode Island has taken several steps this year to improve the quality and supply of child care. Most notably, the state has made a pledge to serve all families on a waiting list for subsidized care.

This state has managed to pull off a remarkable innovation—one that should be immediately copied by other states. Rhode Island is now offering paid health insurance to licensed family child care providers who care for children who receive state child care aid. This effort is meant to—and surely will—enhance the appeal of the child care profession and help keep providers in the field. One of the big reasons many caregivers abandon the work is poor pay and lack of benefits, especially health insurance. It may also encourage providers to get a license and meet health and safety standards.

Child care advocates here are also excited about a new program called Rhode Island Quality Childcare 2000, a collaborative effort of many agencies involved in early-childhood education. The plan is to educate the public about the need for quality care through a sophisticated public relations campaign, and also to help child care providers gain accreditation. Both are important goals and deserve the attention Rhode Island is giving them.

SOUTH CAROLINA

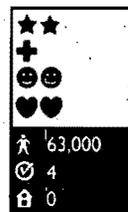


★ **Number of children one adult can care for:** 6 infants • 10 toddlers • 13 preschoolers • 23 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: None to start; 15 hours first year, then 20 hours annually. Center staff: None to start; 10 hours first year, then 15 hours annually. Family child care providers:

None. **Adult supervision:** Poor. **Size at which family child care is regulated:** 2+ children. **Immunizations:**—. **Playground surfaces:** Centers: +. Family child care homes: -. **Hand-washing:** Centers: Good. Family child care homes: Poor. **Healthy Child Care America:** +. **Inspections:** Centers have unannounced inspections twice a year; family child care homes are inspected only upon complaint. ☺ This state makes expansion of child care a low priority. **State investment:** 45¢ for every \$100. **R&Rs:** No statewide network. ♥ The governor and legislators here have been uneven in their support of child care.

This state does little to protect children in family child care: Current rules don't even insist on electricity or working smoke detectors. The state is reworking the rules and will submit them to the legislature next year. If lawmakers agree to the changes, family child care providers will have to meet stricter health and safety standards and complete eight to 10 hours of training per year. Still, South Carolina has a long way to go. Governor David Beasley requested \$4 million for child care so the state could get \$9 million in federal money. At first, the legislature balked. Eventually, they agreed to put up \$2.5 million and have two state agencies raise the remaining funds.

SOUTH DAKOTA

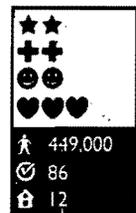


★ **Number of children one adult can care for:** 5 infants • 5 toddlers • 10 preschoolers • 15 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: None. Master teachers: None to start; 20 hours annually. Center staff: None to start; 20

hours annually. Family child care providers: None. **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 13 children. **Immunizations:**— (no HepB). **Playground surfaces:**—. **Hand-washing:** Fair. **Healthy Child Care America:**—. **Inspections:** All licensed programs have unannounced inspections once a year. ☺ The state provides only modest support for child care programs, but is working to recruit more child care providers. **State investment:** 11¢ for every \$100. **R&Rs:** Statewide network (-). ♥ South Dakota still trails most other states in its commitment to child care.

Child care advocates hope that Lolita Hunking, the state's new child care services coordinator, will take action to improve child care in South Dakota. To date, neither Governor William Janklow or state lawmakers have made it a priority. In an interview earlier this year, Hunking said she hopes to involve both business leaders and educators in efforts to upgrade the quality of care. Many advocates hope her great enthusiasm to create new caregiver training programs will effect their implementation.

TENNESSEE

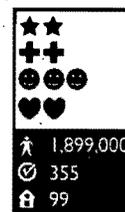


★ **Number of children one adult can care for:** 5 infants • 8 toddlers • 10 preschoolers • 25 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: None to start; 12 hours annually. Center staff: None to start; 6 hours annually. Family child care providers: None to start; 2 hours annually.

★ **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 5+ children. **Immunizations:** ++. **Playground surfaces:** +. **Hand-washing:** Fair. **Healthy Child Care America:** +. **Inspections:** All licensed programs have inspections (1 unannounced) twice a year. ☺ The state boosted funding so that 4,000 more children will get child care this year. **State investment:** 26¢ for every \$100. **R&Rs:** No statewide network. ♥ Tennessee has increased funding for child care, but has yet to make key quality improvements recommended by a committee of experts several years ago.

Like so many other states, Tennessee has boosted its funding for child care in the face of welfare reform. In his budget for the next fiscal year, Governor Don Sundquist has pledged \$10 million in new funds. Much of that money will go to boost payments to caregivers—which may in turn lower parents' bills. At the same time, state officials are still dragging their feet over new rules that were proposed three years ago to improve the quality of care for Tennessee's kids. The rules would upgrade caregiver training and lower adult-to-child ratios—important changes that studies show make programs better for kids. It looks as if the rules will soon be approved, but they'll then be phased in over nearly four years—an unfortunate delay. "A lot of us are really distressed that the state has not implemented these standards yet," says Phil Acord of the Children's Home and Shelter, a 24-hour child care center in Chattanooga.

TEXAS



★ **Number of children one adult can care for:** 4 infants • 13 toddlers • 17 preschoolers • 26 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: 9 college credits in child development and 9 in business management, plus 3 years experience, to start; 20 hours annually. Center staff: 8 hours to start; 15 hours annually. Family child care providers: None to start; 20 hours annually. **Adult supervision:** Poor. **Size at which family child care is regulated:** 4+ children. **Immunizations:**— (no HepB). **Playground surfaces:**—. **Hand-washing:** Good. **Healthy Child Care America:** +. **Inspections:** Centers have inspections 1 to 3 times a year, based on past performance; family child care homes have inspections every 1 to 3 years, based on past performance (most unannounced). ☺ The state continues to keep its strong commitment to pre-K programs, but still lacks a broad-based plan to serve children of other ages. **State investment:** 71¢ for every \$100. **R&Rs:** No statewide network. ♥ Texas improved its infant standards this year by lowering the number of children one adult may care for, but still has some distance to go on upgrading quality for older children. The state's extensive support of prekindergarten education remains the bright spot here.

This year, the Texas Licensed Child Care Association lobbied heavily against proposed standards that would have improved the adult-to-child ratios in many programs. Unfortunately, it prevailed. Lawmakers delayed adoption of the new rules.

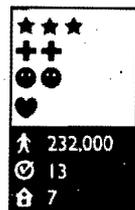
Texas may finally get statewide resource and referral services, however, with new federal funds coming into the state. In addition to helping parents

HOW DOES YOUR STATE RATE

find care, R&Rs may handle both caregiver training and consumer education—a positive development.

Providers across the state may also get low-interest loans to buy new equipment, upgrade their facilities and do other things to improve the quality of care, under a bill pending in the state legislature that looked likely to pass as we went to press.

UTAH



★ Number of children one adult can care for: 4 infants • 7 toddlers • 12 preschoolers • 20 school-agers. **Group size:** Mediocre to poor standards.

Caregiver training: Center directors: Combination of child-related course work and experience to start; 20 hours annually. **Center staff:** 40 hours in first year; 20 hours annually. **Family child care providers:** 2 hours of state-approved training to start; 12 hours annually.

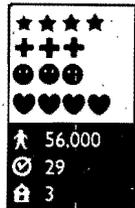
✚ **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 4 children. **Immunizations:** — (no HepB). **Playground surfaces:** —. **Hand-washing:** Centers: Good. **Family child care homes:** Poor. **Healthy Child Care America:** +. **Inspections:** Centers have 1 announced and 2 unannounced inspections a year. Family child care homes have at least 1 announced inspection a year. ● The state still invests relatively little in expanding child care. **State investment:** 73¢ for every \$100. **R&Rs:** No statewide network. ♥ Utah lawmakers continue to be stingy in child care funding. The state is one of the few to actually lower its spending on child care, which could cause it to forfeit a chunk—\$1.6 million—of federal money for child care.

Utah has delayed new child care standards, after a fractious battle over them. The state recently shifted child care oversight to a new government agency—the department of health, and officials must now

start the rule-revision process from scratch.

In a more positive move, Utah officials are exploring ways to expand care for school-age kids. One interesting proposal: The state will offer \$500,000 to communities willing to put up matching funds to create new slots for school-age care. Half the money would be for programs run by private caregivers. This is an interesting approach, since it uses both public and private resources to help kids.

VERMONT



★ Number of children one adult can care for: 4 infants • 5 toddlers • 10 preschoolers • 13 school-agers. **Group size:** Good standards, except for school-age care. **Caregiver training:** Center directors: 4 college courses to start; 9 hours annually. **Master teachers:** 4 college courses to start; 9 hours annually. **Center staff:** One college course to start, plus one year experience; 6 hours annually. **Family child care providers:** None to start; 6 hours annually.

✚ **Adult supervision:** Good. **Size at which family child care is regulated:** 3+ children. **Immunizations:** — (no HepB). **Playground surfaces:** Centers: +. **Family child care homes:** —. **Hand-washing:** Centers: Good. **Family child care homes:** Fair. **Healthy Child Care America:** +. **Inspections:** Centers have 2 unannounced inspections a year; family child care homes have inspections only upon complaint. ● Vermont offers modest assistance to start up new child care programs. **State investment:** \$1.09 for every \$100. **R&Rs:** Statewide network (+). ♥ This state continues to be a leader in quality child care.

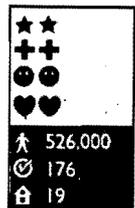
Good rules and tenacious advocates mean child care here is high quality—and still improving. When legislators wanted to cut funding for child care training last year, parents and caregivers mobilized. They

spent a day at the capital explaining why training is so important—and legislators agreed to restore 90 percent of the money they had proposed cutting.

The state recently began requiring that family child care homes be inspected before they're registered with the state. State officials spend two hours with new caregivers, offering training and guidance, explaining rules and making sure homes are safe. This is an excellent way to approach the job of state oversight.

Vermont has also published a set of "core standards" for all child care programs. These standards are voluntary, but serve as a guideline for centers looking to improve quality.

VIRGINIA



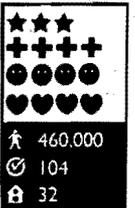
★ Number of children one adult can care for: 4 infants • 10 toddlers • 10 preschoolers • 20 school-agers. **Group size:** No standards. **Caregiver training:** Center directors: Some early-childhood education and experience to start; none annually. **Master teachers:** Combination of education and experience to start; 8 hours annually. **Center staff:** None to start; 8 hours annually. **Family child care providers:** None to start; 6 hours annually.

✚ **Adult supervision:** Mediocre. **Size at which family child care is regulated:** 6+ children. **Immunizations:** — (Hib is required only for children under 30 months. HepB is required only for children born after January 1, 1994.) **Playground surfaces:** Centers: +. **Family child care homes:** —. **Hand-washing:** Centers: Good. **Family child care homes:** Fair. **Healthy Child Care America:** —. **Inspections:** All licensed programs have inspections twice a year (at least 1 unannounced). ● This state launched no significant new initiatives to expand its supply of child care. **State investment:** 24¢ for every \$100. **R&Rs:** Statewide network (—). ♥ Controversy continues to dominate the child care scene in Virginia, with very little accomplished in terms of improving or expanding options for families.

Child care advocates and Governor George Allen remained at odds all year, fighting over standards for child care. At one point, members of a child care council that Allen had appointed proposed lowering standards for caregiver training and reducing some adult-to-child ratios for preschool children. Fortunately, the proposals were beaten back in the state legislature.

On the positive side, the state did finally put up matching funds to secure its full share of federal child care funds (although there is concern among advocates over how these funds will be distributed). Virginia also set aside some modest funds for caregiver training.

WASHINGTON



★ Number of children one adult can care for: 4 infants • 7 toddlers • 10 preschoolers • 15 school-agers. **Group size:** Mediocre to poor standards. **Caregiver training:** Center directors: 45 college credits in early-childhood education or equivalent to start; none annually. **Center staff:** None to start; some annually. **Family child care providers:** None. ✚ **Adult**

supervision: Good. **Size at which family child care is regulated:** 6+ children. **Immunizations:** — (Hib is required only for children under 30 months. HepB is required only for children born after January 1, 1994.) **Playground surfaces:** Centers: +. **Family child care homes:** —. **Hand-washing:** Centers: Good. **Family child care homes:** Fair. **Healthy Child Care America:** —. **Inspections:** All licensed programs have inspections twice a year (at least 1 unannounced). ● This state launched no significant new initiatives to expand its supply of child care. **State investment:** 24¢ for every \$100. **R&Rs:** Statewide network (—). ♥ Controversy continues to dominate the child care scene in Virginia, with very little accomplished in terms of improving or expanding options for families.



Florida Governor Lawton Chiles has been a true champion of child care. Recently, he proposed that the state spend an additional \$49 million to make care available to more kids.



New training rules in Washington State will improve care for kids in homes and centers.

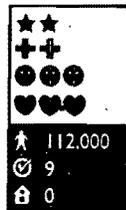
supervision: Good. Size at which family child care is regulated: 2+ children. Immunizations: ++. Playground surfaces: Centers: +. Family child care homes: -. Hand-washing: Centers: Good. Family child care homes: Poor. Healthy Child Care America: +. Inspections: All licensed programs have announced inspections every 3 years. ☺ Washington State made a significant new investment to expand child care, allocating \$100 million in new funds. State investment: 65¢ for every \$100. R&Rs: Statewide network (+). ♥ Washington State continues to be an innovator on child care, with the legislature and governor committed to improving and expanding care across the state.

Washington State officials are working hard to expand the supply of child care this year. Governor Gary Locke's proposed budget earmarked \$350 million for child care, including \$100 million in new dollars and \$9 million for nontraditional care, such as off-hours programs for parents who work swing shift or nights. This is an especially important innovation; child care advocates across the country report that parents with nontraditional hours find it nearly impossible to obtain care for their children. Last year, state lawmakers earmarked about \$10 million in state funds to eliminate a waiting list for state-sponsored child care.

New funds have been made available for resource and referral, caregiver training and parent-education efforts. Training requirements for all caregivers have been strengthened as part of the program. All providers in the state will soon have to

have 20 hours of training during their first year on the job, and 10 hours annually after that. Currently, most caregivers need no training at all before they start caring for kids.

WEST VIRGINIA



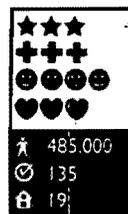
★ Number of children one adult can care for: 4 infants • 8 toddlers • 10 preschoolers • 16 school-agers. Group size: No standards. Caregiver training: Center directors: 9 hours to start; none annually. Center staff: None to start; unspecified number of hours

required annually. Family child care providers: None. + Adult supervision: Mediocre. Size at which family child care is regulated: 4 children. Immunizations: Centers: ++. Family child care homes: +. Playground surfaces: -. Hand-washing: Centers: Good. Family child care homes: Fair. Healthy Child Care America: +. Inspections: All licensed programs have announced inspections once a year. ☺ This state expanded its supply of family child care and continued to support its network of family resource centers. State investment: 21¢ for every \$100. R&Rs: No statewide network. ♥ West Virginia expanded the supply of family child care this year.

The big news here: West Virginia is expanding its resource and referral network statewide. By next year, every parent in the state will have access to an R&R agency offering help finding child care. In the face of growing demand for child care, the state has created a new class of family child care homes. In these homes, which started opening this month, two adults may care for seven to 12 children. While this is a lot of kids for two adults to supervise, the new rules do limit the number of children under two that can be cared for in the home. These large homes are a workable solution for this rural state, since small, spread-out communities often can't sustain child care centers.

Thanks to the previous governor, Gaston Caperton, West Virginia had an extra \$2 million to spend on child care this year—a sizable chunk for a small state. West Virginia used the money to add licensing staff, support a school-age summer care program and help fund the R&R expansion.

WISCONSIN



★ Number of children one adult can care for: 4 infants • 6 toddlers • 10 preschoolers • 18 school-agers. Group size: Mediocre to poor standards. Caregiver training: Center directors: None to start; 39 hours annually. Center staff: 80 hours to start; 39 hours annually. Family child

care providers: 40 hours to start; 15 hours annually. + Adult supervision: Good. Size at which family child care is regulated: 4+ children. Immunizations: +. Playground surfaces: Centers: +. Family child care homes: -. Hand-washing: Good. Healthy Child Care America: +. Inspections: All licensed programs have unannounced inspections once a year. ☺ This state boosted its child care supply significantly; it now serves 17,000 more children. State investment: 33¢ for every \$100. R&Rs: Statewide network (+).

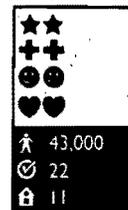
♥ Wisconsin is making a big push to expand the supply of care, but some of the expansion may come at the expense of quality.

Governor Tommy Thompson's welfare reform effort, "Wisconsin Works," included sweeping changes in the state's child care rules and funding. On the positive side, state funding is increasing by \$36 million this year alone, which means all families on the waiting list for child care subsidies have now received them. In 1996-97, the state pumped \$89 million in new state money into child care. By 1998, the number of children receiving aid will zoom from the current 17,000 to 60,000. This is a remarkable achievement.

The state also gave a big one-time boost to efforts to increase supply and quality to the tune of \$5 million. That money will translate into more staff for licensing, improved resource and referral services and more grants for caregiver training.

At the same time, however, Wisconsin has created a new class of providers, known as "provisional" caregivers. These providers will not be required to have any training, and the state will reimburse them at half the rate it pays those who are certified and have credentials in early education. Many advocates are worried that these policies—paying caregivers less and lowering training standards—could hurt the quality of child care in Wisconsin.

WYOMING



★ Number of children one adult can care for: 5 infants • 8 toddlers • 10 preschoolers • 25 school-agers. Group size: No standards. Caregiver training: Center directors: None to start; 8 hours annually. Center staff: None to start; 8 hours annually. Family child

care providers: None to start; 8 hours annually. + Adult supervision: Mediocre. Size at which family child care is regulated: 3+ children. Immunizations: +. Playground surfaces: -. Hand-washing: Fair. Healthy Child Care America: +. Inspections: Centers and family child care homes have unannounced inspections once a year. ☺ This state has no broad initiatives to increase the supply of child care. State investment: 18¢ for every \$100. R&Rs: No statewide network. ♥ State lawmakers took a step backwards this year, delaying new rules that would have made significant improvements in the quality of child care across the state.

The state's Department of Family Services worked long and hard to improve child care licensing rules. The final proposals would have lowered adult-to-child ratios and required caregivers to have more training—two significant steps that are known to boost the quality of child care programs.

The new rules had received plenty of support when they were circulated to local child care associations. But lawmakers retreated from the rules in the face of vocal opposition from a few family child care providers who complained such improvements would ruin them financially. The legislature also proposed a moratorium on changes to licensing rules until 2001—fortunately, this failed to pass.

Betty Holcomb is a WM contributing editor; Catherine Cartwright is senior editor; Shaun Dreisbach is associate editor; Anne L. Fritz is assistant editor.

Sources: California Legislature, California Department of Finance

The San Francisco Chronicle, AUGUST 5, 1997.

HOW THEY VOTED

Votes of Bay Area legislators on a bill sent Governor Pete Wilson that would implement a new welfare system in California:

SENATE

- Democrats for: Lockyer, Hayward; Sher, Palo Alto; Thompson, St. Helena; Vasconcellos, San Jose.
- Republicans for: McPherson, Santa Cruz; Rainey, Walnut Creek.
- Independent for: Kopp, San Francisco.
- Democrats against: Burton, San Francisco; Lee, Oakland.
- Republicans against: None.

ASSEMBLY

- Democrats for: Brown, Sonoma; Honda, San Jose; Lempert, San Carlos; Mazzoni, San Rafael; Papan, Millbrae; Strom-Martin, Duncans Mills; Sweeney, Hayward; Torlakson, Antioch.
- Republicans for: Cunneen, San Jose; Frusetta, Los Pinos; Leach, Walnut Creek.
- Democrats against: Aroner, Berkeley; Keeley, Boulder Creek; Migden, San Francisco; Perata, Alameda; Shelley, San Francisco.
- Republicans against: None.

Copyright 1997 Chicago Tribune Company
Chicago Tribune -- August 5, 1997 Tuesday

CHILD-CARE DILEMMA: PUSHED OFF WELFARE, INTO OFF HOURS

BYLINE: Carol Kleiman.

Shift work, non-standard work hours and child care.

The interplay of these three workplace issues-- which directly impact employed women--has long been the focus of research done by Harriet B. Presser.

Presser is professor of sociology and director of the Center on Population, Gender and Social Inequality at the University of Maryland in College Park.

Her latest research is a natural evolution of her early work: The interdependence of the success of new laws to move women off welfare and the availability of child care.

"The idea of federal welfare reform is to get women into paid jobs," said Presser, who has a doctorate in sociology and demography from the University of California at Berkeley. She is internationally known for her studies of hours worked and their effects on family and personal lives.

"But without a safety net and without available child care, these women will be desperate."

She adds that in addition to daytime hours, "child care will need to be expanded markedly during non-standard times, including evenings and weekends."

Welfare Reform Daily Report - August 5, 1997 (PAGE 10)

Presser's concerns are based on studies she did with Amy Cox, a graduate student, of 58,000 U.S. households included in the May 1991 Current Population Survey. The monthly research is conducted by the U.S. Bureau of the Census to estimate unemployment.

Presser focused on a sub-sample of 2,671 employed women ages 18 to 34 with a high school diploma or less and at least one child under the age of 14. This profile mirrors women now on welfare, with two differences: Most welfare mothers lack current job experience and the social safety net for them has eroded.

According to the sociologist, more than two-fifths of the low-educated, employed mothers work nights or weekends.

She also points out that "only 56.8 percent of the women work a fixed schedule in daytime employment of 35 to 40 hours a week."

The fact that close to half of the women work a non-standard schedule is what worries Presser. In 1991, less than a third of all employed Americans age 18 and over worked "traditional" hours.

"Two-thirds did not," said the researcher. "And I expect that has gone up."

In particular, she says, it will continue to go up for women in her research profile because the jobs their education and skills qualify them for are in the female-dominated service sector, known for its round-the-clock hours.

"Low-educated women with children work as cashiers, nurses aides, waitresses, cooks, cosmetologists, housekeepers, janitors and orderlies and in manufacturing jobs such as assembling and packaging," Presser said. "Other women, with more education, have more options."

She adds that "most women, including welfare mothers, do work nights or weekends not because they want to, but because it's a job requirement."

Somehow, in the never-never land of politics, legislators--many of whom, as we know, hire nannies to care for their children day and night--expect that welfare recipients will "be able to work it out," Presser says.

With quality child care in daytime hours often difficult to find and pay for, welfare mothers, forced to work non-standard hours, will be between a rock and a very hard place, she says.

"It's harder and trickier at nights and weekends, because most women who work non-standard hours have to have informal child care, usually in their own homes," Presser said. "Unlike women who work traditional hours, the day-care center isn't there, isn't a place you know you can count on."

Instead, relatives such as spouses and grandmothers, she says, are asked to fill in. Particularly the latter.

"But in the research we did, we found that one-third of the grandmothers (mothers of the women studied) were themselves employed," Presser said. "And the working mothers also reported that weekend child care is extremely difficult to arrange and undependable."

If you're not already depressed--and worried--about the fate of children of women trying to move from welfare to work and about the women themselves, the professor cites another chilling finding: A recent study of welfare mothers shows that 60 percent say lack of child care prevented them from working and was their reason in the first place for receiving Aid to Families with Dependent Children.

But now they will have to work.

Welfare Reform Daily Report - August 5, 1997 (PAGE 11)

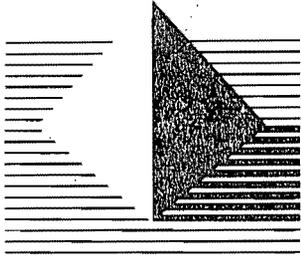
Pointing out that her research shows that low-educated mothers with preschool children are "more than 1 1/2 times more likely to work non-standard hours than are other mothers with preschoolers," Presser asks an important question:

"What does this imply for the care of children if mothers receiving welfare are offered jobs with non-standard hours?"

It's a good question.

Send e-mail to ckleiman@tribune.com.

MORE ON THE INTERNET: Read "Jobs," "Women at Work" and "Your Job" from award-winning Tribune columnist Carol Kleiman at chicago.tribune.com/career



NACCRRA

National Association of Child Care
Resource and Referral Agencies

Teri/Nicole/Cynthia -

It doesn't do
anything for me.

Am I wrong?

June 17, 1997

Eric

Mr. Bruce Reed
Assistant to the President for Domestic Policy
The White House
Washington, DC 20500

Dear Mr. Reed:

Enclosed is a proposal for an event to enhance the upcoming White House conference on child care and to underscore the President and Mrs. Clinton's commitment to American children and families.

We are proposing that the President and Mrs. Clinton take the lead in launching a national day of recognition for child care professionals, which would take place in the spring but which could be announced on the day of the White House child care conference this November. We suggest that Child Care Professional's Day be established by an executive order, and that Child Care Aware and its corporate sponsors provide a "launch event" that enhances the conference.

The National Association of Child Care Resource and Referral Agencies and Child Care Aware, a partnership of leading nonprofit organizations related to child care, are working hard to build a stable, high-quality child care system throughout both urban and rural America and to make sure that parents know how to find good child care. As you know, the need for quality child care extends to millions of American families, and their numbers are increasing as more parents exit the welfare rolls and enter the workforce. As the need for child care in our country grows, the key to success will be adequate numbers of well-trained, highly motivated providers.

Joan Lombardi, Associate Commissioner of the Child Care Bureau, has been quite enthusiastic about our idea of a conference-day event to showcase the work that the President and Mrs. Clinton have done to make life better for American families, and to launch this important day. We hope you will agree that such an event provides a valuable opportunity for the Clinton Administration, and that an annual day of recognition for child care providers will add a permanent insignia to the President and Mrs. Clinton's legacy of commitment to children and families.

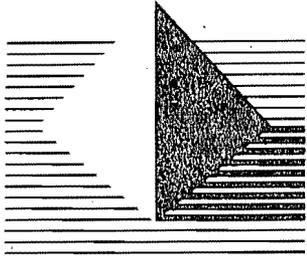
We would appreciate your reviewing our proposal at your earliest convenience, as plans for the White House conference are already underway. Child Care Aware and its corporate sponsors, including General Mills (Cheerios), stand ready to support the President and Mrs. Clinton in their objectives for the conference on child care, and to provide a positively memorable event. Please reply by July 1 to Yasmina at 202-393-5501.

Thank you for your consideration.

Sincerely,

Yasmina Vinci
Executive Director, National Association of
Child Care Resource and Referral Agencies

Tutti Sherlock
Board Chair
Child Care Aware



NACCRRRA

National Association of Child Care
Resource and Referral Agencies

June 17, 1997

The President and Mrs. Clinton
The White House
1700 Pennsylvania Avenue
Washington, DC 20500

Dear Mr. President and Mrs. Clinton:

On behalf of NACCRRRA and Child Care Aware, a partnership of leading nonprofit organizations, we applaud your efforts to bring national attention to child care through a White House conference. Child care and early education are a part of daily life for millions of American families with children. Obtaining stable, high-quality child care will be critical to the success of parents leaving the welfare rolls to enter the workforce, and it will be a key factor in the health and well-being of their children. Clearly, child care issues also affect companies and even government agencies whose employees cannot be productive without the help of child care they can rely on.

We would like to suggest a cooperative effort between your administration and Child Care Aware to initiate a national Child Care Professional's Day, to be announced in conjunction with your upcoming White House conference on child care. When we presented the idea to Joan Lombardi, associate commissioner of the Child Care Bureau, she encouraged us to write to you immediately. We urge you and your administration to take the lead in launching this special day. Working with Child Care Aware to launch a day in honor of professional child care providers will be an opportunity for you to continue building your legacy of commitment to America's children.

Why create an annual Child Care Professional's Day?

- The role of child care professionals in our children's early development cannot be underestimated. As Americans learned from the April 17 White House Conference on Early Childhood Development and Learning, early care has decisive and long-lasting effects on how children develop socially and academically, and how they cope with stress.
- A solid partnership between parents and child care professionals is essential to the quality of child care. Child Care Professional's Day will help parents understand and appreciate the role of child care professionals, thereby strengthening this important partnership.
- Professionalism—that is, training in early child development and education—is linked to the quality of care that our children receive. Studies in the field show conclusively that children do better in programs run by trained, licensed and accredited child care professionals.
- Without loving, trained child care professionals, millions of parents would not be able to work and be productive, or complete their education. The availability of trained professionals to care for our children cannot be separated from the state of our nation's economy or from the success of welfare reform.

- Child Care Professional's Day provides opportunities to showcase skilled, nurturing providers and quality child care settings so that parents will know what to look for when choosing child care.
- Recognizing caregivers motivates them to stay in a field where demand vastly exceeds the supply and where pay can be less than rewarding. Child Care Professional's Day, therefore, will help ensure continuity of care, which is important to proper development in a child's early years.
- Child Care Professional's Day will energize more nurturing, capable people to become child care professionals as welfare reform increases the need throughout the country.

Mr. President, we sincerely believe that you, Mrs. Clinton and your entire administration can build on a legacy of commitment to families by leading the launch of a Child Care Professional's Day. The partners of Child Care Aware in this venture include the National Association of Child Care Resource and Referral Agencies, Child Care Action Campaign, Families and Work Institute, the National Association for Family Child Care, and the National Association for the Education of Young Children.

Most importantly, Child Care Aware has identified a number of corporate and media partners who share our vision of quality child care for all American families. To date, we have partnership commitments from General Mills, maker of Cheerios and other nutritious food brands, the General Mills Foundation, and Scholastic, the world's largest educational publisher. We anticipate that other partners will join this effort, as well.

While Child Care Professional's Day is still in the conceptual stage, we envision a launch that might include the following activities, and we would welcome your input:

- The day would be established by Executive Order during the White House conference on child care.
- The day would occur annually on the last Friday in April, when most children are settled into their child care programs and when no other holiday occurs.
- To help generate publicity for the Executive Order, General Mills will sponsor a Cheerios breakfast on the South Lawn for local area child care providers, children and parents on the morning of the White House conference.
- Child Care Aware will present you and Mrs. Clinton with an award in recognition of your ongoing commitment to the future of America's children.
- We would invite you to make an address focusing on the value of child care professionals who are trained in early childhood development. (Please note: Child Care Aware is a nonprofit initiative funded by corporate contributions and foundation grants. We do not sell or administer child care training programs and have no financial interest in any program.)

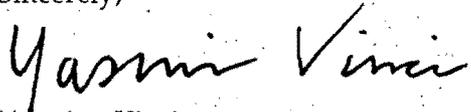
Following the White House conference, we will promote Child Care Professional's Day through the media, as well as on Cheerios boxes and in child care programs and schools. We also are planning a series of local community events throughout the country to prepare for the day.

Mr. President and Mrs. Clinton, we believe that you and your administration will see value in developing a national Child Care Professional's Day to recognize exceptional child care providers. Along with programs to support children and their parents, Child Care Professional's Day completes your well-conceived effort to make sure that every child in America starts out right, with the quality care they need to grow into happy, healthy and productive citizens.

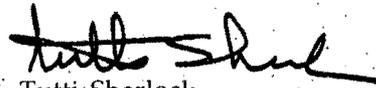
As you read this letter, the Child Care Bureau is gathering support for your plans for the White House conference on child care. Child Care Aware is offering to bring our corporate and media partners together to launch Child Care Professional's Day in conjunction with the conference. Can we count on you and Mrs. Clinton to lead the launch of this important day?

We appreciate your considering this suggestion. Again, we applaud your efforts to ensure the best possible care for each and every one of America's children.

Sincerely,



Yasmina Vinci
Director, National Association of
Child Care Resource and Referral Agencies



Tutti Sherlock
Board Chair
Child Care Aware

cc: Ms. Donna Shalala, Secretary, U.S. Department of Health and Human Services
Ms. Joan Lombardi, Associate Commissioner, Child Care Bureau.

Background Note:

As the consumer education arm of America's network of over 550 child care resource and referral programs, Child Care Aware worked with the Child Care Bureau to design a consumer education leadership forum earlier this year. We also recently completed a manuscript for publication by the Department of Health and Human Services detailing the successes of grass roots consumer education programs initiated and funded by Child Care Aware.

Child Care AwareSM

Informed parents making better child care choices.

Our Mission

To ensure that every parent has access to good information about finding quality child care and resources in their community, through national consumer marketing and by raising visibility for local child care resource and referral agencies.

Our Strategies

Child Care Aware will accomplish its mission by:

1. Building consumer awareness and access to information on the national level, in partnership with retailers and other corporate sponsors, and by
2. Building consumer awareness of the information and services available from local community child care resource and referral agencies.

Our Successes

Founded in 1988 with a grant from the Dayton Hudson Foundation and the Dayton Hudson Corporation, including its three operating divisions (Target, Mervyn's and The Department Store Division), Child Care Aware has successfully accomplished many of the objectives of its original mission, which included pioneering and supporting the professional development and training of family child care providers as well as educating parents to recognize and choose good child care:

- Initiated development of training courses of 15 hours or more for 17,000 family child care providers in 40 local communities, improving the quality of care for over 85,000 children.
- Prompted the *1995 Family Child Care Training Study* conducted by the Families and Work Institute, which found that following training, children were more secure with their providers and more engaged in activities, and overall quality in family child care improved.
- Supported more than 700 family child care providers in achieving accreditation by the National Association for Family Child Care (NAFCC), the highest standard for family child care quality in the country. The providers supported by Child Care Aware account for half of all accredited family child care providers in the United States.
- Conducted parent focus groups in nine cities to better understand parents' values, attitudes and concerns about child care. Results were used to craft messages and identify communication strategies during Child Care Aware's national consumer awareness campaign launched in 1992.
- Established a national, toll-free parent information hotline linking parents nationwide with their local child care resource and referral agencies, and disseminating information about how to recognize and choose quality child care.
- Distributed 7.25 million information-packed brochures directly to parents through the toll-free hotline; through Dayton Hudson Corporation retail stores, child care resource and referral agencies, community organizations, hospitals, churches and schools; and at public events.
- Awarded Consumer Education Grants totaling over \$360,000 for 36 pilot programs in 21 states, designed for replication by community-based and statewide child care advocacy organizations.
- Contributed to articles on choosing good child care in *USA Today*, *Parents* magazine, *Family Circle*, *Working Mother*, *Business Week*, *Fortune* and *The Wall Street Journal*, and to segments on ABC, CBS and NBC network news programs.

Child Care: A Parent's Most Important Consumer Decision

Every day, **10 million to 12 million children below the age of 5** require full-time or part-time child care, for which parents are spending **\$27 billion a year**. That's just for care of children under age 5! The numbers swell when combined with quality care for the **24 million school-age children** too young to stay home alone before and after school while parents work, look for work, or get job training.

According to the New York-based Families and Work Institute, only about one percent of employers in the U.S. offer child care options such as flex-time, on-site child care and subsidized care. That leaves the majority of parents on their own to find quality, affordable child care that will give them peace of mind.

Even when parents do have sufficient information to recognize and choose good child care, they sometimes cannot find it. The solemn fact is that only 9 to 12 percent of child care in America is truly growth-enhancing for children, and that 60 percent is merely custodial—that is, not harmful to children but not particularly nurturing either. The remaining 28 to 31 percent of child care is inadequate care. However, with well-informed consumers comes demand for more and better services—for quality child care as for well-maintained aircraft or low-fat foods.

I remember... calling up the list of licensed day cares, all these names that you know nothing about. There was a [child care provider] in the neighborhood, and I remember going and pinning a note on her door. It was a horrible feeling of not knowing where to turn."

*Parents Speak About Child Care,
Kathy Modigliani, Wheelock College*

Why do we believe that a **consumer marketing approach** can help solve America's child care dilemma?

- ☑ Because in order to reach parents everywhere with the messages and frequency required to change attitudes and behavior, we need to meet them on their own ground: the consumer marketplace. The Child Care Aware toll-free information number must be accessible through popular media and wherever parents go for shopping, personal services, health care, recreation, transportation and worship.
- ☑ Because in focus groups, parents say they feel isolated when looking for child care. When local child care resource and referral agencies become as familiar as the yellow pages, parents will know where to turn for help and will no longer feel alone in their search.
- ☑ Because the quality of child care needs to improve, and economic studies have shown that quality improvement happens only when consumers demand it. We can increase demand by educating parents so that they know what good child care looks like and how to ask for it.
- ☑ Because child care is perceived as a family affair, even though child care issues affect the workplace and community, too. National studies provide overwhelming evidence that good child care contributes to the high self-esteem that helps keep kids away from drugs, early pregnancy and crime. And good child care means a better outlook for our future workforce.
- ☑ Because TV reports about bad or abusive child care do not offer practical advice for avoiding bad care and recognizing quality care. Parents need this information and they need to know about the local resources available to help them.

Child Care Aware is a **privately funded** initiative uniting national nonprofit child care concerns, local child care resource and referral agencies, and corporate sponsors in the effort to create a marketplace of informed parents making better child care choices and driving demand for quality child care. The results, we believe, will benefit not only parents, but also employers and every community.

Child Care AwareSM

YOUR PARTNER FOR QUALITY CHILD CARE

SAMPLING OF MEDIA MENTIONS

CHILD CARE AWARE

Child Care Aware, 2116 Campus Drive SE, Rochester, MN 55904
Phone 507-287-2220 Fax 507-287-2411
e-mail HN6125@handsnet.org

SPECIAL EDITION

YOUR CHILD

Nowweek®

Spring/Summer 1997 \$3.50



From Birth to Three

What You Need
To Know

How Speech
Begins

A Baby's Brain

Genes &
Emotions

What's Normal,
What's Not

Where You Can Turn

BY CARLA KOEHL

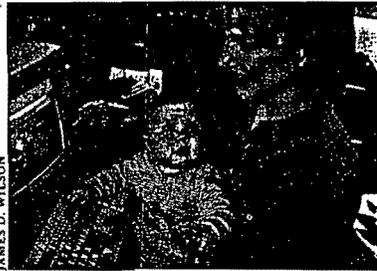
AVID "TELE-PARENTS" WILL TELL YOU THAT THERE'S nothing like a phone jack and 16 megabytes of RAM for navigating the mysteries, hurdles and hassles of life with an infant or toddler. If only you had Net-scape and a 28.8 modem—or at least speed-dial—they'll say, you'd be surfing and dialing your way to parental bliss with all the child-rearing info that's available by PC and phone. Are they batty? No. Just a little excited.

There are now more places than ever to phone for help when mothers and fathers feel parentally challenged. And the explosion of parenting Web sites and newsgroups that's taken place on the Internet over the last five years is connecting families from household to household the way the telephone did for the first time in 1876. Only this time the advance in communications isn't just overcoming distance and isolation. It's conquering stigmas.

Kate Ripley was nursing her newborn in her cabin half an hour outside Fairbanks,

Alaska, when she found an online breast-feeding newsgroup. "I was really lonely," she says. "It was a huge relief." Now that Rory's 9 months, the baby books are hinting that he's eating too often. Ripley's group (misc.kids.breastfeeding) says otherwise. "You don't just want to have someone validate everything you think," she says. "But it's such a variety of voices, you can cull." Even in Los Angeles, where there's no such thing as a remote location, actor Brian Markinson logs on whenever he and his wife are stumped about their 9-month-old. "It's another resource," he says, "rather than call a doctor and feel like you're being a pain."

Technological alarmists, of course, take delight in warning that millions of modem-happy moms and dads will do nothing but produce millions of antisocial, monitor-gazing kids. A reliance on dial-tone parenting, they insist, keeps families, friends and neighbors from trading advice the old-fashioned way: in person. But a glance at all the live, wired interaction out there suggests that, so far, the alarmists are wrong.



Online support: Rory and Kate

On the Net

Usenet

alt.parenting and misc.kids
Great places to start on the Usenet—the Internet's collection of newsgroups—for discussions on hundreds of topics from teething and breast-feeding to pets and snoring. Also, rec.arts.books.children is a 24-hour-a-day book group on children's literature.

Childbirth.Org

<http://www.childbirth.org>
Top discussion forums here, and a home page that gets right to the point on tough issues, including "Pregnancy & HIV," "Having Your First Baby Over 35" and "Complications."

Family.com

<http://www.family.com>
Disney's new site has been criticized for being more upscale than helpful. But their bulletin boards and chat rooms are filled with the voices of intelligent, caring parents. They must be doing something right.

ParentTalk Newsletter

<http://www.tnpc.com/parentalk/index.html>
Clearly written articles by physicians and psychologists. What this site lacks in graphic creativity, it makes up for in sheer mass of information.

ParenthoodWeb

<http://parenthoodweb.com>
Pediatricians and psychiatrists respond (in due time) to your e-mail. Meanwhile, they've posted their stock answers to anything-but-stock questions, including "Did we make a mistake by having a child?"

Parenting Q&A

<http://www.parenting-qa.com/>
This site calls itself the only one on the Web "solely devoted to providing parents with answers to their most pressing questions." It does answer questions faster than most other sites we tried. But it also offers essays on touchy subjects like spirituality, and suggests reading lists for kids, games for rainy days.

ParentSoup

<http://www.parentsoup.com/>
Excellent discussion forums address everything from step-parenting and disciplining closely spaced siblings to premature babies and children with attention deficit disorder.

Zero to Three

<http://www.zerotothree.org>
The Washington, D.C.-based child-advocacy group has just launched its Web site. On it: a wealth of research and information on physical, cognitive and social development of infants and toddlers.

On the Phone

Child Care Aware

800-424-2246
Operators refer parents anywhere in the country to licensed and accredited child-care centers in their area. They'll also send, at no charge, an information packet on how to choose quality child care. Coordinated by the National Association of Child Care Resource and Referral Agencies. Weekdays, 9 a.m.–5 p.m. CST.

ChildHelp National Hotline

800-4-A-CHILD
Twenty-four-hour advice and referrals for children and adults with questions or in crisis. Staffers with graduate degrees in counseling field calls on issues ranging from child-abuse prevention to whether it's normal for a 3-year-old girl to try urinating while standing up. (Yes, says a hotline counselor, it is.)

Gerber Information Line

800-443-7237
Tipper Gore's recorded welcome message jolts you from thoughts of strained peas on this 24-hour consumer-info line (she reminds callers that doctors recommend having babies sleep on their backs). Moms, dads, grandparents—not nurses—work the phones, advising

callers on nonmedical essentials like diapering, sleeping and "lots and lots of questions about food," says one operator. **National Parent Information Network**

800-583-4135
NPIN boasts the largest parenting database in the country. Researchers hunt down referrals, abstracts and answers—and send them free of charge—to hundreds of callers every month. Trouble with toilet training, the merits of co-op playgroups vs. private preschools, baby bowel movements: absolutely nothing is out of bounds here. Weekdays, 8 a.m.–5 p.m. CST.

Parents Anonymous

909-621-6184 (not toll-free)
The national office in Claremont, Calif., refers parents to 45 state and regional affiliates, which offer support groups, counseling, referrals. Weekdays, 8 a.m.–4:30 p.m. PST.

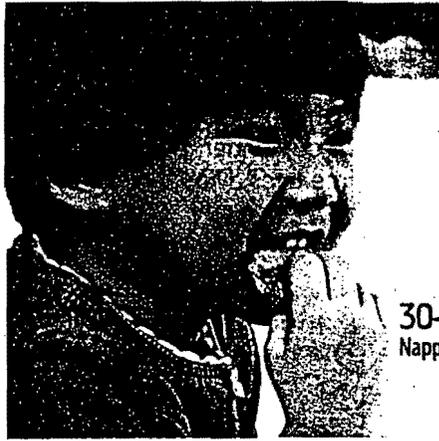
Single Parents Association

800-704-2102
This line, which has just gone national, helps parents find support groups and resources in their communities, fields questions on parenting skills and reminds single parents that they're not alone. Weekdays, 9 a.m.–6 p.m. CST.

With T. TRENT GEGAX

Working Life

child care



30-40%
Napping

40-50%
Singing

60-70%
Getting hugs from teachers
Storytelling
Playing make-believe
Playing musical instruments
Playing in the sandbox
Reading and writing

70-80%
Watching television and videotapes
Taking care of animals
Playing with games, toys, and blocks
Painting and drawing

80-90%
Having a snack
Playing with others
Going to the playground
Going for walks and outings
Making friends

What kids like about child care

When Child Care Aware, a public-service campaign based in Rochester, Minnesota, surveyed nearly 800 4- to 10-year-old children in day-care centers and family child-care settings in 16 states, these were the activities kids said they enjoyed most.

Paying caregivers their due

May 1 is Worthy Wage Day, an annual event held to call attention to the low wages paid to child-care providers. According to the National Center for the Early Childhood Work Force, which sponsors the campaign, the average wage for child-care workers in centers is \$6.70 per hour, and family child-care providers make even less. **In fact, salaries fall below the poverty level for 70 percent of the child-care workforce.**

Caregivers are not the only ones who suffer in this situation: **More than 35 percent of child-care workers leave the field every year, and when teachers come and go, children can't form the stable, secure relationships they need.**

The long-term goal of Worthy Wage Day is to allow workers to be paid what they deserve without increasing the burden on parents. The additional funds would come from government allocations and from corporate subsidies for employees.

You can champion the cause by attending pro-child-care rallies, wearing a button, or participating in teacher-appreciation activities. **To find out what's happening in your area, call 800-UR-WORTHY.**



If you can't manage an occasional romantic rendezvous with your husband because of the cost of sitters, **joining a baby-sitting cooperative**—a group of parents who take turns minding each other's children—may be the solu-

tion. You can't manage an occasional romantic rendezvous with your husband because of the cost of sitters, **joining a baby-sitting cooperative**—a group of parents who take turns minding each other's children—may be the solu-

let in boards at your grocery store, health club, house of worship, and pediatrician's office. Or **follow these guidelines to set up your own.**

- **Advertise for members** by tacking flyers to bulletin boards in places parents frequent.
- **Start with one or two other families** and build from there. **A membership of no more than 24 families** works best, so that administration doesn't get out of hand.
- **Make a master list.** Include children's names and ages, the typical times that the family is available (for example, weekend evenings only), and any necessary emergency and medical information.
- **Ask each family to pay a nominal membership fee** to cover the copying costs for the master list and for chits.
- **Give every family 20 chits,** each worth a half hour of baby-sitting for one child.
- **Official rules and monthly meetings** help things run more smoothly.

Free sitters

tion. There are more than just financial benefits: Your kids (and you) may form some lasting friendships, and you'll have the comfort of knowing that mature adults are watching your children when you're not there.

To find a baby-sitting co-op, ask your PTA if they know of any groups in your area and check bul-

Working 5 to 9

Finding affordable, high-quality child care is hard enough for parents who work 9 to 5, but for those on weekend, overnight, or rotating shifts, the challenge is even greater. Currently, 7.2 million mothers with more than 11 million children need "off-hours" care. Many of these women work in the medical, hotel, and manu-

facturing fields. Though most day-care centers are geared to the rhythm of day-timers, businesses and communities around the country are coming up with innovative solutions.

After learning that workers at a local food-processing plant were leaving their children in their cars to sleep during overnight shifts, the non-profit group Western Idaho Community Action Program persuaded several day-care providers to stay

open longer hours.

In Phoenix, a consortium of employers formed Close To Home, which recruits and trains family child-care workers to watch children at all hours.

Four hotels united to form Atlanta's Inn for Children, a 24-hour-a-day center that serves many shift workers in the city's booming tourism industry.

For help finding care, call Child Care Aware at 800-424-2246 for the number of local resource and referral agencies.

Why pay when you can swap sitting services?



By SIOBHAN FERGUS TOSCANO, EILENE S. ROSEN, AND LYNN GOSNELL

FOR 5, 6, 8, 13, 17, 18, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100



INSIDE

Beginning Your Search *Choosing between in-home care, family daycare, and center care*

It's All Relative *Granny as nanny*

Keep It Legal *Avoiding your own personal Nannygate*

Licensing *What does it really mean?*

The Interview *Quizzing a potential caregiver*

Is Daycare Bad for Babies? *The latest research*

Backup Care *If your infant or sitter gets sick*

Touching Base *Daily debriefings*

In an Emergency *Information to leave*

So Long, Baby *Saying good-bye*

The Daycare Decision

Days with your newborn pass in a blur, and before you know it—probably before you're ready—your maternity leave will be over. Even if you're looking forward to returning to work, it's heart-wrenching to think that someone else will be caring for your little one in your stead, feeding her, playing with her, perhaps even witnessing her first steps or first words.

That's exactly why the search for childcare can't be taken lightly. It's essential not only for your peace of mind but also for your baby's health and development to find just the right person to care for and nurture her, make her feel safe and valued, and, of course, to play with her. Though the task seems daunting, with some homework and some legwork, you can find the best care for the newest member of your family. ➤



Beginning Your Search If you're considering family daycare or center care, you should begin your search as soon as your baby is born. If you plan to hire an in-home caregiver, begin looking for her or her agency. Ask your friends and neighbors and check out local bulletin boards, newspaper classifieds, and the Yellow Pages.

It's All Relative

What could be better than having your mother or another relative take care of your baby? Not much. You know and trust her, and she already loves your little one. So if a relative offers to care for your baby, count your blessings—and then think carefully before you accept. Does she really understand what's involved? Is she willing to make a

long-term commitment? Is she fit and healthy? Finally, did your heart leap at the idea—or did it sink? Be sure to heed your instincts. If



you accept her offer, you'll need to establish the same good communication and clear ground rules you would with any caregiver.

Option #1: In-Home Care



Cost: \$900 to \$2,600 a month. Nannies aren't just for the rich. If you share care with another family or provide room and board in lieu of some cash, even in-home care can fit in your budget.

The Basics Call a potential caregiver to find out about her fee, experience, skills, training, last job, available hours, and mode of transportation. If she's a recent immigrant, ask about green-card status and vaccinations, and make sure there isn't a language barrier.

Next Steps If the phone interview goes well, invite her over for a lengthier chat (see "The Interview," opposite page). Before you hire someone, be sure to call her references and consider contacting your state police office, DMV, and county courthouse to check into a possible criminal background or poor driving record. Happy with everything so far? Ask her to spend a few days with you and your baby (pay her for her time, of course). If all goes well, offer her the job and draw up a contract that spells out her responsibilities, schedule, pay, and holidays, vacations, and sick days (many families offer paid days off).

Advantages

- Highly individualized care
- Scheduling flexibility
- Babies stay in familiar surroundings
- Less germ exposure than other settings
- No drop-offs and pickups
- Caregiver may do household chores
- She may stay with family long-term

Disadvantages

- Little or no regular interaction with other children
- No one there to monitor caregiver
- No backup if caregiver becomes ill or quits without notice
- High burnout rate
- You must pay employment taxes

Keep It Legal

You don't have to be a politician to heed the Nanny Tax. If you're caught paying someone off the books, you'll pay steep back taxes, interest, and penalties. In addition, paying your caregiver legally provides her with Social Se-

curity and unemployment benefits and allows you to use a flexible spending account and claim an Earned Income Credit. If you pay a private caregiver more than \$50 in three months, you're responsible for Social Security and

Medicare taxes. If you pay more than \$1,000 a year, you must pay unemployment tax. For details, call 800/829-1040 and ask for IRS booklet #926.



FROM TOP TO BOTTOM: YAN NASCIMBENE, KEN SHUNG, OAEHRICH/INT. IMAGE WORKS, JOHN KUCZALA

CLOCKWISE FROM TOP LEFT: STEVEN EDSON, YAN NASCIMBENE, ELIZABETH CREW/STHE IMAGE WORKS

center care, you may need to sign up even before your child
 six weeks before you return to work. Where to start? Ask
 parents' resource groups, newspapers, and nanny agencies.

DAYCARE INFO: WHO TO CALL

U.S. Information Agency, 202/401-9810
 ChildCare
 Aware Hotline, 800/424-2246

Option #2: Family Daycare

Cost: \$300 to \$800 a month

For many parents, the next best thing to home is the cozy environment and loose structure of family daycare. **The Basics** Call and ask: Is there an opening? How many children in the home (there shouldn't be more than six)? How many infants (no more than two)? What are the hours? Fees? Is she licensed? How long has she been in business?



How does she balance babies' needs with older kids' needs? How does she feel about nursing visits or handling pumped milk? Can you drop in anytime? Who covers for her? What's her sick-child and late-pickup policy?

Next Steps If you like her answers, arrange a visit. Look for a caregiver who's responsive and affectionate; an environment that is appealing, clean, and safe; stimulating, fun activities; happy children; toys and books in good condition; a napping place; healthy lunches and snacks; an outdoor play space or regular outings to a park or playground. If you're satisfied with what you see, schedule an interview during the children's naptime or after hours.

Advantages

- Warm, homey atmosphere
- Relatively small group
- Mixed ages
- Some scheduling flexibility
- Stimulating play and learning opportunities

Disadvantages

- Little one-on-one attention
- Caregiver may have no formal training
- No backup if caregiver gets sick or takes a vacation
- Home may close during summer
- Caregiver may pursue other jobs



Kids of different ages can get acquainted in family daycare.

What Does "Licensed" Really Mean?

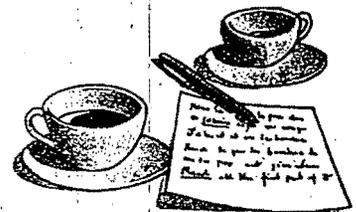
Family daycare licensing covers only health and safety issues, not quality, and no license is required in many states. That's why you'll need to make sure a program meets your own stringent standards.

Daycare centers in every state must meet health and safety requirements. But a better benchmark of quality is accreditation by the National Association for the Education of Young Children (NAEYC).

In-home caregivers do not generally need to be licensed, but some states require licensing for those tending more than two unrelated children.

The Interview

A face-to-face meeting with a caregiver is like a blind date: You're trying to learn enough about each other to decide if you want to pursue a relationship. Since actions speak louder than words, observe how a candidate responds to your



baby as well as how she answers your questions. Then go with your gut feelings. It's vital that you like her and can communicate with her. Standard questions include:

- Why do you work with children? What do you like most, and least, about it?
- What training do you have?
- How long were you at your last job? Why did you leave?
- How long do you plan to stay in the childcare field?
- Are you CPR-certified or willing to learn?
- How do you feel about parents dropping in?
- How do you discipline?
- What do you think babies need most?

FROM TOP TO BOTTOM: YAN NASCIMBENE, KEN SHUNG, DAENNRICH/THE IMAGE WORKS, JOHN KUCZALA

CLOCKWISE FROM TOP LEFT: STEVEN EDOSON, YAN NASCIMBENE, ELIZABETH CREW/THE IMAGE WORKS

Is Daycare Bad for Babies?

There's no easy answer to that question. While experts agree that it's best for an infant to stay with a caring parent, that isn't always an option. How will daycare affect a baby's development? A recent study found that ten hours of quality daycare a week doesn't necessarily threaten the mother-baby bond. But most working families need daycare for far longer than that, and other research isn't too cheerful, either: One study shows that babies who have a succession of caregivers may later have difficulty with friendships and social situations. Another found that up to 40 percent of programs were potentially harmful to a baby's health and development. What's a parent to do? Quality and consistency of care are paramount, so seek out someone trained in

early childhood education or use a center with NAEYC accreditation. But above all, make sure the person you hire is responsive, loving, playful—and committed to staying with your baby. A child can and should bond with her caregiver, so foster a warm, affectionate relationship between them.



Option #3: Daycare Centers

Cost: \$400 to \$2,200 a month

There's no getting around it: Institutional daycare isn't always ideal—or particularly easy to find—for babies. But if you must consider it, look for a program geared toward infant development that's staffed by dynamic, warm, and committed caregivers. After all, any daycare setting is only as good as the people who work there.



The Basics Call the center and find out: Is there an opening? What are the hours and fees? Are there late-pickup charges? Does the center have NAEYC accreditation? How is the staff trained? What's the turnover rate? How many babies per caregiver and per group? (There should not be more than four and eight, respectively.) Does a baby have the same caregiver at all times? Where do infants nap? What's the attitude toward breastfeeding visits and handling pumped milk? Can parents drop in?

Next Steps If you're satisfied with the answers, arrange a visit. Look for a loving, responsive staff who cuddle and play with their charges and who wash their hands frequently; happy children; a baby area that's clean, safe, and quiet; a nurturing environment with room to roll, crawl, play, and explore; and infants who are fed and diapered according to their needs, not a schedule. Finally, ask yourself, would I want to spend all week here? If the answer is yes, schedule an interview with the director.

Advantages

- Must meet state licensing regulations
- May have NAEYC accreditation
- Staff is typically well-trained
- Chance to interact with other babies
- Offers stimulating play and learning opportunities
- May offer extended hours
- No need for backup if caregiver's sick

Disadvantages

- Little one-on-one attention
- Environment can be noisy and chaotic
- High turnover means inconsistent care and lack of continuity
- Exposure to germs can cause illness
- Strict schedules

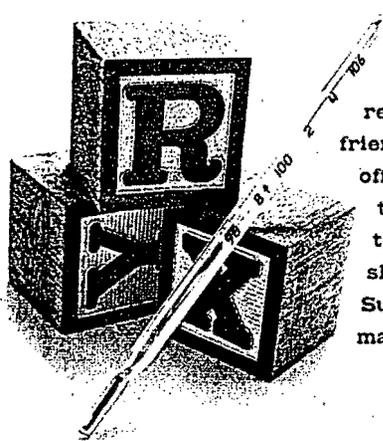


FROM TOP TO BOTTOM: ELIZABETH CREW/THE IMAGE WORKS, YAN NASCIBENE, JOHN KUCZALA

Once You've Made a Decision You've finally found the right person to care for your baby, but your work isn't done. To ensure that they have everything they need, you'll need to consider a few more things:

Backup Care

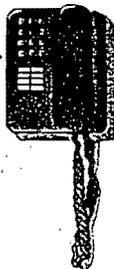
Sometimes, even the best-laid childcare plans fall apart—your caregiver gets sick or quits, or your baby runs a fever and can't go to daycare. Since you may not be able to take time off work when this happens, make an emergency backup plan long before you need it. Can you call a nearby relative or stay-at-home friend? Does your employer offer emergency childcare? Is there a local sick-child center or agency that provides short-term, in-home sitters? Such care isn't cheap, but it may be the only option.



In an Emergency

Leave behind clear, written instructions along with a signed, dated letter giving the caregiver permission to obtain medical care for your child. Daycare centers and homes keep this information on file. For in-home care, post the following near the phone:

- Your home address and phone number
- Your full name, work address, and phone number, as well as your spouse's
- Your pediatrician's name and phone number
- Your baby's full name, birth date, and medical conditions or allergies
- The names and phone numbers of alternative contacts if neither parent can be reached



Touching Base

At the end of the day, employed moms need to know: Was baby happy? How much did she eat? When did she nap? And most important, is this setup working out? That's why daily debriefing sessions are so important.

Having a meaningful conversation, however, is easier said than done with a group-care provider, whose attention is understandably diverted during hectic pickup times. If you want more than a thumbnail sketch of baby's day, you'll probably have to schedule a dis-



A few words at day's end can make a big difference.

ussion or ask her to keep a daily log of baby's meals, diaper changes, naps, and overall mood. For in-home care, use the last 15 minutes of the nanny's shift to check in with her about your infant's day. Other keys to keeping the lines of communication open: Give your caregiver a chance to ask you questions; tell her what you expect; and let her know she's appreciated.

So Long, Baby

Leaving your new baby may be harder for you than it is for him. It can be terribly disorienting to return to work: Everything is essentially the same, but you've changed dramatically. And even as you settle back into the office, your mind will be on your baby. This is perfectly normal, and a good caregiver will expect your frequent calls during those first few weeks.

But even before then, ease yourself and your infant into the arrangement. If you're bringing him to a group setting, spend a few days together there. He'll gain confidence in his new surroundings and you'll feel more comfortable with the program. If you hire a nanny, have her start a week early so she has a chance to acquaint herself with your baby, your home, and your routines.

As you and your baby become accustomed to the new setup, both of you will thrive. And when you see him blossom, you'll know you've chosen his care wisely and well. ☺

CLOCKWISE FROM TOP LEFT: JOHN KUCZALA, ELIZABETH CREWSTHE IMAGE WORKS, YAN NASCIMBENE

By ANNE FIELD

Finding child-care programs to call was easy: You asked other parents, checked bulletin boards and local newspapers, asked your pediatrician for a recommendation, and even called the Child Care Aware Information Line (1-800-424-2246) for a resource and referral agency in your area. After phoning them all, you've narrowed down your options to just a few.

Now comes the hard part. To truly evaluate the quality of a program—be it family day care or a day-care center—experts say that an in-



Good caregivers sit down on the floor with the kids.

respectful and nurturing they are," says Janet Kahn Scolaro, a child and family therapist with South Nassau Communities Hospital, in Baldwin, New York. Providers should sit on the floor with the children rather than talking to the tops of their heads, or at least bend

er than insisting that a stove is used only for cooking.

Experts say you should leave your child at home for the first observational visit, so that you won't be distracted by taking care of her needs.

While you're watching the prospective provider in action, here are some other factors to note.

Environment. When a room is organized with distinct sections for different activities, it helps provide a sense

located away from the general play area.

For hot days, some kind of water relief is essential. "It doesn't have to be high-tech," says Scolaro. "Even a hose will do."

Staff changes. Ideally, you should observe every caregiver your child will be interacting with, so you may need to go back several times if there are staff

How to be a day-care



Separate play areas keep children safe.

Experts give pointers for spotting signs of trouble.

terview with an administrator or even a caregiver isn't enough. "You've got to spend a half hour in the room," says Jerlean Daniel, Ph.D., president of the National Association for the Education of Young Children, in Washington, D.C. "If a caregiver isn't warm and attentive to the children, she can't fake it for that long." Hearing a lot of "No, don't do that," rather than more skillful attempts at distraction, is a tip-off that you should find another arrangement.

"In well-run centers, caregivers take a child's-eye view. It tells you a lot about how

down when they give directions. "Caregivers should also look like they're having fun and be willing to go with the flow of a child's imagination," says Scolaro. If a child wants to pretend that the toy stove is a space shuttle, the caregiver ought to encourage the game, rather

of structure for children and a framework in which they can take advantage of stimulating activities. They will be more likely to play cooperatively if there is one area for blocks, one with a play kitchen, one with a table for art projects, and a quiet area where older children can read, rest, or just be alone. Age-appropriate toys and games should be accessible to kids, not stored where they can neither see nor reach them. Similarly, wall decorations and children's artwork ought to be positioned at a kid's eye level.

Children also need an outdoor space where they can run, jump, and let off steam. There should be a separate area for riding tricycles and other vehicles, and swings should be

ing of the guard as many as five times in one day.) In order for an infant to receive optimal care, there should be no more than one primary caregiver assigned to him. "A baby needs to know there is someone he can count on," says Barbara Reisman, executive director of the Child Care Action Campaign, in New York City. If a shift change is unavoidable, make sure the same person relieves the primary caregiver each day. If your child is a toddler or preschooler, you should select a center with no more than two or three shifts per day. Regardless of the number of caregivers, if they seem exhausted or burned out, continue your search: If you sense their dissatisfaction, so will your child. **Safety essentials.** Make sure the caregiver or center has taken the same types of precautions that you would



Kids need a place where they can escape the commotion.

WORK & FAMILY

By SUE SHELLBARGER

Costly Camps Put Many Parents in Bind For Summer Day Care

MANY WORKING parents in Patty Miller's area of the Midwest this summer are arranging a rich mix of activities for their kids: art, science and computer camps and theater and environmental-studies programs.

But for Ms. Miller's 12-year-old daughter, summer offers little more than a demand that she grow up too soon. She'll be staying home, caring for her 10- and 11-year-old siblings, because Ms. Miller, an administrative staffer at a nonprofit concern, can't afford the summer programs in her town. "I feel like I'm letting my kids down," says Ms. Miller, a single mother who makes \$12,000 a year.

She hates leaving them alone and knows it's risky and hard on them, "but I don't know what else to do. There's nothing out there I can afford." The \$150-a-week tab for sending her children to camp would eat up most of her pay.

Amid the summer rush by working parents to plan activities for school-age kids, a nagging problem is getting quietly but inexorably worse: The gap between haves and have-nots, worrisome enough during the school year, widens into a chasm when schools close in June.

High-end summer camps in special-interest areas ranging from space travel to Shakespeare are booming, says a 16-state survey by Child Care Aware, a nonprofit Rochester, Minn., child-care improvement and referral concern. But lower-cost programs that suit less-affluent parents' budgets and work hours are scarce.

One result: Staffers I interviewed at six nonprofit child-care resource-and-referral agencies across the country see signs that the number of children left home alone is rising. The agencies are getting more calls from parents asking when they can legally leave kids alone. (State laws vary; while some specify an age, usually 10 to 12, others set no limit.)

CHILD-CARE affordability problems "are particularly acute in the summer," says Barbara Reisman of the nonprofit Child Care Action Campaign, New York. Day-care-weary children ages nine and up often resist going to day-care centers or having a sitter; the recreational programs they like average \$100 a week and range from \$50 to \$700, Child Care Aware says.

"I went to an ivy League college, and I'm paying for four weeks of camp what my parents paid for a year of college" in the early '70s, says a New Jersey mother, whose son is spending a month on a Vermont lake for \$2,200.

Some inexpensive programs are being cut. Palm Beach County, Fla., officials eliminated summer school this year for 11,000 children through eighth grade. And government child-care subsidies, for parents like Ms. Miller, often don't apply to summer programs not licensed by the state.

Good, affordable, full-day programs are packed, in Charlotte, N.C., parents bearing sleeping bags

start lining up at 3 p.m. the day before signups begin to get a slot in Mecklenburg County's 571-a-month camp. "We could easily double the enrollment" but lack funds and facilities, a spokeswoman says.

There isn't any data over time on kids in self-care during the summer; the latest national sampling, in 1990 by the Urban Institute, found 19% of children ages six through 12 are left alone at least part of the time in summer, usually for short periods; self-care was the primary arrange-



Carol Lay

ment for 2%. But the population of kids six through 13 has increased 8.4% since then, and a growing percentage come from single-parent or dual-earner families.

Self-care can be risky; in Detroit, officials report a 25% summer rise in residential fires caused by children left alone. Beyond that, it seldom yields the idyllic, Tom Sawyer-like experience of fishing and hanging out enjoyed by kids in the past; today, many parents forbid kids left home alone to even leave the house.

THE CHILD CARE Resource Center in Tulsa, Okla., has been getting urgent calls from parents each June for help finding child care. "They say, 'We were going to do self-care and it's just not working,'" says the center's Sharon Bentley. She says parents spend a lot of time on the telephone with kids who are frightened or bored and want to leave the house.

It's a wasted opportunity, too. Summer learning directly affects school performance, says Joan Bergstrom, a professor at Wheelock College, Boston, and author on educational issues. The 11- to 13-year-old age range is crucial for developing qualities, such as self-reliance and resourcefulness, that foster success in adulthood, she says.

"It's really important to feel good about yourself and get competent in something around 11, 12 or 13."

Once again, a few employers are proving a source of creative solutions. The American Business Collaboration, a 156-employer group, is helping finance more than 100 community summer camps, including 81 programs on an Olympics theme.

In New York City, a partnership of 10 employers organized by Child Care Inc., a resource-and-referral group, is planning to expand community programs for kids.

In Livingston County, Mich., where 10,000 more summer child-care slots are needed, Citizens Insurance Co. of America helps fund community recreation programs.

"We know we're not going to get more funding from the government for these programs," says Linda Herbert of the county's Community Coordinated Child Care Council. "We're really looking to employers," collaborating with community agencies, for help.

© 1996 Dow Jones & Company, Inc. All Rights Reserved

Enterprise: Exporters set the pace among fast-growing small firms

Page B2.

Advertising: D'Arcy Masius rescues N.W. Ayer with acquisition

Page B2.

THE WALL STREET JOURNAL

MARKETPLACE

Technology: IBM studies unbundling Notes for possible Internet use

Page B4.

Technology: SystemSoft to unveil self-help software for PC users

Page B4.

WEDNESDAY, JUNE 19, 1996 B3



YMCA

We build strong kids,
strong families, strong communities.

June 17, 1997

Ms. Joan Lombardi
Associate Commissioner, Child Care Division
Administration for Children, Youth, and Families
200 Independence Avenue, SW, Suite 320F
Washington, DC 20201

Dear Joan:

It is with great excitement and anticipation that I submit to you the YMCA of the USA's Concept Paper on the White House Conference on Child Care, per your request. It is our hope that this document will prove useful to you in planning the conference.

The purpose behind our concept paper is to demonstrate to you our investment in child care and our commitment to the White House conference. In developing the paper, we focused attention on the following key areas related to the conference: theme, duration, message points, audience, principle players, objectives, format, topics, conference outcome, and a role for the YMCA of the USA. For each of these areas we provide a broad overview; we welcome the opportunity to discuss the ideas in more detail with you at your earliest convenience.

We look forward to hearing from you soon.

Sincerely,

Edén Fisher Durbin
Assistant Director

Enclosure

cc: Cynthia Rice
Special Assistant to the President for Domestic Policy

Jennifer Klein, Senior Policy Analyst
The White House

Lauren Griffin, Special Assistant to the Deputy Assistant
Secretary for Human Services

YMCA of the USA • Public Policy • 1701 K Street, N.W., Suite 903 • Washington, D.C. 20006

202-835-9043 • toll-free: 800-932-9622 • fax: 202-835-9030 • <http://www.ymca.net>

YMCA mission: To put Christian principles into practice through programs that build healthy spirit, mind, and body for all.

INTRODUCTION:

At a time when the child care needs of America's families are growing, evolving, and somewhat unpredictable, the public and private sectors must work together to identify creative ways to expand and improve quality child care. As the nation's leading non-governmental providers of child care, YMCAs are committed to developing partnerships with government agencies, businesses, and other organizations toward the goal of improving child care policies and delivery services. This fall in Washington, D.C., the White House will convene representatives from government agencies, community groups, the business and independent sectors, child care advocates, and researchers to participate in the White House Conference on Child Care.



YMCA

**We build strong kids,
strong families, strong communities.**

THEME:

The YMCA of the USA believes that the theme for the conference should be both inclusive (early childhood and school-age; center-based, school-based, family home day care, and corporate care) and visionary (child care as an investment in our future). Also, we should seek to highlight the importance of high-quality care in developing strong kids, strong families, and strong communities.

The YMCA of the USA respectfully submits the following conference themes for your consideration:

- **Child Care 2000: Meeting Needs of Families in Changing Times**
- **Child Care 2000: Developing Strategies, Identifying Solutions**
- **Child Care 2000: The Opportunities Ahead**
- **Child Care in Changing Times**

DURATION:

A two-day conference.

MESSAGE POINTS:

The YMCA of the USA believes that it will be important for the conference to promote three (3) clear, concise messages: high-quality child care is important; child care should be available and affordable for those who desire it; and comprehensive, full-service child care should be a goal of all child care programs. Furthermore, each conferee has a role to play in ensuring the success of these three goals.

- **High-Quality Child Care.** All children in child care deserve a high-quality program, including those from low-income communities. One of the strengths of YMCA child care is that it brings together families and children from different socioeconomic classes, cultures, and experiences. This interaction helps children develop their social skills and appreciate their differences as well as their similarities.
- **Available, Affordable Child Care.** High-quality, affordable child care should be available for all working families. However, attaining such a goal will require a commitment of resources from a variety of areas, including: government, nonprofits, and businesses. YMCAs recognize that we must all do our part to make this vision a reality. That is why numerous YMCAs combine government funds, private dollars, and YMCA scholarships to increase access to high-quality YMCA child care for all families regardless of income level.

- **Comprehensive, Full-Service Child Care.** The importance of comprehensive, full-service child care cannot be overstated. Child care for the 21st century will be anything but traditional. If current trends are any indication, the demand for child care for special-needs children and the need for child care during nontraditional hours will only increase. Child care providers will have to become more visionary in designing child care programs that meet the needs of the changing American family.

AUDIENCE:

The audience for the conference will determine its scope and depth. Specifically, the content of the conference's workshops, plenary sessions, and working groups will be influenced by the participants. Who are we attempting to influence? What behavior are we seeking to change? What behaviors would we like to foster? The answers to these questions and others could also help determine the conference's impact and how it will be highlighted in the media.

The YMCA of the USA encourages the Administration to involve the following groups as part of the conference's primary audience:

- **Providers.** Any conference on child care must include the perspective and expertise of those who work on the front lines: child care providers. Therefore individuals, organizations, and agencies that represent the following child care providers should be invited to participate in the conference: early childhood providers; center-based providers; school-age center and school-based providers; Head Start; and family day care providers.
- **Community Agencies.** Community agencies also bring a unique perspective to this discussion. The potential for collaboration and support between child care providers and community agencies is enormous. Toward the goal of building partnerships for improved child care quality and delivery, representatives from the following agencies should be integral players at the conference: youth development agencies that provide child care services, the family resource and support community, and elementary education agencies.
- **Government Agencies and Officials.** Given the significant role government plays in child care policy development and funding allocation and distribution, the perspective of federal, state, and local government agencies and officials should be considered. These pivotal government agencies and officials include: the President, Congress, Governors, State Legislators, Federal and State Departments of Education and Health and Human Services, and Mayors.
- **Business Leaders.** Business leaders also recognize the importance of child care. Such umbrella organizations as the American Business Collaboration (Work/Family

Institute) and the U.S. Chamber of Commerce should be considered – both as potential collaborators and funders – in planning for the conference.

PRINCIPLE PLAYERS:

The principle players for the conference should add expertise and credibility. They should also be able to provide representation from among their membership. Each of the principle players should be invited to play a role in planning and facilitating the conference.

The White House, the YMCA of the USA, the American Business Collaboration, the National School-Age Care Alliance, and the National Association for the Education of Young Children should make up the principle organizers for the conference.

- **The White House.** The White House would bring instant credibility and stature to the conference. Indeed, the President has the opportunity to raise tremendous awareness about the challenges and opportunities facing our nation's child care system. This conference would also give the White House the opportunity to reconfirm its commitment to improving the lives of children, families, and communities.
- **YMCA of the USA.** YMCAs deliver quality child care and collaborate with other providers and community agencies to provide comprehensive programs and services for children and families. YMCAs provide child care to diverse communities. In addition, integrated into YMCA child care programs are the character development principles of caring, honesty, respect, and responsibility.
- **American Business Collaboration.** The American Business Collaboration is a business strategy intended to increase the supply and quality of dependent care services. The Collaboration would add an often unheard voice to the chorus of those seeking to raise awareness about the importance of child care: businesses. Such companies as AT&T, IBM, American Express, and Eastman Kodak are among the Collaboration's members. The Collaboration recognizes the important role child care plays in employee productivity, retention, commitment, and morale.
- **National Association for the Education of Young Children.** The National Association for the Education of Young Children (NAEYC) is a membership-supported organization of providers, advocates, and educators committed to fostering the growth and development of children from birth through age 8.
- **National School-Age Care Alliance.** The National School-Age Care Alliance (NSACA) is the professional organization that represents school-age child care (SAC) professionals, providers, and advocates. NSACA members are comprised of SAC providers who work directly with school-age children, child care directors

who administer SAC programs, youth-serving agencies, not-for-profit and for-profit entities, local and state agencies with children as part of their mission, educators, and any individual interested in the well-being of children and youth.

OBJECTIVES:

The YMCA of the USA firmly believes that it is vital to identify several objectives for the conference. Conference participants, presenters, and the general public need to understand what the conference is intended to accomplish.

We recommend focusing on the following objectives:

- **To Educate and Inform** families, providers, educators, funders, policymakers, and others about the child care field;
- **To provide a forum** for child care providers, funders, and policymakers to **Network, Plan, and Collaborate** about how to improve child care policy and service delivery;
- **To provide a venue** for child care providers, funders, and policymakers to **Share Successful Models** of effective, efficient child care delivery;
- **To Offer Technical Assistance** to child care providers;
- **To Develop Partnerships between Government, Businesses, and Nonprofits** toward the goal of improving the quality of child care and expanding child care delivery.

FORMAT:

This is the part of the conference where the work actually gets done. The YMCA of the USA believes that the most effective way to both communicate information and have interactive participation between conference participants is to prepare a conference format that combines:

- **Working Groups** on specific topics. Working groups should contain a combination of child care providers, policymakers, educators, and potential funders. In addition, each working group should be charged with a specific task. For example, one working group could be asked to create a model child care delivery system, while another could focus on how to deal with the issue of providing child care to poor and low-income families.

- **Workshops** on individual issues. Workshops could be conducted on a number of topics, including: early childhood, school-age, special-needs, child care during nontraditional hours, and developing partnerships.
- **Plenary Sessions** that focus on child care trends. These sessions would bring together all conference participants and would be a good time to promote the conference's broad themes.
- **Child Care Information Forum** that would give researchers, educators, providers, and others an opportunity to share information with conference participants in an informal environment.

TOPICS:

The appropriate topics will add substance to the conference format. The YMCA of the USA recommends the following topics and potential presenters for your consideration:

- **Funding.** This is always a popular topic at child care conferences. The *U.S. Department of Health and Human Services, the National Governors' Association, and the American Business Collaboration* could assist in this area.
- **Staff Retention and Compensation.** The changing and developing child care workforce should be of concern to all of us. The *Center for the Early Childhood Workforce* could assist in this area.
- **Collaboration.** With limited funding for child care programs for poor and low-income families, it will require collaboration between the various child care providers to meet the growing demand. The *YMCA of the USA, the National Recreation and Parks Association, and the National Association of Elementary School Principals* could assist in promoting program models and the benefits of collaboration.
- **Quality.** The importance of quality child care programs cannot be overstated. Both the *National Association for the Education of Young Children* and the *National School-Age Care Alliance* understand this and could assist in this area.
- **Research and Evaluation.** How can we prove the benefits of high-quality child care? Research and evaluation. The *Carnegie Corporation of New York, Yale University's Bush Center, and the High Scope Foundation (Ypsilanti, Michigan)* could offer great insight into this area.
- **Training.** One way to improve child care quality is to adequately train child care providers. Both the *Wellesley College School-Age Child Care Project* and the *YMCA of the USA* have extensive experience in training child care providers.

- **Advocacy.** The recent welfare reform debate on the national and state levels demonstrated the importance of effective child care advocacy. Seasoned veterans in this arena include: the *Children's Defense Fund*, the *Child Care Action Campaign*, and the *YMCA of the USA*.

CONFERENCE OUTCOME:

The YMCA of the USA recommends two specific activities to complement the conclusion of the conference.

- Provide a written summary of the conference. This summary would not only clarify any proposed strategies developed during the conference, but it could also serve as an information resource for those who were not able to attend. In addition, a conference summary report would go a long way toward garnering widespread support for the conference's objectives.
- Issue a call to action. A call to action would encourage conference participants and observers to take action once they return to their individual communities. For example, conference participants could pledge to take specific steps to improve child care quality, accessibility, affordability, and availability in their local communities.

YMCA of the USA:

Throughout this concept paper, we have attempted to demonstrate our investment in child care and our commitment to the White House conference. In short, YMCAs have great insight and experience in the child care profession, and we would like the opportunity to work closely with the White House on this conference. But beyond our ability and desire to host workshops and ensure conference participation from YMCA child care and community development professionals, we are also prepared to partner with the White House in the following ways:

- Provide YMCA child care centers for site visits by conference participants. There are several YMCA child care programs in operation throughout the Washington, D.C., metropolitan area. Conference organizers and participants could visit one of our model YMCA child care programs. In addition, our facilities could be open for press conferences related to the White House conference.
- The YMCA of the USA and the White House could jointly seek foundation and corporate funding support for the conference. A joint application for funding from the government and a private nonprofit might receive favorable attention. Any decision on whether or not to pursue this course would have to be made soon, given that the conference is scheduled for this fall.

June 24, 1997

Ms. Yasmina S. Vinci
Executive Director
National Association of Child Care
Resource and Referral Agencies
Suite 810
1319 F Street, N.W.
Washington, D.C. 20004-1106

Dear Yasmina:

Thank you for your supportive letter regarding my Administration's efforts to address the important issue of child care. As you may know, we have announced plans to sponsor a White House Conference on Child Care this fall. I appreciate knowing of your thoughts on the quality of the American child care system, and I have shared your letter with my staff in the Domestic Policy Council.

As my Administration works to address the important issues facing our nation's working families, I'm glad to know of NACCRRA's commitment to creating a quality child care system. I look forward to your continued efforts on behalf of our nation's children.

Sincerely,

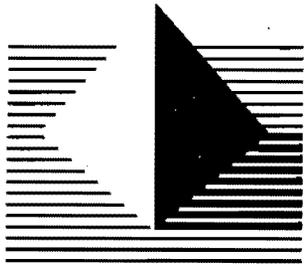
BILL CLINTON

BC/DIA/RSM/lynn-emu
(6.vinci.ys)

(Corres. #3549649)

cc: w/copy of incoming to Cynthia Rice, 212R
cc: w/copy of incoming to Jen Klein, 2FL/WW

219232



NACCRRA

National Association of Child Care
Resource and Referral Agencies

May 6, 1997

The President
The White House
1600 Pennsylvania Avenue
Washington, D.C.

Dear Mr. President:

Thank you for the interest and support of quality care for our youngest children and for the recognition that the quality of early care and education we provide for them is a critical national and local issue.

On behalf of NACCRRA's 550 community-based member organizations, who have worked long and hard to create a quality child care system with extremely restrained resources, I welcome your direction to the Secretary of Defense to use "lessons learned from the Military Child Development Programs to improve the quality of child care".

At the recent Brain Development Conference, the First Lady alluded to the fact that the child care community holds ubiquitous, yet varied views on the delivery of quality child care. There is consensus, however; among the child care community of experts, that quality results are achieved primarily by setting standards and providing the financial resources needed to meet the standards. This is precisely what delineates child care available to the military and that available to civilians. For a long time, the civilian child care community has labored valiantly to offer quality services, but without a fair and just level of support from federal, state and local communities. Instead, unfortunately, we have had to ask the parents of our youngest children to shoulder most of the responsibility for funding the child care system.

I firmly believe the military child care system offers valuable lessons appropriate to the community at large--and they are simple:

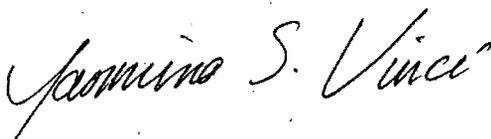
1. Identify federal funds to compensate child care workers at levels appropriate to their responsibility and training--as the military does.
2. Identify federal funds to provide subsidies for parents whose income does not allow for a quality care choice--as the military does.
3. Set high standards and provide the resources necessary to meet them, and enforce those standards--as the military does.
4. Maintain a child care infrastructure which will offer referral and subsidy to parents, training and resources to providers and data to inform planning for child care needs.

MAY 14 1997

Although it is well known that all child care is local (to paraphrase the late Tip O'Neill), we agree that federal involvement is needed. Fortunately, the federal government already has the infrastructure for quality child care in all of American civilian communities. The Child Care Bureau in the Department of Health and Human Services interacts with the child care administrators in every state, and they in turn support local child care efforts with available state and federal funds. Adding the resources available to the military into this system will be a great help.

As a representative of a 550 community-based child care resource and referral program nationwide who support all the stakeholders in the child care system--- parents, providers, employers, funders, and planners-- I have requested Secretary Cohen to offer assistance and cooperation in carrying out your directive in communities across the nation. Lastly, it would be a tremendous help to these communities, who know firsthand the intricacies involved in the delivery quality child care, that we arrange a meeting to discuss cooperative efforts.

Sincerely,



Yasmina S. Vinci
Executive Director

c: Hon. Ted Kennedy
Hon. Donna Shalala
Hon. William S. Cohen

encs.

6/30/97
Child Care

→ to what extent include rural

→ will it include dialogue

→ need dialogue and action

- need follow-on after conference
- not just one day

→ providers
researchers

→ information

→ education link

→ why important, to invest

→ working families use child care every day

→ what do they have access to?

→ ~~what~~ how can it show child care better?

→ launch campaign to ensure children well-
Cared for in child care

→ pledges

and concrete monitoring

→ standards so 40% not in
adequate care

→ wide segments of society business - cares

→

→ link to education + literacy
a piece of winning strategy
this is piece of bridge

→ can't pretend it's not expensive

→ investment fund to improve quality
→ public + private
→ high level commission

→ Happen in communities @ same
time as had said

→ About working America

→ not specific categories
of people

→ During WWII, when we needed it,
found

closed 50 yrs. last yr

NY + CA kept them open

→ Working families need help
+ children deserve this attention

→ For families, child care more expensive than
college (? as % of income) NY + CA

→ Silent customer = employer
ABC group

But most people work for small cos w/o cc

→ 5 Key things parents should look for
in child care - quality

Ways the whole community can pay for it

→ Need to talk about child care and education
not child care "quality"

It is a drama

- people representing America
- those who can sell to others
- ~~what people~~
- investment pledged

→ Commitment to solve financing dilemma behind child care

10-20 yr roadmap infrastructure

→ takes financing as seriously as Medicaid & S-Security

→ Child health, parental involvement and child care together

→ Healthy Child Care America Campaign

could prepare people in each state

→ Satellite to key players around country

→ Talk about the solutions

→ Include govts

→ Tell locals

you should have core
w/in

→ Put \$ on table

→ challenge states to private to
ante up

→ media blitz

→ private \$ divorce spend for themselves
(economically)

→ child care as system

→ need investments in facilities
and child care workers

→ hopeful agenda

→ need sense of what a quality ch. care
system would cost — give us sense
of scope (like inter-state highway system)

[Volnovich will be chair of NCA this]

→ What's different about this conference?

- creating demand for quality
CC part of development process
- create strong support from middle class

→ should follow through
another conf - one or 2 yrs later
(80 people are accountable)

→ should spawn other conferences
govt - "hot one in their states"

→ outcomes

fed state ostentatious toward new investment
Resources from many sources

→ Workbook for people to take back to
their communities → focused,
specific tools / homework
assignment

→ have to have private voices

→ get commitment in advance
→ programs
→ foundations

→ how to engage small business

→ well over 1000 people working together

→ Bring in unlikely allies

- business

- unions

→ commitment to develop a system

→ Launch vision of what good health care is
6 elements

→ Together we need to _____

→ challenge those results

→ give blueprint

→ Follow up 6 months later
- reporting back in

→ Homebased conferences

→ bring certain answers before
to the carb.

→ health partners

→ help parents as much w/ child care as we have for college

→ Analogue - 9 years ago, no goals for education
- best in world

→ Go for internet!

- ~~the~~ #1 in world in child dev't
- blueprint - help determine how you local match up

→ Launch a 1,000 ships

→ Fed role

= set templates

= keep a watch

→ How child care can make child care indicators look better

→ Schema, first → not just self-interest

→ What can Census 2000 do?

Child care conference

6/27

child care

Don't push to usual suspects

→ Don't push to converted

→ bring in those who are not converted

~~One we~~

Link to education

→ need to talk openly about public investment

→ not like when POWS didn't talk about military model give \$ for quality

Not "just another conference"

→ like GSA, in private co. can't afford

Negative view of "child care"

Conference should have a product

→ not very many quality centers or staff

Not seen as field that's valued + respected

People who go into "early childhood"

"only stay a few years"

→ How to incentivize good people to go into and

stay in child care - started coming 3-4 yrs

Resolution to more forward motion systems
of childcare

Recognition of staying young people going into
child care - change the perception
of field

PONS should tie to education
2 yrs of educ should be
2 yrs before school

Child care is not babysitting

Philadelphia model

- summit

- convergence of non-profits
+ CEOs

Should talk not just about ch centers
(only 20% of kids)

would like PONS
to move

they don't
have compete

- away from DOD model

- away from welfare moms

Should focus on Family Med Care Act
Set of Commars should be front + center

→ Don't leave school behind

→ Even businesses

→ leave out low income employees

→ Don't ignore the fact that \$ is key

→ 50% of being cared for better matters

→ we should not ignore them

→ we should redefine

POTUS change

→ charge private sector to come
up w/ way to finance Nat'l system

characterization DETC (#5000)

varied cap

EITC + advanced → people aren't using it

→ not user-friendly

→ claim on 1040E2

→ Have to talk about parental leave

→ Expand DETC ^{→ \$11,800} _{→ index for inflation} → Expand EITC

→ Make it refundable

→ Higher credit for accredited

↳ In Arkansas → will not do it

Eisenhower grants for math + science
to doctors → use for child care

Layout what other countries do

→ what do they spend

→ what do they get?

"good child care is competitive business"

Public awareness campaign

→ what parents need to know

→ public media campaign

Education from infancy on up

and parental involvement

→ need to provide support +
education

Use physical capacity of school systems

Child Care Investment Fund - NY State

state fund matching private \$
(Abroad)

Challenge states re 3-4 yrs old

Curriculum down to infant

→ child care is not baby sitting

Flaw no vision that if we don't do
this, we will have a national
disaster → create fear in us

[Parent role models]

Child doesn't start until kindergarten

→ more recognition that children are
valuable - changing tables

→ Commerce, Labor, Treasury
needs to be front & center

Sept 15-16 Walling Matter CEOs

Child Care Foundations

- Rationale system to help
people pay for quality care

Core

- Get point across = quality matters
w/ importance of welfare reform

- Broaden to include adolescents
+ pre-adolescents

correlation - amt of time unsupervised
w/ bad grades

Kids bored / want to spend more time
w/ parents

Public Agenda survey - S things
they want for their kids

White children twice as likely to be
unsupervised as black + latino

Conference - should be about strengthening
child dev't, empowering parents,
mobilize communities
public education

Heley
Tayor
Assoc
Dir
Head
Start

Economic effects of child care

MD

→ on going work

→ 4 counties in Calif.

→ build support

Maryland Center has C/B study too

Goal = bring more people to table

- Not just child providers

- Include business

[Military]

[Workforce of troops]

How do we raise to level of seriousness

→ D.W. Brain, scientists, scholars

Our challenge

→ economists / parents /
business people

- Undo negative views of parents

- This one has to look more bipartisan
and more usable business community
than last time

- Governors

- More structural changes

- Comprehensive / comprehensive systems

GA

MD

CT

NY

- Highlight commissioners who've done so much

- Advocate focus on younger age

- People need to walk away knowing
why "quality is important"

→ red structural

→ community driven design

→ Pittsburgh

→ intersection / non-intersection bet

• child care + Head Start

• child care / parental leave

12 week

→ Add message - do this for all kids

→ regardless of work status

→ regardless of age

→ plight of child care worker

→ women starting child care pieces

→ Launch Nat'l Campaign

public-private partnership

around key

leverage fund
around quality

Fund fed w/
state

private

parents

matching

1) public educ -

series of messages
on quality

2) best practices to encourage
quality + work freedom

3) commissioner

4) competitive legislation

to promote community coordination
mobilization

Dilemma
→ how do we keep child care
affordable + affordable

Bring Sr. like Bob Ball to table
→ innovative financing

Messages Fed gov't sees this as top priority
Traveling our economy relies off
on ~~that~~ both parents working
children not getting adequate
→ Radical statement of conviction ^{care}

→ Look at how we support care

→ Have work done before the summit

\$50 billion

→ changing demographics of welfare

→ millions of kids born to age 18
w/o care

American Business Coalition
should be highlighted

Welfare - Govt role

→ universal Head Start 4 year old
" " pre-school ed

→ research initiative of some sort
(NICHD)

Lay out what federal gov't already does
through IRST tax cuts, Family Leave

~~Make use of \$ govt~~

Not just for welfare reaps

POTUS - target towards families "squeezed"
working poor

POTUS should focus on
quality infrastructure

Highlight

These are key issues

- Here are ones govt can do

- Here are ones where others
must act

Not Oct 13-14-15 Fdn

Oct 6-8 PBA

6/18

Child Care #1

- should be broader than child care
- include education, health, people

- Talk about child care across a wide age range - not just before sociology

- Child care → broader - include rec activities, etc - more universal focus

- Remember quality / staff ratios

- Think systemically about cc + early educ

= Best = plan for integrated educ/cc → 20 yrs
We have state blue print can't

- How to build a skilled workforce infrastructure
- child care a job / a profession

- Look @ gaps

- show good faith w/ 1st step initiative

- Janet Wise
Nat'l Institute on Children, Youth & Families
- Jeanne Brookes Gunn
Center for ICo
- Link Kogan (Sharon)
Yale Univ

- have to look @ potential funding

- look @ system holistically / in context

Smart Start

→ Edgar \$500M to build one

→ not pilot projects

→ Kansas City

for dedicated to keeping
schools open

NO model

But pieces

By showcasing what's

→ something parents pay
attention to

→ we know parents in the 6th
insane wrap of juggling
lives

→ across income ~~lines~~ lines

→ ~~the~~ educ on what
quality is

[Solution]
[Consumer Reports type]

Beginning to build public will for
→ societal norm that

Highlight what other countries doing

→ child care not problem poor people alone

→ quality child care counts

→ qual cc = g early edue

→ to achieve quality

- cooperation

→ system integrated twoly

→ \$ to help parents fill the gap

→ benefits to employers of having g
on-site cc

→ benefits to them

"Child care keeps America working"

→ a lot women work Companies < 50 people
Employers need to support public efforts

Employers should work @ cc, like
schools, parks in community

→ launch America on a vision
toward the future
national issue / under-addressed

'Child care and early education'

→ Fed. Gov. now

→ challenge gov / mayors / bus

→ longer term

→ tribes

Can govts buy in before

→ make announcements

Follow-up regional mtgs

Open Budget fights

More \$ and demand strategic plan
from each growth

- what to do over next 10 yrs
- Commitment next 2 yrs
Down payment

Down payment + pay off mortgage over time

Skill involved in providing quality care

Need to value the work of working w/ children
as much as working w/ investments

[Welfare law - undermines this
child care as would be
common sense]

Parents have to find ability in the day
to pay attention
parents find other parents credible

down payment on America's Future

→ Child care essential

Cost Quality & Outcomes Data (Yr)

will be ready

Child care teachers - real providers

- panel w/ diff types

6/19

M Bandette
Apffords bill

- DCTC refundable
- bigger credit
- some link from DCTC to accredited ones

Expect drop in the way in July
~~Expect heavy~~

Golden

Sgt thinks

- should make large investment
sign - focus on working families
- \$1 bi/yr kind of idea
- comprehensive, affordability, quality
link to education
- Sit down w/ Education [Mike Smith]

- DCTC - expand/refund ← certain pops
← enhanced match

- Expand CCDBG

- Scholarship idea

- Connection to quality
? - more middle income

Tradeoffs

DCTC - lots of people get it,
but only get a little \$
" "

30% → 20% of cost

Q: will it increase the # of people
getting child care

Before After School

CCDBG - up to age 13

+ - Existing simplified
system state vary

- - A lot of state flex

(2)

Before After School

Community learning centers - DOE

- DOJ

Quality

\$ for programs for training

family child care networks

Military models

Head Start models

CDA credential created by feds

Next Steps

- HHS get up paper next wk

- Later bring in other folks

- Educ

- Treasury

- ? Labor

- Ag

- child care
food

- #

June 16, 1997

Mr. David R. Mercer
National Executive Director
Public Policy Department
YMCA of the USA
Suite 903
1701 K Street, N.W.
Washington, D.C. 20006

Dear David:

Thank you for your supportive letter on our announced plans to sponsor a White House Conference on Child Care this fall. I have shared your letter with my staff in the Domestic Policy Council.

I'm glad to know of the YMCA's commitment to quality child care and appreciate your continued efforts on behalf of our nation's children.

Sincerely,

BILL CLINTON

BC/DIA/RSM/lynn (Corres. #3549277)
(6.mercer.dr)

cc: w/copy of incoming to Cynthia Rice, 212R
cc: w/copy of incoming to Jen Klein, 2FL/WW



YMCA

We build strong kids,
strong families, strong communities.

218904

May 9, 1997

President William J. Clinton
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear President Clinton:

It is with great interest and enthusiasm that I write regarding recently announced plans to sponsor a White House Conference on Child Care this fall. As part of our commitment to promoting quality child care for America's working families, the YMCA of the USA would like to partner with the White House on this event.

YMCAs are privileged to be one of the largest providers of school-age child care in the nation. Collectively, YMCAs provide quality school-age programs to more than 300,000 children a year in over 8,000 sites nationwide. With respect to preschool, YMCA full-day preschool programs serve nearly 50,000 children. To put these figures in perspective, more than 1 in 10 children in school-age care are at a YMCA program. YMCA child care also reflects the ethnic diversity of our nation. Our school-age child care program enrollment is two-thirds white, 18 percent black, 10 percent Hispanic, 5 percent Asian, and 1 percent American Indian. The numbers are similar for preschool. Twenty percent of the families who use our child care receive some type of subsidy assistance directly from the YMCA.

For years, Americans have looked to our federal government to help in times of need. But we have come to realize that government can only accomplish so much and that there are times when individuals and individual organizations must step in and help out. It was in this spirit that the YMCA of the USA pledged to recruit 190,500 new program volunteers over the next three years as part of our commitment to last month's Presidents' Summit for America's Future.

In addition to our pledge, the YMCA is already working to meet a number of the priorities you set forth for your second term. For example, in support of your America Reads initiative, the YMCA of Greater New York is in the midst of a collaboration with the New York City Board of Education. Known as *THE VIRTUAL Y*, this collaboration seeks to address the low reading scores of many of New York City's school-age children. Not only is this initiative targeting low-income communities, but it will also concentrate on improving the reading scores of second, third, and fourth graders. The program will soon be in one out of four New York City public schools.

YMCA of the USA • Public Policy • 1701 K Street, N.W., Suite 903 • Washington, D.C. 20006
202-835-9043 • toll-free: 800-932-9622 • fax: 202-835-9030 • <http://www.ymca.net>

YMCA mission: To put Christian principles into practice through programs that build healthy spirit, mind, and body for all.

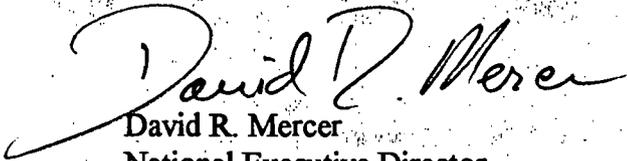
President Clinton

May 9, 1997

Page 2 of 2

I cannot stress to you enough how important this child care conference is to us. I sincerely hope that we will be granted the opportunity to play a major role in this effort, and I look forward to receiving your reply. In the meantime, if you have any questions or concerns, please do not hesitate to contact John Brooks in our Washington, D.C., office at 202-835-9043

Sincerely,



David R. Mercer
National Executive Director

cc: Ms. Donna E. Shalala
U.S. Secretary of Health and Human Services

Mr. Richard Riley
U.S. Secretary of Education

Ms. Joan Lombardi
Associate Commissioner, Child Care Division, Department of Health and Human Services

Ms. Jean Nelson
Director, President's Crime Prevention Council