Outlined are components believed to be critical to fostering the development of a comprehensive child care system in Massachusetts: delivery models, curriculum development, staffing, professional development, cost, affordability, and policy. Child care delivery models are discussed in terms of present delivery models, problems in the delivery system, and requirements for creating more effective delivery systems. Curriculum in child care is discussed with regard to types of curricula. The discussion of staffing and professional development in child care focuses on training and ongoing professional development for child care providers, and a recommended requirement for improved curriculum and staff professional training. The discussion of cost options explores requirements for creating affordable child care. Included in the discussion of policy recommendations is a proposal that the public school systems of the state be seriously considered as the units responsible for organizing, administering, and providing child care for children from 6 months through 5 years of age. (RH)
Problems and Policy
Caring For Children in the Commonwealth:
Problems and Policy

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Executive Summary

Economic and social changes over the past four decades have wrought a revolution in the care and raising of young children. Today millions of mothers of young children are choosing work outside the home over the traditional role of homemaker. Firmly established and accompanied by an expansion of career paths open to women, this trend will continue for years to come.

The United States has not kept pace with other industrial countries in meeting the needs of working parents for child care. The focus of this paper is how the Commonwealth of Massachusetts has responded to the growing demand for child care. Reflecting the federal government's inadequate child care policy, the Commonwealth currently offers a fragmented, uncoordinated system of private and limited public care that serves neither children, parents nor the public well. As educators and concerned citizens, we believe that assuring the healthful nurturance of our children through a coherent, quality child care policy is essential to the future of Massachusetts and the nation.

After our eighteen-month study of child care services in Massachusetts, which included interviews with users and site visits by experts in child development, the authors of the report recommend that a comprehensive child care program be organized and supported through the public school systems of the Commonwealth. We are convinced that this would provide a viable educational child care system that combines economy, accountability and quality in curriculum. The following paper offers concrete proposals for school-based child care and for instituting specific requirements for organization, licensing, curriculum, staff development, training programs and funding of such a system.

The authors of this report are fully aware of the changes that a school-based child care system will entail at the state and local level. However we believe that
developing a safe, secure, healthy child care environment for our Commonwealth's children requires such a statewide approach.
I. **Introduction**

For tens of millions of women who have joined America's work force, providing for the care of their small children has become both an economic and social burden. Yet our public institutions, both national and local, have been disturbingly slow in responding to their problems and needs. Over 100 years of child study show that we cannot continue to ignore the dilemma of the growing legions of women whose financial responsibilities toward the economic welfare of their families have drastically changed their child-rearing role. Furthermore, the level of child care received by children today will determine not only their individual quality of life but the future well-being of our nation.

Since the end of World War II, major changes have altered the family environment in which young children are raised. The most significant has been the increasing role of women as major income providers for their families. Between 1940 and 1984 the percentage of women in the country's work force doubled, from 24.5 to 54.2. What's more, unlike the 1940s and '50s, women no longer withdraw from the labor force in large numbers during their peak fertility years of 25 through 34. In addition to having fewer children (15.7 per thousand in 1985 vs. 19.4 per thousand in 1940), most working women now remain in their jobs during their child-bearing years, even while their children are under age 6. In 1985, for example, 53.2 percent of women with pre-school age children were in the labor force compared with just 3.6 percent in 1950. From 1976 to 1984 the number of women in the work force who were over 30 and had borne a child in the previous year jumped from 28 to 52 percent.

Three main socio-economic forces have precipitated these marked shifts in the number of working mothers in the United States: the increase in women as single heads of households; the reduction in the median family income in households dependent on a single wage earner; and the impact of the woman's
movement. Rather than suffer a steady erosion of family income due to inflation or declining take-home pay, or lose the opportunity for career advancement, married women and mothers have looked for employment outside the home and have sought assistance from public and private child care services.

In searching for child care, however, parents confront a fragmented, private and semi-public system that fails to meet the varied needs of children ranging from infants to pre-schoolers to elementary school students. This incoherent system lacks common standards of organization and staffing, services, and cost. In most American communities parents exploring child care options encounter these three alternatives:

- Private care by an individual who may or may not meet any licensing or educational requirements or even operate according to even minimal city and state regulations.
- Private group care offered by a non-profit or for-profit organization. These child care vendors are often over-subscribed and expensive. What few government-sponsored subsidies are available to these groups frequently carry restrictive eligibility requirements and funding limitations.
- Employer-sponsored child care that is expanding but usually limited to large corporations or business centers such as shopping malls. Business support consists of vouchers, tax deductions, and referrals more frequently than it does of development in on-site facilities.

Except for those eligible for low income subsidized programs, families seeking child care generally incur stiff costs. anywhere from $60 to as much as several hundred dollars per week in some cases. (Policewomen on swing shifts have had to pay as much as $300 a week for child care). For the most part, state
subsidies for individual child care have been adequate, however low, but not enough subsidy has been available. In Massachusetts, for instance, participants pay fees based on income, and number in family and fees paid can range from 40¢ to $16.50 per day per child. Nationally, most working parents are still struggling to obtain and pay for child care with little or no assistance from either the public or private sector.

Studies of other major industrial societies indicate that the United States lags behind in the funding and provision of child care services. What is responsible for the disparity in the commitment to child care between the United States and these other industrialized nations? The answer has both a social and political dimension. Traditionally, Americans have considered parents solely responsible for the care of their children prior to entering school. When national manpower needs demanded more women in the work force during World War II the federal government did commit resources to child care; but when the war ended funding for child care dried up.

Even as more women began re-entering the work force after 1950, predominately male legislative bodies ignored the impact on child care. Many middle and upper class families could afford private child care arrangements or nursery school programs. Meanwhile, the working women most in need of child care services, those from poor and minority backgrounds, remained politically unorganized and exercised no influence on the nation's legislative agenda. In effect, America's political institutions for too long remained out of touch with the country's changing economic realities as they affected working women, their children, and their families.

Many American women have locked to the nation's schools as the institution best suited to house and provide community child care services. The American
school system, however, has tended to resist adding child care to responsibilities. Extending its educational function to include child care we mean altering opening and closing times in accord with parent work schedule, modifying facilities to accommodate the needs of pre-school children, and hiring specialized staff to oversee and administer child care programs. Fearing higher costs and increased local taxes school administrators, with the backing of many local taxpayers, have successfully opposed incorporating child care services into the school system.

In many states, including Massachusetts, public child care programs, even those with an educational component, have developed under the auspices of federal, state, and local government agencies separate from the public school system. Principal among them are bureaus or departments of health and or welfare agencies. Non-public day care providers, in addition to corporate employers and private individuals, have been churches and other charitable institutions.

Thus divided among a variety of public bureaucracies and private organizations, the child care community has not been able to develop in the state a coordinated strategy to serve the socially and economically diverse constituency of working parents in our communities. The pressing concerns of financing, placement, staffing, licensing, and education for child care, however, can no longer be put off. Long range, integrated solutions to the child care quandary of millions of American families, must be pursued at the state and federal level.

The authors of this paper outline four components that we believe are critical to fostering the development of a comprehensive child care system in Massachusetts. We present them under the following headings: Delivery models,
II. Child Care Delivery Models

The need for child care in Massachusetts has expanded in response to the demands of a changing and growing economy. In earlier times child care was either a part-time nursery school "play" experience, a part-time lab school with a focus on training teachers, or full day care for welfare and poor children. Since World War II there has been a slow but steady extension of child care services to include a growing population of middle-income working parents. As this shift has occurred, the need for a coordinated and comprehensive system has grown. Yet Massachusetts is still without the kind of child care system that can serve the needs of all its families.

"Child care" has been defined as being any community or work-related program that is designed to meet the mutual needs of parents and children. This broad definition encompasses federal and state legislation, tax benefits, information and referral services, parental leave, in home and out of home care, school related programs, sick care and vacation care.

Although Massachusetts has no coordinated system of child care, the care available does include all these options. Nevertheless the provision of child care too often depends on the vagaries of diverse educational approaches and administrative mechanisms. The wide array of child care programs frequently is of mixed quality, insufficient in numbers, and not affordable for many, especially those in the low and middle income category.
An examination of this present system will help to identify the basic criteria for establishing a coordinated system of high quality, affordable and adequate child care that still allows for parent choice and diversity.

A. Present Delivery Models

All of the models of care described below can function separately or as part of a more comprehensive system. The combinations vary in each community across the state and programs usually develop in response to a particular community need. Each of the following models may meet the requirements of families at different times in the family life cycle. The major difficulty for families is finding the necessary combinations of care that are affordable, accessible, available and of good quality.

1. Home Based, Non-Group care

This category covers one or more children from the same family who are cared for through private negotiations with individuals. It is usually the option of affluent families or for families who are part of an extended closely knit family.

a. Maternity/Paternity leave

The United States as yet has no national policy for providing adequate paid leave and job security for new parents. In the private sector company leaves can range from one month to a year and from no pay to full pay. Most companies tie job security to a negotiated leave and any subsequent changes can jeopardize job security. State employees in Massachusetts are granted 6 weeks of unpaid maternity leave. There is no provision for paternity leave. Company policies vary widely but many are moving toward granting some leave time and/or...
job security. The Federal government is also considering legislation
granting workers in companies of 15 employees or more up to 18 weeks
of unpaid leave for birth, adoption or the serious illness of a child. A
General Accounting Office study indicates that this policy "would not
impose a serious burden on American business."
b. Relative/Friend care

There are families who can use relatives or friends to care for
their children. The care can be paid for or not and is outside any
monitoring system. Resources for this form of care are dwindling as
more women enter the work force on a part-time basis.
c. In-Home care

Some families bring a caretaker into their home. This is an
expensive option and is therefore limited to upper income families.
There are now schools that are training "nannies" for this employment.
Many of these nannies are from other countries and hired on short term
work basis. The new immigration work laws will have an impact on
the cost and availability of this source of care.

2. Center/Systems Based Care

The programs in this category include care for children from age one
month through school age, provide part-time and/or full time care, and are
funded from a variety of sources. All these programs confront problems of
lack of space, inadequate funding and shortage of qualified teachers. In
general, there is a drastic shortage of infant and toddler care in
Massachusetts and very inadequate school-age care, especially for before
school hours, and vacation time. What care exists is of varying quality and commonly suffers from high staff turnover.

a. **Nursery School**

   This form of care is usually for children, age 2-4, for 3-4 hours a day and generally follows a school year calendar. It is often used by a parent who is at home but wants their child(ren) to have a group experience. It can also meet the needs of some part-time employees. These schools are licensed under the same regulations as full day programs. These regulations govern staff qualifications, child/staff ratios, administrative requirements, building safety and fire regulations and program description.

b. **Laboratory schools**

   Like nursery schools, laboratory schools are frequently part-time. They operate less than half a day, usually not every day and their chief purpose is to train teachers. Most children are age 2-4 and are enrolled for a play experience and not to meet a parent's work schedule. These schools do not need to be licensed but usually exceed licensing requirements.

c. **Family day care**

   This is care provided in a private home for up to 6 children (including the provider's own) no more than 2 of whom under present regulations may be 2 years or under. Family day care providers may be independent, part of an association of family day care providers, or part of a child care system that provides support services. All family day care providers must register with the state licensing agency. However, in reality there exists an extensive underground of unregistered child
care providers. Issues of safety and quality care are of grave concern in these operations. The Commonwealth is now attempting to increase the number of licensers to monitor Family Day Care Homes and ensure that all providers become registered. Problems cited among independent providers include lack of substitute care and vacation care as well as in-service training and general support systems.

d. **Center based care**

Center based child care is usually full day and operates on a calendar year. These programs vary widely in location, design, educational philosophy and fiscal support. The age range is from infant (1 month) to 5 years and may include kindergarten and after school care. Infant and toddler care is in short supply and very expensive. All center based programs must be licensed. Different regulations may apply, depending on the funding source.

e. **Headstart**

Headstart centers may be either part-time or full-time. They are government subsidized and established to meet the needs of A.F.D.C. families. A strong component of the program is parent participation and training. A variety of family support services are also included. The programs are for preschool children and are licensed by the state.

3 **School-based care**

There are a number of child care programs that are connected to public schools. These include:

a. **School age child care**
Programs for school age children cover child care before and after school and during holidays and school vacations. Some programs are located in the schools but many are community based. They are on a separate fiscal system from the regular school programs. Licensing regulations are being developed to assure safety and health standards and to establish educational criteria. Care can range from kindergarten age through sixth grade.

b. **Teen-parent child care**

Some schools are now providing care for the children of students during school hours. In most programs the student's school curriculum will include training in parenting skills. The program will provide family support services, which are very expensive and are funded (inadequately) in a separate line item in the state budget.

c. **Kindergarten**

Traditional public school kindergarten is for 2.5 hours a day in either the A.M. or P.M. session. This schedule is totally inadequate for most working parents. As a result, some children spend the rest of the day in an extended day program provided at or near the school. These programs need to cover both before school and after school care and all school closings and vacations. Where school based programs do not exist or are full, or provide only half-day when parents need a full day, there is a severe problem of supplying transportation to an alternative site. Boston is now running a pilot program that includes child care centers on the school bus route. As now designed, kindergarten programs in the state are neither adequate in hours of service nor responsive to the broader care needs of working parents. None of the
above options deal effectively with two very significant types of care that are often needed.

4. **Emergency and off-hours care**
   a. **Sick care/emergency care**
      Systems are being considered across the country to deal with this problem. It is a new area but must be part of a comprehensive system. Some employers are allowing sick days for caring for family members, other states and communities have designed programs that provide trained caregivers in the home or within a hospital/health care setting. Cost factors and limited personnel resources have sharply restricted this form of care.
   
   b. **Evening weekend care**
      There are many professions that demand working shifts over a 24 hour period. Nurses, doctors, maintenance workers, police, to name a few. Slowly, programs are being implemented that deal with their child care needs. Coordinating use of space, materials and equipment is complicated, and because the demand is not uniform it entails greater cost per student.

B. **Problems in the Delivery System**

Problems with providing child care do not only affect parents. Those who provide services face a variety of obstacles, such as daunting paperwork, conflicting guidelines and standards and a sluggish bureaucracy. Anyone wanting to operate a child care program must contact many agencies, and process applications through departments that are often understaffed and undertrained.

A list of agencies that one potential child care provider must contact are:
• The Office for Children (O.F.C.) licensing,
• Department of Social Services (D.S.S.), Title XX contract programs,
• Voucher Agencies-child care funding for Employment Training (E.T.) participants,
• United States Department of Agriculture (U.S.D.A.), all food subsidies,
• Foundations,
• Employers.

Some of these agencies require, in addition to their own criteria, inspections from other agencies such as the Department of Health, the Building Department and the Fire Department. Each of these departments has its own set of guidelines, limited staff to expedite the process and an additional fee for services, (i.e., the inspection).

Several examples of the regulatory maze that potential child care providers must negotiate include:

1. **Contradictory regulations**

   Child/staff ratios for preschool children is 10:1 for O.F.C., and 8:1 for D.S.S. Since O.F.C. is a licensing agency and D.S.S. a funding agency, this presents a conflict between budget considerations and licensing standards. Differing interpretations of the regulations also may produce complications that jeopardize the ability of the program to provide quality care and continue in operation. These interpretations can affect any aspect of the program such as staff qualifications, record keeping or safety/health regulations.

2. **Lack of program continuity**

   The State Budget for 1988 includes a large increase in funding for voucher slots for the Employment Training program, but the appropriation
did not coordinate with the existing slots offered in Title XX funding through D.S.S. Voucher clients, in theory, move into D.S.S. slots at the end of a year. There is presently a shortage of basic care slots. To increase voucher slots without increasing regular D.S.S. slots is to raise demand in an already overloaded system and disrupt the continuity of child care services. This discontinuity, in turn, endangers the economic stability of the family since child care may not be guaranteed after one year.

3. Inflexible regulations

The current age definition of infants, toddlers, and preschoolers also hampers child care. According to regulations, when a child in an age category reaches the upper limit for that category, he or she must move to the next age group. However, all children do not mature at the same rate and some children need more time in a younger age group. In addition, since slots open up in programs on a seasonal cycle, not the birth date of the children, many families' lives are disrupted when a child has to graduate to the next age category but there is no available space. This sort of a system does not promote economic and social stability for either parent, child or program.

4. Bureaucratic red tape

The present system is so overloaded with paperwork that it takes over addressing substantive child care issues. Licensers check files, floors, equipment, and paper qualifications/requirements, but almost never observe a classroom. Teacher qualifications are based on documentation for courses and verification of employment but there is no system to evaluate the quality of teaching. Training is required for staff (2 hours/month) but few resources are provided and few practical training models are available to
programs. Teachers are expected to interact with children for 7-8 hours/day for low pay, allowing no time for inner renewal, reflection, observation and analysis. No support system exists for program personnel in most centers and no encouragement from the Commonwealth’s agencies for obtaining qualified personnel or keeping them.

5. Monitoring

Although the state makes an attempt to monitor quality, this is largely confined to setting minimal standards. In response to this problem, which is nationwide, the National Association for the Education of Young Children has developed criteria for quality child care standards and is developing a system for accreditation that may be used by all child care programs. Such a system is badly needed in the Commonwealth and a plan for its implementation.

C. Requirements for Creating more Effective Delivery Systems

The final report of the Governor's Day Care Partnerships Initiative (1985) stated that a comprehensive child care delivery system was essential in Massachusetts to assure that families achieve economic self-sufficiency, that economic growth be maintained and that families in crisis receive needed assistance. The Governor's Partnerships Initiative report states that child care is no longer viewed as a social service for the needy only, but rather is regarded an essential service for the economic and social well being of all families in the Commonwealth.

In order to meet the goals of the Partnership Initiative, we propose a child care delivery system that has the following requirements.

1. Extent of Care
A comprehensive delivery system must include a variety of programs, with the resources and flexibility within the variety of programs so that all working parents/hours are covered, (i.e. a full 40 hour/week including transportation time, part-time work, flex time/evening care and “seasonal” employment). Sick care, maternity/paternity care, emergency care and vacation and holiday care are integral to this comprehensive system. Care must be assured for all ages of children from birth through 8th grade.

2. **Eligibility**

Child care must be available to all parents whether employed, in training programs, or in attending school.

3. **Cost**

Government studies indicate that the cost for child care should not exceed 10 percent of family income very few families needing child care fall within this cost range. This problem of “affordability” must be addressed and will require fiscal commitment from businesses, cities, towns, states and the federal government.

4. **Location**

Child Care should be available in private houses, schools, public and private buildings, family day care homes, churches and businesses. Each community should have a wide range of programs that allow for coordination, (example: school buses bringing children to after school programs or family day care homes), so that families can arrange a schedule of care that meets their needs.

5. **Standards**
The standards applied to all delivery systems must guarantee a safe and healthy environment for children, adequate funding for qualified personnel, equipment, and resources and educationally defensible curriculum.

Present policy in the Commonwealth does not meet the above requirements.

III. Curriculum in Child Care

The specific type of planned activities that occur in child care settings constitute what is called the program's curriculum. A curriculum requires a set of goals or objectives and an activity and design plan to accomplish them.

Ideas about child care curriculum have undergone considerable change. In the past, many people believed that early child care should primarily provide pleasant and safe custodial care. Today, as the result of extensive practice and ongoing research in child development, we have widened the scope of such care to address the environmental setting and developmental stages of children that are now deemed integral to a productive child care experience. Accordingly, child care providers and parents are showing increasing concern for the educational and developmental learning opportunities that can and should occur in early child care settings.
A. **Types of Curricula**

The concern for curriculum has spawned a variety of often conflicting approaches. A review of the types of curriculum that are currently offered in child care settings found curricula based on the development principle of providing psychologically safe and happy play settings; others influenced by the learning theory that stresses learning stimulation to children from disadvantaged homes; and still others that reflect middle class achievement values by preparing children for reading and computing. Since centers are often sponsored by private groups, religious organizations, corporations or state or federal agencies and can be subject to specific public or private funding priorities, it is not surprising that the curriculum tends to be shaped by the values and priorities of the sponsors of the program.

A national survey of day care centers by Westinghouse in 1983 revealed at least 56 identifiable types of curriculums among 200 center-based programs responding to the survey. The survey did identify four discernible trends among these 56, but stressed that trend variations made such categorization suggestive rather than descriptive. The four major types of curriculum trends identified were:

1. "**Developmental**" curricula which emphasize activities to stimulate or reinforce the physical, emotional, and cognitive development stages of the child.
2. "**Learning theory**" curricula that focus on how children learn through various activities, e.g. through various sensory modalities, reinforcement of responses.
3. "**Readiness**" curricula that prepare children, especially toddlers, to master the traditional school tasks of reading and computing.
4. "Structured play" curricula that place children in a play environment to stimulate them and enhance their activities.

A number of the programs surveyed combined all four of these elements.

It is difficult to assess which of these four types of curriculum is most effective. As yet research is inconclusive because most child care providers do not incorporate a structured evaluation into their programs. Preliminary longitudinal data does seem to suggest that having a planned curriculum is preferable to mere custodial care, and that curriculums that emphasize developmental approaches are growth enhancing for children. In addition, we have discovered that some important learning modalities of the young child, i.e. direct experience with objects preceding verbal instruction, are effective for most children. And it is evident that structured early learning accompanied by stimulation programs enlarging the child's experiences are very effective for economically disadvantaged or developmentally delayed youngsters.

Most significantly, the data reveals that parental involvement and understanding of the purpose of curriculum activities in child care settings is important to a program's success. Despite these initial findings about effective curriculum approaches for early childhood programs, there is as yet no national or state policy regarding the primary content of child care programs.

Programs offered in centers differ significantly from those in home settings. Home settings, or family child care with relatives or a neighbor, is the common alternative for infants and children under two. Since family day care is mostly an entrepreneurial cottage industry with few regulations
and almost no supervision, the major goals are primarily keeping the children safe, well fed, and busy. The same Westinghouse Study (1983) found, in fact, that most home settings follow no formal curriculum at all, just an understanding between the care-giver and the parent on what is expected in the normal daily routine. Family child care might incorporate some of the activities of a developmental or structured play curriculum, but most often it offers little more than babysitting.

IV. Staffing and Professional Development in Child Care

The Westinghouse study also yielded important information regarding staffing of child care centers and how it can affect the curriculum. The likelihood that centers or home providers would utilize more structured early childhood curriculum packages was directly related to their level of training and salary. Those providers with a degree or certificate in early childhood education were much more likely to introduce curriculum based on the work of developmental psychologists. They tended to know more about educational planning; how to set goals, develop plans, and coordinate activities effectively. It is not surprising that these staff were better paid, although their salaries were still low compared to other elementary teachers. Such staff usually worked in privately-sponsored centers, or laboratory schools specifically funded for teacher training and experimentation with certain curriculum materials and approaches. Staff with a lower level of training and pay, on the other hand, were more involved in public programs that offered basically custodial care to welfare or disadvantaged families.
While there are examples of child care settings with low budgets that offer creative and effective curriculums, child care centers that offer a focused and planned curriculum usually invest more in staff and materials.

A. Training and Ongoing Professional Development for Child Care Providers

Implementing an effective and quality curriculum requires effective planners. Unfortunately while most child care staff have some background in child development or training in early childhood education, the requirements in the areas of organization and planning are minimal. In Massachusetts an individual can be a center based childcare provider with only 12 credits of course work and 36 months of previous work with children. A person can become a family day care provider without course work or experience and by simply meeting the space and safety regulations of the Office for Children. Once a person is hired in Massachusetts to work in a childcare setting, ongoing training is encouraged and (two hours per month) supported by the Office of Children in collaboration with local colleges and universities.

In effect, while many child care staff in Massachusetts do have a degree in child development and substantial educational training, centers for child care are generally staffed by an undertrained and underpaid workforce. The Commonwealth, if it is to have quality child care services, must ensure that well trained staff are required in all child care settings. Currently the state agencies lack a coherent policy for child care staffing and credentials.

B. Requirement for Improved Curriculum and Staff Professional Training

Given the demonstrated correlation between the quality of child care curriculums and that of the staff who design and administer them, the state devise
an overall curriculum policy and initiate consistent professional standards for all child care providers. With this in mind, the following recommendation are made:

1. That the state mandate professional qualifications for child care providers and establish appropriate salary guidelines;
2. That the competency requirements for child care providers be reviewed and that new standards for ongoing training be established;
3. That a single state agency be made responsible for reviewing qualifications and issuing licenses to providers;
4. That child care centers be required to hire only qualified personnel and provide for ongoing professional development;
5. That curricula offered in child care settings be monitored and evaluated regularly;
6. That centers be required to inform parents of their curriculum approaches and encourage their participation in the child care process.

V. Cost Options: Affordability

Today's rising demand for child care services is not being met. Services currently available are frequently marginal and do not serve the best interests of either parent or child. Increasingly securing child care that is affordable, safe, accessible, and dependable has become a major source of stress for working parents. Government agencies have so far been slow to respond to the child care issue. In an era of swelling deficits and shrinking revenues, legislators, both at the federal and state level, have been reluctant to enact new social programs. Developing a comprehensive child care system would require a major appropriation not only to find the services but to establish an administrative
agency responsible for licensing and monitoring child care providers and for allocating resources among public and private vendors.

So far the United States has dealt with child care in an ad hoc fashion, resulting in a hodgepodge of programs that lack common standards of services, funding, and regulation. Although the state of Massachusetts has partially addressed the Commonwealth's child care needs, it remains far from establishing a system available to every working parent. Concerns about cost and regulation within the state administration have consistently hampered efforts to devise a workable solution to the child care problem. As a result, state agencies are yet to undertake a comprehensive analysis of child care options.

In devising a child care policy, it is important to learn from the experience of other highly developed countries. In Europe, for example, countries like West Germany, France, Denmark, and Sweden provide government subsidies that include direct financial aid to families for child care services and funds for the construction, operation, and maintenance of public child care facilities. In addition, they have passed support legislation that allows for parental work leaves and homemaker assistance programs. All of these options can form the basis for a workable child care system in the United States.

While we can debate the merits of various child care approaches, one thing is certain: in our current economic and social environment child care is not a private convenience but a necessity for millions of working parents, especially in one-parent families. Labor statistics reflect a steady growth in the number of working mothers, from just 19 percent of the work force in 1960 to 54 percent in 1987. As the labor pool diminishes, women, a majority of them mothers, may exceed 80 percent of all new hires. Studies and polls reveal that many mothers now at home want to join or return to the work force either for career purposes or, more
commonly, out of economic necessity. Indeed, the two paycheck family is rapidly becoming commonplace in our economy.

Child care rates, both nationally and within Massachusetts, range from $65 to $300 per week. A recent study, which estimated the cost of providing child care services through public school facilities, came up with the following operating cost figures:

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<th>Cost per week</th>
<th>Cost per year</th>
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<td>Toddler</td>
<td>$181</td>
<td>$9,412</td>
</tr>
<tr>
<td>Toddlers &amp; Preschool</td>
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</tr>
<tr>
<td>Preschool</td>
<td>$106</td>
<td>$5,512</td>
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</table>

(The cost categories for the above figures are 77% for personnel, 20% for maintenance, and 3% for supplies and food.)

The personnel costs of this study are based on a salary scale commensurate with that of public school teachers, i.e., a starting salary of $18,000. At present, most child care programs in the Commonwealth suffer from low wage scales (average teacher wage $12,000), rapid personnel turnover, and inadequately trained staff. It is clear that only a comprehensive child care plan, jointly financed by state government and private business, can assure child care services that are both high quality and affordable to all working parents.

A. Requirements for Creating Affordable Child Care

Quality child care, whether public or private, is a comparatively costly service. Compared to grades 1-12 in a public school system, for example, child care requires a personnel ratio of adult to child that is three times greater. Child care also requires longer daily operating hours and, unlike schools, must be open...
12 months to accommodate the working schedules of parents. Further, the facilities costs will be higher because of the specialized needs of preschool children.

There are a number of options to underwrite the cost of child care services: state subsidies for employment training vouchers, private and public employee benefits, and federal funds (it is estimated that $6.9 billion for 3-4 year olds is allocated for 9 different programs and non-profit programs). Since working parents, single or married, can only afford 10% of their gross income for child care, these types of subsidies are essential to cover the disparity in cost.

Beyond subsidies by federal, state and charitable agencies, developing a child care system requires the financial support of private industry. Nationwide, however, private industry has yet to contribute its full share to child care. Of the 44,000 registered companies in the United States, only 2,500 now provide child care benefits to their women employees. Only an estimated 150 corporations have on or near site child care centers. The typical employee child care program provides information and referral services, which costs a few hundred dollars per employee. Another benefit is salary reduction paid directly to a service provider that allows both the employer and employee to benefit from a reduction in federal taxes. Up to $5,000 in salary can be "reduced" and remanded directly to a child care center for payment of services.

Why has business dragged its feet on child care? One oft-cited concern is the high capital and operating costs of a child care center. Others include fear of liability suits, and the cost of expanding employee benefit packages. Some child care advocates have suggested that companies fearful of the child care issue may actually be shying away from hiring working mothers. Unfortunately, existing corporate-sponsored child care benefit plans are often management perquisites for
higher salaried employees only. Most smaller companies cannot afford child care services at all, leaving the bulk of working parents to fend for themselves. In any case, generous tax incentives are essential to encourage more employers, particularly those with fewer than 100 employees, to support child care services.

Comprehensive child care systems outside the U. S. demonstrate that the government must provide more than tax incentives. A legislative umbrella is necessary, one that comprises not only direct financial assistance, but extended parental work leaves and homecare for parents or children stricken by illness. It must be universal in application, mandatory, and sufficiently funded.

VI. Policy Recommendations

Our study of the child-care programs in the Commonwealth and the child-care situation nationally leads us to the inevitable conclusion: it is imperative for the health and welfare of our children and generations to come, that there be a comprehensive, quality child-care program, that has a well conceived curriculum, that is staffed with well trained personnel, and that is available and affordable for all. The numbers of children needing care will only increase. If all children under the age of five in Massachusetts alone were to be accommodated, by 1990 slightly over 200,000 children would need child-care. Even if we assume that a number of parents will still provide care for infants and some mothers will remain in the traditional homemaker role, still about 120,000 will require assistance. It is critical for a policy decision to be made now for the future.

Obviously, a comprehensive program of this magnitude must be systematized in order to be planned, implemented, evaluated and funded. And both political good sense and logic dictate that it must be connected to alre...
existing resources if it has any chance to actually happen and be successful. It is unlikely that the state could build such a comprehensive system without capitalizing on existing available space, staff, educational training and funding resources.

This leads us to propose what is recognized as indeed a controversial recommendation, --that the public school systems of the state be seriously considered as the unit responsible for organizing, administering and providing child-care for children six months to five years old. We make this recommendation well aware of the turf issues that have existed in the past between schools and the child-care community and the various agencies responsible for it and conscious of the already substantial burdens that schools, particularly urban systems, face today. However, as an already established institution with a broad educational mission, with a clear stake in the children that come to them, with an already in place set of buildings, suitable facilities and food services, building maintenance and cleaning services, as well as a sequenced curriculum and a defined administrative structure, it seems to have the most potential to create the comprehensive system of child-care envisioned.

We fully recognize that all of this would require administrative changes and reassignment of certain responsibilities to an already overburdened State Department of Education. It would also require a change of attitude among the various groups who would need to cooperate closely together. The expertise and experience of the dedicated personnel already in the child-care community needs to be the personnel base of school system planning. School systems must be open to new ideas and new resources. It would clearly require a well thought out plan for financing child-care that goes beyond the property tax revenue base and state
aide formulas that are now in place. Enabling legislation would be needed for a serious problem-solving planning process to begin.

With no other systematic and viable plan on the horizon, therefore, we recommend that a committee be promptly appointed to start to draw up the legislation necessary to establish a comprehensive child care system through the public schools of the state of Massachusetts. Following the committees' report, enabling legislation should be promulgated to place responsibility for child care under the local school system. The following provisions should be included:

1. Infant care that remains with family care providers would be under the supervision of the local school system.
2. An administrative post of child care coordinator would be created in each school system. He or she would report to the superintendent of schools.
3. The state would underwrite the issuance of bonds by local school authorities to convert facilities for child care use.
4. All child care personnel would be required to have an AA degree and meet a licensing requirement for initial employment and be required to complete a bachelor's degree with a major in early childhood education within three years.
5. All family child care providers who take more than one child into their home for pay must be licensed and approved before they will be compensated through the local school system.
6. Public school systems be charged with providing before and after school programs for children.
We recommend that comprehensive child care be phased in over a three year period to permit needs assessments in the local communities, the readying of facilities, and the preparation of teaching personnel.

Some may protest that we cannot afford the costs of the child care system that we are proposing. But the costs of doing nothing are even higher. Thousands of parents who need to join the work force will continue to face the choice of child neglect or economic self sufficiency. All working parents will continue to experience the frustrations and anguish of finding child care that is safe from the highly publicized abused of children by inadequately monitored providers. And many working parents in desperation for child services may resort to such measures, as recently reported, of leaving children unattended at home or in public libraries.

Continued neglect of child care provides a fertile ground for future social, economic and personal problems; problems that exact a heavy toll on the men, women and children who represent our Commonwealths future. We must take the risk of challenging old barriers to find viable options for the future.
Selected Bibliography


