The problem of homelessness in Westchester County, New York has escalated sharply in the past few years. Estimates suggest that 5,000 people live in motels throughout the county. The largest segment of this population consists of families—women with young children. Mothers are often unable to participate in training programs due to a lack of child care. In an effort to address this problem, a model program called the Educational Advantage Program was developed by Westchester County in the summer of 1989. The program provided comprehensive opportunities for motel residents to obtain educational or job skill training. Based at the Elmsford Motor Lodge, the program gave residents access to drug education programs, self-sufficiency classes, health services, and participation in the local Head Start program for children over the age of 2.6 years. Children under this age were cared for in an on-site child care program designed and implemented by the Child Care Council of Westchester. The Council also offered family day care provider training as part of its "Hope for the Homeless" project.

(Author/RH)
THE CHILD CARE COUNCIL OF WESTCHESTER'S
"HOPE FOR THE HOMELESS"

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ABSTRACT

The homeless problem has escalated sharply in Westchester County, New York in the past few years. Estimates show that there are approximately 5,000 people living in motels throughout the county. The largest segment of this population is families - women with young children. They are often unable to participate in training due to a lack of child care. A model program called the Educational Advantage Program was developed by Westchester County in the summer of 1989 to provide comprehensive opportunities for motel residents to gain educational or job skill training. The program, based at the Elmsford Motor Lodge, gave residents access to drug education programs, Self-Sufficiency classes, health services and participation in the local Head Start for children over the age of 2.6 years. Children under this age were cared for in an on-site child care program designed and implemented by the Child Care Council of Westchester. The Council also provided Family Day Care Provider training as part of its "Hope for the Homeless" project.

The homeless in Westchester lack more than their own place to live, often they lack the hope of ever escaping the cycle of welfare and regaining control of their own lives. The Child Care Council's "Hope for the Homeless"
program attempted to provide a means for residents of the Elmsford Motor Lodge to remedy this problem.

One of the primary goals of the Child Care Council was to train motel residents to eventually become family day care providers in their communities. This would supply them with a steady income, control over their work schedule, and the ability to stay home with their own children. Candidates would have classwork and limited field experience in the on-site child care center. Two Child Care Council consultants would provide leadership in the training, while an on-site child care coordinator would staff the center and oversee the field experience. This individual would also act as liaison between staff, trainees and other support agencies. The training was planned to last for five weeks with morning workshops on Mondays and Thursdays. It was anticipated that residents could then be used as paid extra staff on Tuesdays and Wednesdays in the child care room, providing them an opportunity for supervised experience. Successful candidates would receive Section 8 housing certificates upon completion. Four trainees were successfully recruited for the first training session.

In order to facilitate learning, it was discovered that the class atmosphere needed to be warm and nurturing. Personal issues and problems needed to be aired and resolved before class could get underway. Informal "rap groups" where experiences and problems were shared in confidence began each session. Trainees began to feel comfortable expressing their
own opinions and offering guidance to each other. The consultants shared their ideas on child care freely but did not make judgments. In this manner, the group began to feel comfortable gaining control over their own personal situations.

Along with a warm atmosphere, a flexible approach to delivering subject matter developed. Materials were chosen that could be readily understood and employed as handy references later. Class was often interrupted as children wanted to visit with their mothers. The consultants were able to turn such disturbances into learning experiences for the trainees and children. These experiences provided the perfect forum for discussing separation problems and parent anxieties. Information was presented through didactic materials, video presentations, and group discussions. Topics covered included appropriate child guidance, building self-esteem, active learning, and safety and nutrition. Candidates demonstrated their understanding of the material through completion of projects and participation in discussions. A culmination of the first training cycle was the opportunity for the women to work for a week at the local Head Start center, to discover what child care was like in a center setting.

The program was enhanced by the fact that the trainees were able to use the child care rooms at the motel as a learning laboratory, when they worked additional mornings. This proved to be a good opportunity to put theory acquired
in class into practice. The trainees set up and served
snack, following sanitary procedures learned. They were
frequently given observation tasks and changed equipment
around if they saw a need. Appropriate guidance for the
children was modeled by the coordinator and trainees tried
to comply. They often saw positive discipline as "wimpy" and
questioned its efficacy. Issues on discipline that developed
the center were discussed in class often. Trainees came
to realize the value of positive guidance, through
discussion in class and their interaction with the children.
Working in the center was an excellent chance for the
trainees to put their new theoretical knowledge to practical
use.

The Child Care Council was able to attain another goal
by providing quality child care for the residents while they
attended training off-site. Children under the age of 2.6
years were cared for in two renovated rooms in the motel. At
peak capacity the center was able to care for 8 children for
three hour period. The children ranged in age from six
months to two and a half, truly resembling a family day care
home. The rooms were cheerfully decorated with toys chosen
that were appropriate to the age groups served. As outdoor
play space was lacking, many ride-on toys and other gross
motor equipment were available. Due to observed low
frustration levels and difficulties in sharing equipment,
multiples of toys were always available to the children.
Soothing sensorial activities such as water and sand play
were also employed in the child care rooms. Healthy snacks were also plentiful throughout the day as the children were frequently hungry. Often negative behavior dissipated or even disappeared after the children had eaten a proper meal. Simple art projects were available for the older children to express their creativity.

Observations of the children were carried out on a regular basis by the on-site coordinator, and daily information was shared with parents as part of the parent education component of the program. Constant contact was maintained with the parents and their input was sought. After discussion with the parents, the coordinator was able to make referrals to appropriate agencies in a timely manner. Behaviors seen included short attention spans, language acquisition delays, and immature social skills. The children tended to be very oral, with all objects going into their mouths. In aggressive behavior, biting was employed frequently. In response to this, steps were taken by staff to discourage biting and to protect themselves from injury. A particularly interesting behavior observed was the children’s interaction with new, unknown adults. In very few cases were there any clinging, problems separating from the parent. The children all appeared very eager to attach to a stranger and intense bonding occurred. More tears resulted from separation from staff members than from parents. This may be caused by feelings of insecurity about the parent or might be the result of homelessness at a critical
stage of emotional development.

Throughout the program, trainees were provided with a constant support system which aided in achieving fine results. Four months after the completion of the first training session, two of the four women are now involved in the child care field. They are employed by the local Head Start center on a semi-permanent basis. One of the other women is living in a temporary apartment and the fourth is actively seeking permanent housing. The women have gained a marketable skill and if housing becomes available, they are eager to become family day care providers. The Council's goal of creating a warm, caring oasis in a harsh environment was achieved as shown by new trainees and motel children's desires to be in the center.

The Child Care Council's "Hope for the Homeless" truly has achieved its goals. Quality child care and parenting education were made available to motel residents, and the four trainees successfully completed their training. As these women move ahead, buoyed by their success in the child care program, they will touch the lives of other residents in a positive manner. The children of the motel have had an opportunity to gain an early educational experience which will positively affect their future schooling. Perhaps the idea that achievement is possible will lift the feeling of hopelessness that permeates the motel.