The Child Care Action Campaign (CCAC) hosted an audioconference on December 8, 1997 to examine strategies to expand and improve family child care to meet the increased need for infant/toddler care and care during non-traditional hours. This issue brief summarizes the audioconference's presentations. Presenters were Julie Rogers, special projects coordinator at the Florida Children's Forum; Nancy Kolben, executive director of Child Care, Inc. in New York City; and JaNell Welker, co-chair of the Oregon Family Child Care Network, Oregon Commission on Children and Families. The discussion was moderated by Kathy Modigliani, director of the Family Child Care Project at Wheelock College. The presentations described activities and programs underway in each of the presenter's states. The issue brief then discusses, based on presenters' observations, obstacles to increasing supply and improving quality of child care. The brief concludes with discussion of eight policy considerations highlighted by Modigliani: (1) recruitment; (2) training; (3) mentorships and internships; (4) accreditation and CDA scholarships; (5) financial incentives; (6) family child care networks; (7) compensation; and (8) group homes. (EV)
Child Care for Infants and Toddlers and during Non-traditional Hours
Finding good quality child care for infants and toddlers and care for children of all ages during non-traditional hours are long-standing and serious problems. As states implement welfare reform plans that require mothers of infants to work—often at jobs requiring evening and weekend hours—they must increase the supply of child care for infants and toddlers and during odd hours at the same time they take steps to assure its quality.

Many states and communities are expecting family child care and group family child care to meet these needs. Child Care Action Campaign (CCAC) hosted an audioconference on December 8, 1997 to examine strategies to expand and improve family child care to meet the increased need for infant/toddler care and care during non-traditional hours. The discussion was moderated by Kathy Modigliani, director of the Family Child Care Project at Wheelock College. Presenters were Julie Rogers, special projects coordinator at the Florida Children's Forum; Nancy Kolben, executive director of Child Care, Inc. in New York City; and JaNell Welker, co-chair of the Oregon Family Child Care Network, Oregon Commission on Children and Families.

CCAC Senior Program Associate Laurie Miller put the discussion in the context of new initiatives underway in a number of states. States are using multiple strategies, including programs to recruit and train new providers, higher reimbursement rates for accredited homes and those caring for children from birth to age three, and training and financial assistance for start-up and development of new homes. At the national level, the National Association of Child Care Resource and Referral Agencies (NACCRRA) held five regional conferences in 1997 on care during non-traditional hours and is urging its member agencies to provide referrals, to take the lead on recruiting and training providers, and to work with employers and community groups to build and sustain the supply of non-traditional hour care in their areas.

The discussion then turned to the presenters' descriptions of activities and programs underway in their states.

The Florida Children's Forum in Tallahassee coordinates the state's child care resource and referral system, which includes 24 agencies serving 67 counties. Through research, policy development, training, and advocacy, the Forum promotes quality child care and work-family solutions. It provides resource and referral services to over 150,000 families each year throughout Florida.

Julie Rogers calculated that parents' requests for infant and toddler care in Florida increased about 21% in the last half of 1997, compared to a 10% increase overall in requests for care. Most requests for child care during non-traditional hours were for care during weekends and evenings, rather than overnight.

To address this burgeoning need, the Florida Children's Forum developed Caring For Kids, a program that targets areas that have shortages of child care.
care providers in comparison to the number of participants in WAGES (Work and Gain Self-Sufficiency), Florida's welfare-to-work program. Caring For Kids provides assistance to prospective and current family child care providers. Trainers use 16 resource vans to visit family child care providers around the state to offer mentoring, training, and technical assistance. Trainers also visit all informal care providers who care for children receiving subsidies. Last year Florida began requiring these informal providers to take a three-hour introduction to family child care. This requirement provides Caring For Kids with an opportunity to get to know the provider and to offer materials, training and other resources through the mobile units.

Providers willing to serve WAGES participants can also take advantage of a new mini-grant and loan program that helps centers and homes to become accredited and provides incentives for informal caregivers to become licensed. Providers can receive grants of up to $500 to purchase educational materials, equipment, and toys. Through a collaboration between the state and NationsBank, providers can receive loans of between $1,000 and $10,000 for training, home improvements, and supplies. The interest rate is 2% and loans must be repaid within 24 to 36 months. To encourage quality improvements, providers who become licensed within one year after repaying the loan receive a refund of 50% of the loan's principal; those who become accredited within six months after repaying the loan receive a 100% refund of the loan's principal.

The Caring For Kids program also supports providers by educating the WAGES Board, which oversees the state’s welfare-to-work initiative, about the importance of child care in allowing parents to find and keep jobs. As a result, the Board has been very supportive of initiatives to retain providers and increase quality in child care.

Business involvement in child care has grown over the past two years as a result of the state’s Child Care Partnership Fund. Established by the Florida legislature, the Fund encourages businesses to contribute to a subsidy fund for low-income workers and matches their contributions dollar-for-dollar in participating counties. Businesses can target their contributions to assist their own employees who are eligible for subsidies. The Forum is also holding breakfast meetings for businesses and encouraging them to mentor family child care providers as a way of developing and strengthening providers’ business skills.

At Child Care, Inc. (CCI), New York City’s largest child care resource and referral agency, the demand for infant and toddler care has always been great. Nancy Kolben reported that at least half of the calls that CCI receives are from parents with children under age three. The new welfare regulations requiring parents of infants and toddlers to work has exacerbated an already acute shortage of infant care services: the city's regulated center- and home-based spaces for infants and toddlers can accommodate less than seven percent of the children needing care. Center-based care for infants is almost non-existent, with only 1,000 slots available in the entire city. CCI
has also found a tremendous unmet need for weekend care, compared to evening and overnight care. As in Florida, relatives and friends who may care for children in the evening are often not available on weekends.

A new family child care initiative in New York City promises to expand the number of good quality family child care homes in areas of greatest need and provide a decent income, benefits and support to providers. Organized by the Consortium for Worker Education, a coalition of 34 labor unions that runs a wide array of educational programs, the Satellite Child Care Project is developing networks of child care providers connected to local child care centers. Parents on public assistance are recruited and screened by community-based organizations to become family child care providers. Child Care, Inc. is coordinating the training component, which begins with a three-month program of 20 hours a week of field work at a center and 15 hours of classroom instruction. Upon completion of the training program, recruits become employees of the local child care center and receive the same benefit package as their center-based counterparts. They also become members of DC 1707-AFSCME, which represents workers in the city's publicly-funded centers. The program is currently in its pilot stage with two centers on board and 12 recruits in training. The number is slated to increase to 200 by the end of 1998, and grow incrementally thereafter to include 600 new providers.

Each home-based provider in a network will receive a computer to facilitate distance learning and administrative functions. The centers will provide ongoing training and supervision, and providers will be able to take advantage of educational opportunities offered through the Consortium, including the opportunity to study for a college degree in early childhood development.

To help meet the demand for full-day care for children with special needs, each home will care for one child with special needs. A paraprosfessional, provided by the state Department of Education, will be assigned for every five homes and will work with each special needs child for one hour each day. In addition, a full-time special education teacher will also work in the homes, providing services based on the child's needs. The interaction between these professionals and providers will not only help the provider better serve special needs children, but will help develop their knowledge of child development and ability to work with all children.

CCI is also exploring opportunities to expand group family child care homes as a strategy to create more care for infants and toddlers and for all children during non-traditional hours. CCI is working with group family homes to use the Child and Adult Care Food Program in innovative ways to allow for feeding children who are in care during evening and weekend work shifts and is helping providers develop their business skills.

Expanding family child care, and especially group homes, is a priority for the Oregon Commission on Children and Families. The Commission was formed by the state legislature in 1993 to establish statewide policies for service to children and families and to support county-based initiatives to
implement these policies. JaNell Welker explained that the state is committed to meeting the increased demand for infant/toddler slots and has taken steps to simultaneously build capacity and improve quality. Recognizing that family child care providers are often preferred by parents of infants and toddlers and that home settings allow greater flexibility in meeting the needs of parents who work evenings and weekends, the Commission's Family Child Care Network focused its efforts on recruiting new family child care providers through projects in communities throughout the state.

The effort has met with considerable success. In one community, for example, the goal for the first year was to recruit 150 new providers to create 300 infant/toddler spaces. Through community outreach, newsletter articles, and newspaper ads, the effort recruited 174 new providers of infant/toddler care and created 348 new slots.

The site also hired and trained an Infant/Toddler Specialist in an effort to retain newly recruited providers and increase the quality of care. The Specialist meets one-on-one with providers in their homes and helps them to evaluate their work and set goals. She also links providers to training services. The specialist maintains a list of classes being offered by various organizations and updates providers on what is available, where, and when. Most importantly, the Infant/Toddler Specialist program recognizes family child care as a profession and validates the important work that these providers do. The one-on-one relationship with providers has had a significant impact on reducing turnover.

Special efforts are being made to assure that providers, especially new recruits, have adequate training on how to care for children from birth to age three. Assuring that those conducting the training are up-to-date in their knowledge is also a priority. For example, instructors recently completed a training program that explained new findings on brain development in young children. Additionally, the program recognizes the unique role of experienced providers and has recruited many to mentor new providers. One site has developed an intergenerational program in which seniors assist providers in meeting the needs of infants and toddlers.

On another front, the Oregon Department of Human Resources used Child Care and Development Block Grant money for an infant/toddler incentive fund to provide caregivers with up to $150 worth of equipment. The Infant/Toddler Specialist and provider together evaluate the provider's equipment needs, and items are purchased by the local resource and referral agency. The equipment is initially loaned to providers, who can earn it over time. The Oregon Commission on Children and Families partners with Target department stores, which provides a 15% discount for equipment purchases.

Oregon organized a group of providers and agency representatives called One Voice for Children in Care, which is identifying ways to improve quality. It also created a Parent Policy Council, with support, in part, from Child Care Action Campaign, through the Forging the Link program, which helps empower parents to recognize quality and to see the importance of building a strong relationship with providers.
Overcoming the Obstacles to Increasing Supply and Improving Quality

Even though each presenter described promising strategies for recruiting new child care providers, all agreed that lack of resources was the greatest obstacle to increasing the supply of good quality child care that would meet the needs of infants and toddlers and children of all ages who need care during non-traditional hours.

In Florida, for example, Julie Rogers noted that the TEACH (Teacher Education and Compensation Helps) Early Childhood® project, patterned after the model developed in North Carolina, is an example of a successful program that is hampered by lack of funds. TEACH improves the quality of child care by linking education and training to compensation. TEACH provides scholarships to providers, who receive a bonus and/or raise in pay upon completion of the agreed-up course of study. The bonus helps retain trained providers and reduces turnover, both of which contribute to quality child care. In Florida, the American Business Collaboration has funded two TEACH programs, and a foundation grant is funding a new project in Tampa. But unlike North Carolina, where TEACH receives the bulk of its support from the state legislature, Florida has not provided ongoing state support.

Kolben agreed, noting that as a result of insufficient funding, providers caring for low-income children are reimbursed at rates too low to constitute a living wage. Without a living wage, as well as health insurance and the other benefits that families need to survive, there is little incentive for people to provide child care, especially for infants and toddlers, who are costlier to care for but for whom parents are often unable to pay more than for older children.

JaNell Welker agreed that many family child care providers do not find it cost effective to care for infants and toddlers because the state’s staff-child ratio limits them to caring for a maximum of four children. The ratio for preschool children, however, is one to ten. Many licensed family providers find that caring for infants and toddlers is difficult to do well without an assistant. These economic difficulties mean that providers willing to care for children from birth to three often remain unlicensed and care for more children than the state allows.

However, Welker noted that family child care providers rarely see themselves as business people and are often unaware that many of their ongoing expenses—such as rent or mortgage payments—qualify as tax write-offs. The Commission is producing materials that explain how to write off expenses and offers basic business management classes for family providers. The Commission may offer higher level courses that will concentrate on tax benefits to help providers increase their cash flow and make caring for infants and toddlers more viable economically.

Policy Considerations

Modigliani drew on points made by the presenters to highlight eight areas of policy to consider:

1. Recruitment. There is a need to target recruitment of providers for infant/toddler and non-traditional hours care. Screening to assure that potential providers want to work with children is essential.
2. **Training.** Start-up training is the key to bringing people into some form of support network, and specialized training in caring for infants and toddlers and in new findings on brain development is essential. Small business training is also critical. This initial training should be linked to a career ladder.

3. **Mentorships and Internships.** These are effective ways of using the talents of experienced providers for training new recruits. Increasing the number of group homes is another way to create more opportunities for internships or apprenticeships.

4. **Accreditation and CDA Scholarships.** Many groups around the country are helping family child care homes become accredited by the National Association for Family Child Care and providing CDA scholarships. These efforts should be encouraged and strengthened.

5. **Financial Incentives.** Low-interest loans and loans of materials and equipment can make the difference in helping a provider get started and in improving quality. The TEACH project and other incentives that tie training to better compensation have been proven effective in raising quality and decreasing turnover.

6. **Family Child Care Networks.** These are important vehicles for delivering training, promoting professionalism, and developing formal and informal mentoring opportunities. They are critical in helping new providers cope with the stress of full-day childcaring, and in working with parents who themselves may be facing many problems.

7. **Compensation.** The compensation issue will not be resolved unless reimbursement rates for subsidized care constitute a living wage. In setting these rates, policymakers must recognize that one-third of a home-based provider's income is generally used to cover expenses. Providers leave the profession because their earnings are too low. New York City's initiative, which will bring hundreds of family child care providers into the ranks of employees with guaranteed salary and benefits, is very exciting. Rhode Island now allows family child care providers serving subsidized children to participate in the state employees' health care plan. Providers receive 20 percent of health care covered for each subsidized child in their care; those who care for five subsidized children—the state limit—are fully covered.

8. **Group Homes.** Group homes combine some of the advantages of a center with the flexibility of home-based care. States that do not have a license for large group family child care homes should be encouraged to add one. Several speakers noted that group family child care homes may present an exciting solution to increasing the supply and quality of child care for infants and toddlers and for children of all ages during non-traditional hours. Research generally suggests that the quality of care in large homes is better than family child care overall, and more experienced family child care providers may be encouraged to open group homes as a way of earning a better income and meeting increased demand.

    Group homes could offer opportunities for newly recruited providers to
receive on-the-job training. Providers and children benefit from the presence of an assistant. Children receive more attention and are better able to form strong attachments to caregivers. Providers are able to interact more with children, feel less stress, and have more energy to give their own families. More research is needed to assess whether the group home model has the potential of delivering really high-quality infant care and what would be needed to support its growth and expansion.

The innovative ideas presented by the speakers show that the supply of quality care for infants and toddlers and for all ages during non-traditional hours can be improved by building on existing resources and by investing the time and money now to address the problem. While welfare reform creates new child care needs for many families, states can meet these needs if they are creative and innovative in their approaches.

About CCAC's Audioconferences on Child Care and Welfare Reform

Child Care Action Campaign (CCAC) is a national nonprofit advocacy organization whose goal is to improve the lives of children and their families by expanding the supply of good quality, affordable child care. Assisted by a panel of advisors in every state, CCAC's 1997 audioconference series on child care and welfare reform has convened policymakers, government officials, state administrators, and child care leaders and advocates across the nation. Through this series, CCAC has worked to get the message out that good quality child care is a crucial component of any welfare-to-work strategy, and to work with state leaders to ensure that low-income families have access to child care benefits.

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Acknowledgments

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