

DOCUMENT RESUME

ED 432 381

PS 027 754

AUTHOR Pearlmutter, Sue; Katona, Michelle
TITLE Subsidized Child Care in Cuyahoga County: Using the System Is No Easy Matter.
INSTITUTION Case Western Reserve Univ., Cleveland, OH. Center for Urban Poverty and Social Change.
PUB DATE 1998-01-00
NOTE 26p.
PUB TYPE Reports - Research (143)
EDRS PRICE MF01/PC02 Plus Postage.
DESCRIPTORS *Day Care; Early Childhood Education; Economically Disadvantaged; Educational Vouchers; Financial Support; Focus Groups; *Grants; *Low Income Groups; *Parent Attitudes
IDENTIFIERS Child Care Costs; Ohio (Cleveland); *Subsidized Child Care Services

ABSTRACT

A focus group study examined child care experiences of 16 low-income women living in Cleveland, Ohio to gain an understanding of these women's experiences with child care in general and with the system that assures access to child care subsidies or vouchers for supported child care. Several themes emerged from the study: (1) parents prefer placing their infants and toddlers in child care with family and friends whom they know and trust; (2) safety of children is the greatest concern of these families; (3) parents want to have choices about the care their children receive; (4) use of child care subsidies depends on adequate choice, accessibility of care, cost of care, and accurate information offered in a timely and respectful manner. Based on the study findings, the following recommendations were made: (1) the system for accessing child care subsidies must be seamless and responsive to the needs of parents regarding education and training and to those who have become employed; (2) measures to expand the supply and mix of child care arrangements in the central city should be carefully considered; (3) all parents need to understand how to shop for a care provider; and (4) mechanisms to ease the co-payment for families just beginning their employment should be considered. (Contains 14 references.) (EV)

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**SUBSIDIZED CHILD CARE
IN CUYAHOGA COUNTY:
USING THE SYSTEM IS NO EASY MATTER**

**Sue Pearlmutter
Michelle Katona**

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**Center on Urban Poverty and Social Change
Mandel School of Applied Social Sciences
Case Western Reserve University
10900 Euclid Avenue
Cleveland, Ohio 44106-7164**

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ACKNOWLEDGEMENTS

We are very grateful to the women who participated in this study for sharing their time, energy, and ideas with us. They were the experts and we were the learners. It is not often that we are privileged to learn from those whose voices are normally stilled. We are, indeed, indebted to them.

We also appreciate the assistance provided by Carolyn Milter, Mamie Gordon and the three Neighborhood Centers that hosted our discussions - Collinwood Community Services Center, East End Neighborhood House, and Merrick House.

Finally, we want to thank the members of the welfare team who thoughtfully listened to our ravings about words and the importance of their meanings.

SUBSIDIZED CHILD CARE IN CUYAHOGA COUNTY: USING THE SYSTEM IS NO EASY MATTER

Executive Summary

This report presents the findings from a focus group study examining child care experiences of 16 low income women living in Cleveland. The purpose of the study was to gain an understanding of these women's experiences with child care in general and with the system that assures access to child care subsidies or vouchers for supported child care. Several themes emerged from the study. We report them below.

- Parents prefer placing their infants and toddlers in child care with family and friends whom they know and trust. Participants clearly indicated that trust was important to them in a provider. They equated trust, their intuition, observations of behavior, and comfort with quality of care for their very young children.
- Safety of children is the greatest concern of these families. Participants feared for the physical and emotional safety of their children and indicated that they were committed to finding places that offered that safety.
- Parents want to have choices about the care their children receive. Participants wanted to have a range of choices regarding care. They wanted family settings for young children, including their own family members and friends. For pre-schoolers who can talk, they wanted centers that would offer a high quality of educational, developmental care. They wanted settings where their involvement would be respected and appreciated.
- Use of child care subsidies depends on adequate choice, accessibility of care, cost of care, and accurate information offered in a timely and respectful manner. Participants

reported that they received no information about subsidized child care from their workers or they received confusing and inaccurate information. Others were treated rudely and with disrespect. Workers kept them waiting for long periods of time and as a result participants were often inconvenienced and late returning to work. Co-payments associated with subsidized care were unrealistic given the net pay and other expenses of these families. The choices in types of care available using child care subsidies need to be broadened.

After considering the responses of these participants in our discussions, we make the following recommendations:

- The system for accessing child care subsidies must be seamless, responsive to the needs of parents in education and training and to those who have become employed. All families that are eligible for subsidized care should receive accurate, timely, and unambiguous information about the availability of subsidies. Child care staff must work closely with other assistance staff to assure that parents receive the information and assistance they need. Workers should be available to working parents and those in other work activities at convenient times for parents, recognizing that parents need this assistance to maintain their employment and/or school attendance.
- Measures to expand the supply and mix of child care arrangements in the central city should be carefully considered. Families living in the city want child care choices that suburban families have. Families that want to use Head Start should have access to these centers for the full day. Strategies for training and regulating in-home providers should be sought, so that these informal care providers can be paid for their services.

- All parents need to understand how to shop for a care provider. Parents need to have information about what they should look for as they seek a provider. They need to understand the child care marketplace and be thoroughly familiar with licensing standards and health and safety measures.
- Consider mechanisms to ease the co-payment for families just beginning their employment. If quality care in a regulated child care system is a goal, we must find ways to make such a system affordable even to the poorest families. This might involve some combination of strategies that would increase the child care supply from funding sources other than the County's child care subsidies. Whatever strategies are chosen, attention must be paid to the affordability of child care within the current regulated system.

SUBSIDIZED CHILD CARE IN CUYAHOGA COUNTY: USING THE SYSTEM IS NO EASY MATTER

Introduction

The ability of low-income families with young children to retain employment is at least partially dependent on their access to reliable, convenient, and affordable child care. Because of the implementation of the federal Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) and the resulting Ohio welfare reform legislation, families currently receiving Temporary Assistance to Needy Families (TANF funds) who will be required to participate in work or work activities will need to have subsidized child care. While the federal government has increased the amount of funding available for child care, Ohio has determined to decrease its contribution to funding for subsidized child care slots. This expected reduction in state funding has exacerbated an already growing concern that working poor families will be denied subsidized (or non-guaranteed) care so that those moving from welfare to work can use available slots and subsidies.

In Cuyahoga County, there is an opposite concern. The County has funds available for child care subsidies for working poor families and the funds have not been fully used by families that are eligible for them. In an effort to both understand current utilization patterns and determine future needs for subsidized care, the County requested that the Center on Urban Poverty and Social Change conduct a child care study. In implementing the study, we are examining administrative data to determine the number of people who will be required to participate in work activities and their child care needs. We are using census data to ascertain the number of low income working families that

would be eligible for non-guaranteed, subsidized child care. We have used focus group discussions with low-income families to determine their experiences with the use or non-use of child care subsidies and to gain an understanding of their child care choices.

This material in this report represents the experiences of Cuyahoga County parents who have received cash assistance, begun employment or training, and/or completed their transitional benefit period. In each case, the parents have chosen to forgo the use of county subsidized guaranteed and non-guaranteed child care.

To provide a context for understanding child care usage patterns among low-income families, we first examine the existing research literature. We then discuss the current study and present our findings.

Review of the Literature

Since the passage of the Family Support Act in 1988 and the implementation of the JOBS program, child care advocates and researchers have examined the use of child care services among low income families. Requirements for participation in state welfare employment programs brought with them a need for expanded services and an increased supply of care. However, low income families continue to find child care a barrier to employment. In reviewing the evidence of this employment barrier, Kisker and Ross (1997) indicate that one-third of all poor mothers are not participating in the labor force because of child care problems. Child care problems include availability, accessibility, stability, and cost. Poor families also face problems of quality of care.

Child Care Arrangements

Casper (1995) used the Survey of Income and Program Participation (SIPP) to demonstrate that 9.9 million children under the age of five were in need of child care in the

fall of 1993. Relatives cared for forty-eight percent of these children and someone other than a relative cared for 52 percent of them. More than 60 percent of poor families used relative care for their children. About 21 percent of the families used center-based care and only 12 percent used family child care arrangements.

Family structure and employment status has a significant impact on the primary child care arrangements these families use. Data from the 1990 National Child Care Survey on families earning less than \$15,000 annually (6.6 million families whose children were under the age of 13) indicate that in 26 percent of two parent low-income families with children under age 13, both adults worked and one adult worked in 55 percent of those families. No parent worked for wages in 19 percent of these families. Forty-five percent of single mothers who were heads of household worked for wages (1.7 million women with children under the age of 13), while 55 percent did not work outside the home (this corresponds to 2.1 million women with children under the age of 13; 1.3 million of these women had a child under the age of 5) (Brayfield, Deich, & Hofferth, 1993).

In low income families with children under the age of 5, relative care (care provided by a family member) was the primary arrangement for children with employed single mothers and it was the prevalent care arrangement in dual employed families (Brayfield et al., 1993). Forty percent of dual employed families relied on a parental care arrangement, compared to only 17 percent of employed single mothers. Thirty percent of single employed mothers and 27 percent of dual employed families used relative care (Brayfield et al., 1993). Low income families more readily relied upon relative care because relatives are less likely than centers and family child care providers to charge a

regular fee. Only 17% of families relying on relative care in 1993 reported paying for the service. Furthermore, parents whose work schedules change have found relative care to be more accommodating and they tend to feel more secure knowing their child is with someone they know well (Phillips, 1995).

Center care was the primary arrangement for 27 percent of single employed mothers, while only 12 percent of dual employed families used center based care. Center care offers more learning opportunities and the reliability of an established program (Mitchell, Cooperstein, & Lerner, 1992). Twenty-one percent of single employed mothers, but only 11 percent of dual employed families, used family child care. Unemployed low income families relied significantly on parental arrangements for child care. Seventy-nine percent of dual unemployed families and 47.8 percent of unemployed female headed households used the parent as the primary child care provider (Brayfield et al., 1993).

Discrepancies do exist between the child care arrangements preferred by parents for their children and the arrangements the parents currently have. Results from the 1990 National Child Care Survey show that approximately 27 percent of all low income families wanted to change their current child care arrangement with 43 percent of single employed mothers stating the strongest desire to change where their children were placed. Families relying on center based care were the least likely to want to change their arrangements. Only 17 percent wanted to change their arrangement from center based care while 36 percent of the families relying on relative care were most likely to want to change their child care arrangement. Parents wanted to change their arrangement primarily because of the quality of care that they perceived their children were getting. Sixty-eight percent of

low income families who preferred a different arrangement reported a preference for center based care for their children (Brayfield et al., 1993). Lerner (1994) indicated that low income families value the same qualities as other, wealthier families as they look for care - safety issues, school preparation and development - and these are more often found in center based care. However, several barriers limit low income families' choices in child care and keep them from finding the care they most prefer.

Barriers to Child Care Choices

Cost of care. Financial barriers present one constraint for low income families. Using the SIPP, Casper (1995) found that 18 percent of a poor family's income goes to child care expenditures compared to 7 percent of non-poor families' income. Lerner (1994) indicated that families should spend no more than 10 percent of their income on child care. Brayfield et al. (1993) reported that although low income families are the least likely to pay for child care, a larger percentage of a low income families' budgets go to child care expenditures. Forty-two percent of families earning less than \$15,000 paid for child care compared to 70 percent of families earning \$50,000 or more. Low income families with children under age five paid about 27 percent of their income for child care services. Families earning at 125 percent of poverty paid about 16 percent of their income for child care services.

In addition, only 18 percent of the working poor with children under the age five reported receiving financial assistance to pay for child care, while 36 percent of poor families with no employed member received assistance to pay for child care. Also, families using a child care center were more likely to receive financial assistance with their child care expenditures. Eighty-nine percent of unemployed poor families and 42 percent of

working poor families with a child in a center received financial assistance (Hofferth, 1995). Low income families, particularly employed mothers and mothers in education and training programs, were most likely to receive assistance in paying for child care. Female headed households receiving AFDC were more likely to receive financial assistance than female headed households not receiving cash assistance. Non-employed mothers (participating in education or training activities) living between 100 percent and 125 percent of poverty were more likely to receive financial assistance than non-employed mothers living above 125 percent of poverty (Brayfield et al., 1993).

The GAIN Family Life and Child Care Study (Gilbert, Berrick, and Meyers, 1993) supports the findings from the 1990 National Child Care Survey. The GAIN study examined the child care and family experiences of 255 single parent AFDC recipients in California who participated in the state's welfare to work program. While in the GAIN program, 76 percent of the women used subsidized care, 11 percent received free care from relatives and friends, and only 2 percent paid for their child care arrangements. The child care assistance changed after the women exited the GAIN program and entered their period of transition. Only 39 percent of the women had full or partially subsidized care, 36 percent paid for the care and 24 percent relied on free care provided by friends and relatives. Thus, a significant number of women who had previously relied on subsidies sharply increased the percent of income they spent on child care. About 21 percent of the women were spending between 11 and 20 percent of their income on child care and 17 percent were spending more than 21 percent of their income on child care.

Awareness of subsidies. Meyers (1996) examined knowledge and use of financial assistance among AFDC families in California. She found that 85 percent of recipients

were not familiar with the child care subsidies that were developed to assist working parents, especially the transitional subsidy and the Child and Dependent Care Income Tax Credit. Furthermore, the General Accounting Office (1994) concluded that only 5 to 6 percent of the AFDC caseload received AFDC child care subsidies and less than 30 percent of JOBS program participants received child care assistance from any funding source in 1992. Moreover, Kisker and Ross (1997) reported that most families rely on informal sources of information from friends, relatives and neighbors to find child care. Also, most families leaving welfare are unaware of or unfamiliar with the challenges of arranging child care.

Lack of flexibility in child care services. Flexibility and location of child care arrangements are additional barriers to low income workers. Hofferth (1995) found that nearly one-third of working poor mothers work on weekends and only 10 percent of centers and 6 percent of family day care homes provide weekend care. Eight to 9 percent of working poor mothers work in the evening or at night and only 3 percent of centers provide evening care. Furthermore, about half of all working poor mothers have rotating schedules, which create a barrier to establishing stable child care. Sonenstein and Wolf (as cited in Lerner, 1994) indicated that 30 percent of employed AFDC recipients needed child care available to them before 6 a.m., after 7 p.m. or on the weekends.

Many low income families are employed in jobs with limited security and required attendance. Thus parents need child care arrangements that will offer sick child care and/or extended stays. During an eight month period, mothers whose children were cared for by relatives missed an average of one day of work, while mothers whose children were in centers missed an average of six days of work (Somerstein and Wolf, as cited in Lerner,

1994). Center based care is also scarce in poor neighborhoods and care that is available is often unsatisfactory. Centers in low income neighborhoods are often poorly maintained and not well served by public transportation and other community services. A majority of low income families does not own a car and must rely on public transportation. These families tend to rely on the centers within their communities or those in closest proximity to their homes (Kisker and Ross, 1997). Thus their child care choices are limited and quality of care is at great risk.

Overall, national research on the child care needs of low income families shows the burdens these families face as they try to become and remain self sufficient. The barriers indicate that stable, affordable, quality child care is a significant component to helping low income families move out of welfare and that it is not readily available to them. Using the forgoing information about the child care usage patterns and needs of low income families as a context, we present the focus group study of child care experiences of low income families in Cuyahoga County.

Study Methodology

We used focus group methodology for this study because it has been found to provide an excellent mechanism for determining people's opinions and attitudes. This strategy, which brings people together to discuss their experiences, encourages personal interaction to elicit issues, ideas, and opinions that would not emerge in individual interviews. It creates a safe place for participants to voice their experiences and talk about the reasons for choices and decisions. Finally, the group setting normalizes these experiences, as participants offer each other validation, support and feedback (Gowdy and

Pearlmutter, 1994). The design and implementation of the focus group research approach is based upon the work of Krueger (1994) and Morgan (1988).

Study Design

Make-up of the Groups

We decided to conduct four focus groups. Three of the groups were composed of current cash assistance recipients, those eligible for transitional services, and former assistance recipients who are now working. Participants in each of these groups were eligible for but not using subsidized child care. The fourth group which has not yet been conducted will involve low income working persons who have not received cash assistance and are eligible for, but not using non-guaranteed subsidized child care.

Recruitment

Participants for each group were recruited in several ways. Posters describing the research were sent to community agencies after phone calls to agency personnel requesting their assistance. Prospective participants were asked to call a research assistant, who returned their calls and screened to assure their suitability for the group. County child care staff provided a list of potential participants and the research assistant mailed letters to prospective participants in specific zip codes surrounding three community agencies where we intended to hold group sessions. Those who received letters were instructed to call the research assistant who then completed the screening. Finally, the research assistant secured a list of persons who had responded to commissioner Jane Campbell's subsidized child care promotion activities and called several of those persons to ascertain their suitability for participation. In all cases, people

who met criteria for participation were informed of the date, time, and location of the appropriate group discussion. Recruitment for the fourth group is ongoing.

Conducting the Groups

The groups were held in community agencies in the city of Cleveland. We used Collinwood Community Services Center, Merrick House, and East End Neighborhood House. All of the groups were held during the month of June and all were scheduled in the evening to accommodate those who worked during the day. Each of the groups met for two hours. At the end of the group discussion participants were paid \$20 as a reimbursement for their attendance and discussion.

The researcher and research assistant co-facilitated the discussion in each of the groups. Each session was audiotaped and notes from discussion between the co-facilitators following the session supplemented the tapes. One of the facilitators began each session with introductions and an explanation of the research. Each participant was provided with a written description of the research and a statement of informed consent. At the end of each session, one of the facilitators reviewed the discussion that had transpired, thanked participants for their attendance and contributions to the discussion, and distributed their reimbursement.

Key Questions

We asked group participants two general questions: 1) Tell us about your experiences with child care; and 2) How did you decide the type of child care arrangements you would make? Following each of the general questions, we asked some probing questions if the discussion was not already providing specific responses to our questions. For example, we might repeat a participant's response using different words to

clarify a response. If a participant talked about concerns for the safety of her children in a particular child care setting, we asked her to describe her concern in more detail. If a specific issue had arisen in one group, but not in another, we mentioned the other group's discussion and asked participants to comment. For example, "Some parents have mentioned that they liked having their infants and/or toddlers in one setting and preferred another type of setting for their pre-school children. What are your thoughts about that?" Last, we asked parents to talk to us about their reasons for not using available child care subsidies.

Description of the Participants

A total of 16 participants attended the discussions. They ranged in age from early-twenties to mid-forties. Three participants were white, one was Hispanic, and the remainder (12) were African-American. All participants were women and all lived in Cleveland. Thirteen of the women were single parents and two were married. Eleven of the women were working, three were in education and/or training activities, and two had recently left jobs or been laid off. Two of the women worked at two jobs to support their families. The women had either one or two children; one participant was expecting her third child. Ages of the children ranged from 18 months through 12 years.

Analysis of the Data

Following each session, the co-facilitators met and discussed the process of the group, the conversations among the women, their responses to the questions, and the general themes emanating from the exchange. Both took notes from this discussion. The researcher listened to tapes of each of the groups and noted responses to questions and general themes from the discussion in each group. For the final report of this study, the

tapes will be transcribed and the co-facilitators will complete a thorough analysis of their content.

Findings

The women provided us with rich descriptions of their child care experiences and their commitment to protecting their children from harm. They also shared their struggles to maintain themselves and their children and to be free of the welfare system. For each woman, the path to “freedom” was different. Some sought education, others moved into employment through community work experience (CWEP), some held multiple jobs at any one time, and others had always worked outside of their homes. One woman’s marriage moved her out of poverty and many women depended on extended family for support, both financial and emotional.

Child Care Experiences

All of the women had used both formal and informal (unregulated) child care providers. All of them had at one time depended upon family and friends for care. Some described creating a network of care providers from among their extended family members and friends, at times using six or seven different people, so that the care of their children would not become a burden to any one person. When discussing family child care settings, many did not distinguish between using formal (licensed or regulated care) and informal arrangements, in the belief that training requirements and health and safety standards could be manipulated. For their infant or toddler children, most of the women preferred a family child care setting with a family they knew, whether the setting met licensing requirements or not. Parents viewed these children as most vulnerable to harm, abuse, or injury and indicated that they relied upon their own knowledge of and intuition

about the provider to assure their child's safety. These parents also indicated that they would use center care or an educational program when their child could talk and tell her or his mother about the events of the day. Other mothers viewed center care as best even for their younger children, in the belief that caregivers in child care centers are more closely observed by supervisors and more accountable for their time than are family child care providers. Thus, these mothers thought that their child would be safer in a center than in a family child care setting.

Accessibility of care. Many parents were deeply frustrated because of the obstacles they encountered when attempting to access child care. They cited lack of availability of sick child care, shift care, care on weekends, and extended hours of care. They felt extremely limited in their choice of settings because they live in the central city.

Cost of care. Parents appear to choose informal care for two reasons. As mentioned earlier, many of these women preferred that family members or friends care for their youngest children to protect the children's safety. Other reasons for this choice include cost. Regulated, formal care, whether in homes or in centers tends to be more expensive than informal, unregulated care. Care provided by friends, grandmothers or other relatives often occurs with no monetary cost to parents. They may develop a barter system or set up cooperative child care arrangements; however these parents and their family members and/or friends do not exchange money.

Quality of Care. Participants expressed concerns about the quality of care available to them. They wanted their children to receive attention, to enjoy play with a caring adult. They valued their children's physical and emotional safety. As the children grew to pre-school age, parents wanted educational and developmental experiences so

their children would be ready for school. They also wanted their children to learn to respect and care for others. These parents wanted their school-age children to be involved in structured activities in safe environments. For the most part, they did not believe that special training was needed to assure a high quality of care. They did indicate that a caregiver who closely attended to children, who would provide a caring and loving atmosphere, and had responsibility for only a few children could meet their requirements for quality. Several parents used Head Start centers as their primary child care arrangement. These parents discussed their involvement in the activities and operation of the center. For them, involvement added significantly to the perception of the program's quality.

Shopping for child care. Participants used several strategies as they sought child care. Some relied on impressions of friends or family members who may have used a particular provider or child care center. Others visited several sites at various times and often went unannounced. Some took their child or children with them on these visits to determine their child's ability to fit into the activities or to engage with the provider. One woman indicated the need for educating others about the best ways to shop for child care, highlighting indications of quality (or lack of it) in each type of child care setting.

Use of Child Care Subsidies

Participants expressed very strong feelings when discussing the role of subsidies or vouchers in their child care experiences. They were clearly angry and frustrated by the manner in which many workers had treated them. Many of the participants felt disrespected, ignored, and even sabotaged in their attempts to gain and use subsidized care. They indicated that workers did not return their calls, kept them waiting, and spoke

to them in a rude manner. At least three women told us that they had gone to the welfare office during their workday lunch break to meet with child care staff and were kept waiting for as long as two hours. Each of these women indicated that she feared losing her job because she did not return to work on time. One woman reported that she had used a lunch break to bring some documentation to her child care worker. The worker was not there and no other staff would accept her documents. She again waited for over an hour and was late returning to work. Several of the participants indicated that their work and family schedules did not allow them to meet the demands of the child care and cash assistance program workers. They could not get to the welfare office before or after work and were not able to see their workers during lunch. Thus, although they were eligible for benefits, they chose not to accept or pursue them.

Other women did not take advantage of subsidies because they received incorrect and/or confusing information, or they received no information at all. Two women stated that they had only learned about child care vouchers when they visited a center to investigate care for their children. Some of the women had become employed and should have been eligible for transitional services, but they were not informed of ways to access transitional child care. Other women were completing their transitional benefit period and should have been eligible for non-guaranteed care. Again inaccurate information or no information was provided. During this portion of the discussion, we ascertained that some of the confusion might have occurred when the County had limited the availability of non-guaranteed care. However, comments about confusing information from workers and misinformation were pervasive among the groups and appeared to be not limited to a point in time.

Finally, some of the women did not use subsidized care because they could not afford it. They were earning enough money that their co-payment was far higher than they were able to pay. For example, one parent of two pre-school children had to pay almost \$400 a month as a co-payment for child care. She discussed this problem with her mother, who subsequently left her job to care for the children. Another parent told the group that her co-payment was like a “second rent” and she could not pay it. She arranged for care among family members and friends. One woman left her job because she could not afford the co-payment for care and was not able to locate suitable informal care arrangements. All of these women indicated that the expectation that one could move from welfare participation to complete independence in a year was beyond reality. With net pay of approximately \$1,100 per month, they could not pay full rent, buy food, pay utilities, and pay for child care too.

THEMES FROM THE CHILD CARE DISCUSSIONS

Several themes emerged from the discussions we have reported. We summarize these below:

- Parents prefer placing their infants and toddlers in child care with family and friends whom they know and trust. Whether their child is in a licensed or unlicensed setting, families wanted to know the caregiver, be familiar with the type of care their children would receive, and trust that they would receive honest answers to their questions.
- Safety of children is the greatest concern of these families. Whatever the age of their children, parents wanted a safe atmosphere, where children would be given loving care and attention. They had great concern that in settings with little supervision and

accountability, their children could be ignored, physically harmed, or sexually assaulted.

- Parents want to have choices about the care their children receive. Low income working parents living in the city want the same kinds of child care choices that suburban middle and upper income families have available to them. They want family child care settings in which the providers attend closely to the children in their care. When their children are pre-schoolers, they want centers that have many resources available, offer quality educational programs, and permit them to have some involvement. They want school age care that provides activities, supervised play, and safe space for their older children. They want to be able to bring someone they know into their own homes to care for their children.
- Use of child care subsidies depends on adequate choice, accessibility of care, cost of care, and accurate information offered in a timely and respectful manner. Participants' experiences with the County's child care subsidy system were very disturbing to us. If the system is to assist people to use child care and maintain employment, it must be responsive to their needs. Participants were clearly distressed by rudeness, inaccessibility of workers, misinformation, and confusion about the availability of subsidies. Everyone who is eligible for child care services should be clearly informed about what is available to them. Women in the groups were also frustrated by the required co-payments and the expectation that, despite their low income earned wages, they can afford to significantly contribute to child care costs. Finally, use of subsidies is very closely associated with participants' beliefs that they can make choices about the type of setting and specific kind of child care arrangement available

to them. Participants want to determine their care arrangements and have the child care voucher honored for the provider of their choice.

RECOMMENDATIONS

Based upon the discussions and the themes noted above, we make the following recommendations:

- The system for accessing child care subsidies must be seamless, responsive to the needs of parents in education and training and to those who have become employed. All families that are eligible for subsidized care should receive accurate, timely, and unambiguous information about the availability of subsidies. They should receive this information several times while working with the TANF program or obtaining non-guaranteed care. Workers, whatever their private beliefs, should behave in a professional manner with all clients. Child care staff must work closely with other assistance staff to assure that parents receive the information and assistance they need. Workers should be available to working parents and those in other work activities at convenient times for parents, recognizing that parents need this assistance to maintain their employment and/or school attendance.
- Measures to expand the supply and mix of child care arrangements in the central city should be carefully considered. Families living in the city want child care choices that suburban families have. Vouchers should be usable in a variety of care settings to meet parents' needs. Families that want to use Head Start should have access to these centers for the full day. Innovative mechanisms for training and regulating in-home providers should be sought, so that these informal care providers can be paid for their services.

- All parents need to understand how to shop for a care provider. Parents need to have information about what they should look for as they seek a provider. They need to understand the child care marketplace and be thoroughly familiar with licensing standards and health and safety measures. They need to feel their children will be secure and safe in a setting they choose.
- Consider mechanisms to ease the co-payment for families just beginning their employment. If quality care in a regulated child care system is a goal, we must find ways to make such a system affordable even to the poorest families. That might involve increasing the supply of full day Head Start slots so that additional families can use this care. It might mean re-considering the co-payment structure. It might involve some combination of strategies that would increase the child care supply from funding sources other than the County's child care subsidies. Whatever strategies are chosen, attention must be paid to the affordability of child care within the current regulated system.



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