

# The Battle Cry for Child Care

How one group is fighting to change the way young children are watched in this country.

BY LAUREN BARACK

**T**he overnight assignment to Washington is my first work trip away from my daughter Harper. Besides my nervousness leaving her, I have to create a patchwork of coverage so that someone can pick her up from school and be with her in the afternoon until my husband can get home to make her dinner, sing her to sleep, and get her dressed the next morning—all my usual routine, which Michael and I agreed on before Harper's birth.

But I count myself one of the lucky ones. I work as a full-time freelance writer, clocking in an average of about 40 hours a week, and have crafted a life so I can be available when Harper needs me. An interview can be rescheduled for a pediatrician's appointment. A deadline can be met by drinking strong coffee at night so I don't have to miss a school trip during the day. A telephone call to discuss a new assignment can be put on hold to soothe a temper tantrum, thanks to sympathetic editors who understand when my daughter takes priority.

Harper's now in pre-kindergarten. But even when she was an infant I struggled with her care, juggling family, friends and my husband's work schedule so I could keep one foot in each world. Still, I didn't have to choose, as other parents have, between my career and the safety of my daughter. True, I did have to give up my coveted job at one of the largest newspapers in the country—not an easy decision by far. But then again I didn't put Harper into a child-care center; leave her in the care of people I barely knew; and hope that she would not just be happy, but safe, when I picked her up at the end of a long work day—the very situation that parents of the nearly 12 million children in child care face in our country each day.

And there's no consistency from state to state. In California, for example, child-care providers are inspected only once every five years. In Virginia, state law allows moms to leave their children with child-care workers hired often without any experience. (In many



states, even the pedicurist down the block is required to have six months of training.)

So I caught the Delta Shuttle to Washington on a warm, late-winter afternoon for the country's biggest gathering of child-care experts—the members of the National Association of Child Care Resource and Referral Agencies (NACCRRA). The group was holding its annual conference at the Hyatt Regency on Capital Hill and celebrating its twentieth anniversary of helping parents find a solution to their child-care needs. But now NACCRRA believes it's not enough to find a place for a child. Now, they want to ensure that those places are safe.

The child-care advocacy group hopes to educate anyone who affects the well-being of a child—every parent, every member of Congress—on the urgent need for more training for every child care worker, more oversight of centers, better federal standards and more funding. NACCRRA's deadline is the reauthorization of the Child Care & Development Block Grant, set for 2012, which primarily assists with the cost of child care for low-income families and families on (or moving away from) public assistance. The grant does little to assist middle-class parents, but setting higher standards for centers means better standards for all children.

I talk with Linda Smith, the group's executive director, earlier in the week so she can pepper me with useful statistics. Some I know all too well—I've lived them. Like the fact that 57 percent of all mothers return to work within the first six months of giving birth. Or that the child-care workers, 97 percent of whom are women, make on average \$8.68 per hour, according to NACCRRA. Their pay went up just 11 percent from 1982 to 1997, compared to the wage increase of 79 percent enjoyed by all female workers for the same period, according to data from the U.S. Census Bureau.

Now, if the center is in New York, state law mandates that child-care workers have at least minimal training—but not early childhood classes, CPR or first aid. They don't even need to have associate's degrees, according to the National Child Care Information Center. "The current status on child care is pitiful," says Smith, who has led NACCRRA for nearly four years. "So we want to get control of the quality issues." Still, she believes there's a long road ahead.

Barack on Capitol Hill for the National Association of Child Care Resource and Referral Agencies' 20th anniversary.



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### Child Care and Brain Development

Parents can pick up a newspaper, turn on the television or scan the Web and find myriad stories about our nation's health-care and insurance crisis. But rarely does news on child care come up unless it's to report on a toddler who's been harmed at a center. Few are taking up this cause. Yet experts believe that the daytime care children receive during those first five years is as central to their physical and mental well-being as regular check-ups with their pediatricians.

“Those early years are where it all begins,” said Renee Jenkins, MD, the president-elect of the American Academy of Pediatrics (AAP), to her coffee-drinking audience. (Jenkins' early-morning speech followed a night of celebration at NACCRRRA's twentieth-anniversary dinner.) “Ninety percent of brain development occurs within the first five years of life.”

Jenkins, a pediatrician who has cultured sore throats, diagnosed ear infections and vaccinated the arms of children for more than 30 years, (See “The Doctor Is In,” page 38), put her own 26-year-old daughter into child care—where she “survived and thrived”—at 6 months old. Still, Jenkins is all too clear about the choices parents have to make about who will watch their children—choices that are not just emotionally and financially difficult, but often between one substandard option and another. “Child-care quality, especially for babies, is nowhere where it needs to be,” she told the crowd. “Just eight percent of infants and toddlers are considered to be in good or quality care.”

In a recent NACCRRRA survey ranking each state's child-care centers on standards and oversight on a 150-point scale, only two states scored 90 or above—and no state broke 100, Smith says. (The survey examined centers on 15 basic criteria—including educational training for workers, safety records, teacher-to-child ratio and licensing.) Smith says she worries that parents lull themselves into complacency, needing a place for their infant, but not knowing—or wanting to know—how bad these centers can be. “We ran a parents' poll last year—most parents think that child-care centers are inspected and the workers trained,” Smith says. “They're not.”

So, instead, parents hope. They see the warm smiles, the clean coat of paint and the shelves full of toys—and want to believe

everything will be okay. Just like Myra Holt, with the Childcare Resource Network in Fort Payne, Ala., who enrolled her 2-year-old daughter in one of “those new facilities,” she says. “But my daughter was miserable and would cry when I tried to take her every morning. It turns out they didn't change her diaper.”

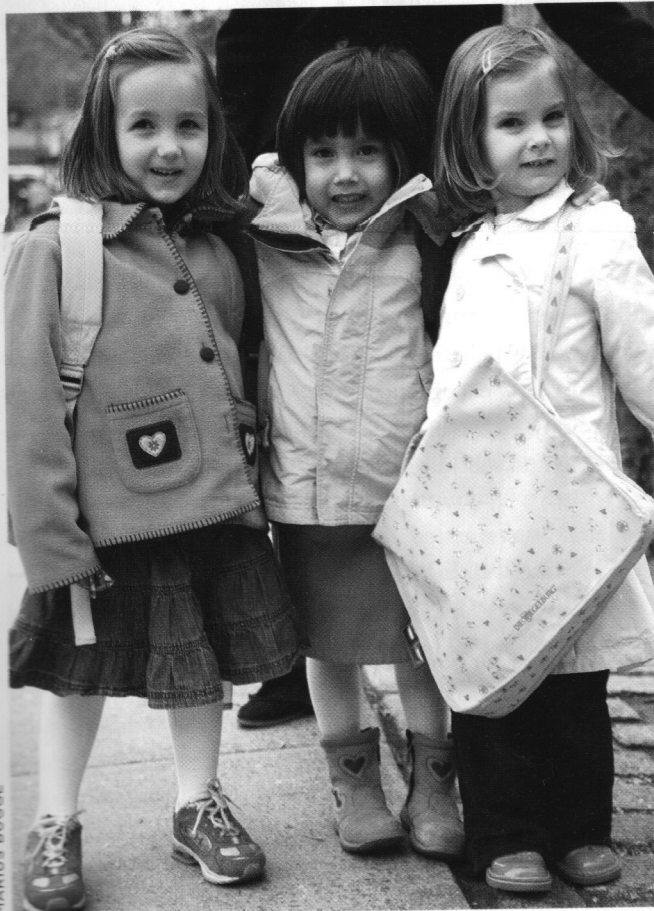
### The Cost of Good, Safe Care

Lisa McCoy, with the Early Childhood Alliance, fields about 2,000 calls a year to her agency in Fort Wayne, Ind., from parents urgently needing help on where they can place their child. If a parent makes a low-enough income, they can usually qualify for a federal subsidy—some of the \$11 billion given out annually by the government to subsidize child care, according to the Child Care

### FIVE THINGS YOU CAN DO TO IMPROVE CHILD CARE ACROSS THE COUNTRY:

- Petition your governor to strengthen the training requirements for child-care workers in your state by going to NACCRRRA's Web site: [highqualitychildcare.org/naccrra\\_main/home.html](http://highqualitychildcare.org/naccrra_main/home.html).
- Write your local members of Congress to voice your support for the Choices in Child Care Act and the Family and Medical Leave Expansion Act, which allows qualified parents to have paid time off during their child's first year. The Web address is: [clinton.senate.gov/news/statements/details.cfm?id=268459](http://clinton.senate.gov/news/statements/details.cfm?id=268459).
- Share stories of your experience with other parents, check on current legislation and even learn how to write your own bill on the Web site of Zero to Three ([www.zerotothree.org](http://www.zerotothree.org)), a national group which supports professionals who work with infants and toddlers.
- Discover how to connect to programs in your own community and how to pitch a story about child care to the media, at Parents as Teachers ([www.parentsasteacher.org](http://www.parentsasteacher.org)), a national organization which helps parents learn how they can shape and encourage their child's life.
- Join the Children's Champion listserv, sponsored by the National Association for the Education of Young Children, to talk with others on how to shape public policy on this issue: [www.naeyc.org/families/learn\\_more.asp](http://www.naeyc.org/families/learn_more.asp).

There are nearly 12 million children in child care in our country every day. If the care is good, children can thrive.



Smith says. "It's prohibitive. And so that's what's keeping the quality down. The only ones who will take those jobs are the ones without skills."

Mary Davis, with the Childcare Resource Network, would agree. The operator of four centers in rural Alabama, Davis wishes she could offer infant child care. "I would do infant care in a second," she says. "But that's one adult to three or four children—and no one can afford it."

Before Harper's birth I toured child-care centers and interviewed licensed baby nurses. I chose neither option. True, I couldn't wrap my brain around the idea that anyone could take care of my child better than I could. But more important, I didn't feel my husband and I had the means to pay for what I considered good, quality, safe care for our daughter. "The cost to produce high-quality child care is more than most parents can afford," Smith says.

In New York, where I live, the median cost for infant child care with two working parents is about 14 percent of their take-home pay, according to NACCRRA. For a single parent? About 48 percent. "I was in much better shape financially by the time my children were in college," says Smith, who has two children—plus three grandchildren currently in child care. "Your earning power is better when they're in college than when you're a young family starting out. It costs more for a child to be in child care than it does for tuition in a public institution."

Bureau at the U.S. Department of Health and Human Services. "The problem is the gap between parents who do qualify for federal aid, and parents who can't afford child care because of their income," McCoy says.

That's if parents can even find good care. The most expensive child care—and the hardest to find—is actually for infants. Nationally, it can cost upwards of \$18,408 a year for an infant in a full-time center, compared to a high of \$15,340 a year for a 4-year-old, according to NACCRRA. "I tell my clients to start as early as possible," McCoy says. "Get on a waiting list even when you're just pregnant because the infant slots are always full."

NACCRRA believes that the ideal ratio in child-care centers is one adult for every three infants. "But look at the cost of that,"

#### What Rules?

At a lunch on Friday, Smith opens a discussion to a small room about whether NACCRRA should push to license family members—along with friends and neighbors—as about 40 people (mostly women) snack on apples, turkey sandwiches and pretzels. While regulating informal, and underground, care might be difficult, Smith at least wants to see the laws on the books.

Licensing rules and adult-to-children ratios vary from state to state, which is why NACCRRA wants the federal government to set universal standards. In New York, for example, one adult can care for only five 2-year-olds, according to the National Child Care Information Center, part of the U.S. Department of Health & Human Services. In Arizona? 8. Mississippi? 12. But bring up the

Most agree that informal caregivers—the lady down the street watching her neighbors' children—should have some training. But grandma?

issue of licensing grandma, and even those who have long supported NACCRRA's mission will bristle. For some families, grandma is all they can afford. And she is often their safest choice.

In the room, most agree that informal caregivers—such as the lady down the street watching a few of her neighbors' children for a fee—should have some training. But someone from their family? I have to wonder myself why my mother, who managed to raise me without following some federal guideline, shouldn't be allowed to help me raise my daughter without wonks interfering.

Still, Smith is passionate—she pushes the room to consider the possibility that anyone who regularly cares for children needs to be regulated. At the Department of Defense, where Smith served as the director of family policy before coming to NACCRRA, that meant anyone who tended a child for at least 10 scheduled hours a week. The teenage girl who watches a third grader while mom and dad are at the movies might be exempt—but not the college student who cares for the same little girl after school four days a week.

Then a woman in the room stands up and turns the tables. "How many of you have used informal child care?" she asks. At least eight hands, including mine, go up. One woman—who has voiced her opinion that caregivers getting paid federal subsidies to watch children must get licenses—admits she'd hate to see the lady who watches her two young kids once a week be forced to follow regulations, as those licensing demands would throw her out of business. Clearly even those in the field have trouble using their own system. "There is a universal guilt of leaving your child in child care," Alabama's Davis admits.

While not one parent would fight against better standards and licensing requirements for the people who watch children nine hours a day, parents need more immediate help. Waiting until 2012 doesn't help the mom who can't find any affordable way to take care of her child except for a small center at the end of the block where there are too many children and not enough hands. For many, there are no other choices. NACCRRA may be offering the promise of a gold coin someday—but most parents would be happy with pennies today.

Would I have done something differently? Stayed at my job as a reporter and left Harper in child care if there had been some

federal standards I could trust? And if the care had been affordable, maybe even at the newspaper where I worked, and also mimicked the kind of attention—and, let's face it, love—that I would have wanted for her? I don't know because it wasn't offered to me. And at least for the next several years, until the Child Care & Development Block Grant comes up for renewal, parents are going to have to make the same choices, under the same circumstances that I had. Smith hopes that the stress parents face now will inspire them to fight for change in the future. In the meantime those in the field say a parent should have the final word on what is best for his or her child—whether it's a licensed care center, grandma or even a nanny who comes with sterling references.

As we leave a session one morning, toward the end of the conference, Linda Childress, with the Kansas Association of Child Care Resource & Referral Agencies—and a mom of two—leans over the table as I pack up my bag. "Tell them to trust their mommy instincts," she says to me. "Even in this field you have a parental instinct. When looking for child care, tell them to trust their instincts, and not let someone else influence them." **p**

#### FIVE THINGS TO LOOK FOR BEFORE PUTTING YOUR CHILD IN CHILD CARE:

**Training.** Ask what kind of training staff members have in infant/toddler development.

**Licensing.** Check on the licensing restrictions for your state and make sure the center is not exceeding the number of infants and toddlers that can be left with one adult. The address is: [www.naccrra.org/randd/data/FamilyChildCareHomes.php?orderby=State](http://www.naccrra.org/randd/data/FamilyChildCareHomes.php?orderby=State).

**Visiting.** Ask if you are welcome to come and visit the center at any time.

**Connection.** Watch during your visit. Are caregivers speaking to children, even babies? Are they singing and reading? Are they responding to immediate needs? Are they cuddling, hugging, engaging with them?

**Safety.** Make sure the space is clean. Look for organized and distinct areas for eating and for diaper-changing. Are there safe areas for infants to explore?

SOURCE: Zero To Three ([www.zerotothree.org](http://www.zerotothree.org))