





"...we must take further steps to encourage day care programs that will protect our children and provide them with the basis for a full life in later years. Certainly, the suggestion of a program of research, financing and development to serve the children of working mothers, and of parents who for one reason and another cannot provide adequate care during the day, deserves our full support."

- President-elect John F. Kennedy  
November 18, 1960  
Evening Star

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# Preface

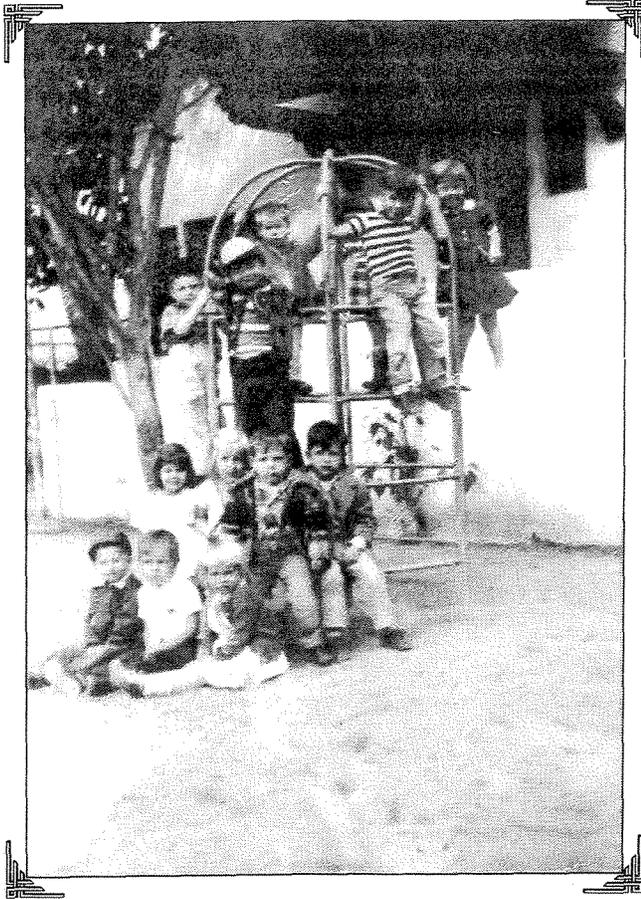
How often have you pondered why child care workers are paid such pitifully low wages? Why welfare reform policies embrace quality services for adults – but not for children? Why there are so many terms to describe services for young children – child care, child development, nursery school and early childhood education? Why policy discussions with normally mild mannered professionals in the field of child development become so terribly contentious?

I have considered these issues and voiced them to a number of colleagues. The responses were fascinating. Not only does the field of child care and development services have a rich history, we have many oral historians who are insightful observers of human nature. Understanding how services have evolved, how victories were won and the missteps that lead to defeats - this is critically important information. With California poised on the brink of major welfare reform, it seemed appropriate to document our history so that we will not be doomed to repeat it.

This project reflects the depth of experience of its Steering Committee, the insights of over 21 contributors, and the keen ear of Kathleen Phillips Tebb, who gave order to an awful lot of information.

Hopefully, this document will inform and inspire actions that result in quality services for all children and families and respectful collaboration among all of the stakeholders.

Kathleen Malaske-Samu



# Profiles Of Contributors

The profiles of these interviewees illustrate their vast contributions to children and families through their committed involvement in child care and development programs, policy formation and advocacy. We are grateful for their pioneering work and deeply appreciate the valuable information they provided for this report.

**Elizabeth Brady, Ph.D.:** For many years worked in child care as a volunteer and through placing M.A. candidates for fieldwork in the M.A. degree in Early Childhood Education for California State University, Northridge, Child Development Centers, Parent Education programs and agencies. Between 1970 and the present, actively involved with the Child Care Resource Center of the San Fernando, Santa Clarita and Antelope valleys, and the Child Care Consortium (until 1994), providing resource and referral for families, in-service education and development for child care professionals, conferences and in-service workshops in communities. Served as board member for the Resource Center and was a founding member with Chris Hewitt. Named in 1996 as Outstanding Contributor to the Child Care field by the Child Care Information Exchange.

**Sue Brock:** Started the first campus child care center in California at the University of California, Berkeley and served as the first director of that program. She joined the California Children's Lobby in its infancy and was significant in its development. In 1978, Brock was hired as a part-time staff member and eventually full-time as its advocate for child care issues. Currently, she works for the Institute of Fiduciary Education.

**Sandy Burud, Ph.D.:** 1994-1996, vice president, Bright Horizons Children's Centers; 1984-present, president, Burud & Associates, Inc; 1981-1984, principal investigator, National Employer Supported Child Care; 1984, consultant, The White House, Office of Private Sector Initiatives & U.S. Department of Labor; project director, Creative Partnerships for Child Care; 1981-1982, member, Board of Directors, Child Educational Center, California Institute of Technology (CIT); 1980, director, On-site Child Educational Center, (CIT); 1977-1979, director, On-site Child Care Center, Methodist Hospital Nursery School. Committees: Bureau of National Affairs, Work and Family Advisory Board; Conference Board, Work & Family Research and Advisory Panel.

**Elizabeth DeCola:** 1915-1916, preschooler at University of childhood, cooperative child care center in Pittsburgh. 1939, M.S., Social Administration; 1939-1941, social worker, on-site child care centers and some cooperative child care; 1941-1943, child welfare worker; 1943-1944, women's counselor, Lockheed; 1946-1950, parent, Cooperative Child Care Program; 1947-1957, social worker, traveler's aid; 1957-1979, child care consultant, representative, California State Department of Social Services; Committees and Task Forces: 1960-1979, Mayor's Advisory Committee, Los Angeles; 1960-present, historian, Ways and Means, Southern California Association for the Education of Young Children (SCAEYC).

**Pat Dorman:** 1974-present, publisher, On the Capitol Doorstep, a monthly newsletter; Child Development Legislative Update, a weekly bill-tracking service and various child care fact sheets; 1995-present, Chair Child Development Coalition; 1995-1995, chair, California Community Consumer Home Economic Advisory Committee; consultant to CAEYC (1978-present), CCDAA (1980-present), Child Development Policy Board (1979-1992). Founding member of CAEYC, California Child Development Coalition Committee. Special areas of expertise include California legislative and budget processes, CDE, DSS, California Child Care and Development Programs.

**Yolie Flores-Aguilar:** 1994-present, director of child care, City of Los Angeles; 1995-present, board member, Los Angeles County Board of Education; 1995-present, Children's Planning Council; 1995-present, treasurer, Los Angeles Roundtable for Children; 1987-1992, work/family manager, Los Angeles Department, of Water & Power. Recently, Aguilar has positioned the City of Los Angeles to play a leadership role in addressing quality issues through the adoption of the Vision and Strategies for Quality Child Care in the City of Los Angeles.

**Susan Fogel, Esq.:** 1994-present, legal director, California Women's Law Center; 1991-1994, attorney, Legal Aid Foundation of Los Angeles; 1992-1993, Los Angeles Roundtable for Children; 1992, attorney, Western Center on Law and Poverty; co-author, An Agenda for Children's Health Care in Los Angeles County; 1993, Committees and Task Forces: Network for Women's and Children's Health Policy Council; Los Angeles County Child Care Advisory Board Planning Committee, Strategic Planning Committee; Consultant to Los Angeles Unified School District on the civil rights of pregnant and parenting teens.

**Emma Gunterman:** 1967-1986, lobbyist and advocate for consumers, children and seniors; 1971, founded On the Capitol Doorstep.

**Anabelle Godwin:** Was involved with teacher education and early childhood education. After World War II, worked in California's Children Centers for over four years. Later, Godwin opened and directed two Jewish nursery schools and taught

child development at UCLA Extension and at Los Angeles community colleges part-time. In 1975, Godwin joined the faculty at Mission College. She is the past chair of the San Fernando Valley Child Care Consortium; co-chaired a committee that produced a book on infant and toddler care that was published by NAEYC. She represented the California Children's Lobby on the Los Angeles Mayor's Advisory Committee on Child Care. She served on the Southern California Association for the Education of Young Children for 30 years.

**Jack Hailey, Ph.D:** Principal Consultant, Senate Office of Research, 1985-present; Acting Director, California Research Bureau, California State Library, 1991-92; Executive Officer, Child Development Programs Advisory Committee, 1979-85; Project Director, Circle Preschool, 1973-79. Committees and Task Forces: California Department of Education's Federal Child Care Block Grant Task Force, 1991; California Department of Education's Child Care Staffing Study Advisory Committee, 1990-91; Senate Child Care Licensing Task Force, 1988-89; California Department of Education's School Readiness Task Force, 1987-88; Senate Child Care Social Insurance Pool Task Forces, 1987-88; Little Hoover Commission's Children's Services Blue Ribbon Advisory Committee, 1986-87 and teacher/consultant, Bay Area Writing Project, University of California, 1976-present.

**Betsy Hiteshew:** Early childhood educator in the 1950's in New York City. Worked for the first Head Start program in Los Angeles and on a volunteer basis for preschool programs for the Los Angeles Unified School District. Began child advocacy work with the American Association of University Women and became president of the Southern California Association for the Education of Young Children (SCAEYC) between 1977 and 1979. She was the first full-time faculty member, director of the Child Development Center at Santa Monica College in 1971. Member of the policy board of the Children's Lobby between 1983-1986 and on the governing board of NAEYC between 1984-1987.

**Francis Lee:** 1936, Social Work, USC; 1952, M.S.W., USC. 1953-1958, Licensing Supervisor, California Department of Social Services; 1958-1967, Licensing Supervisor, Southern California Counties; 1967-1974, Head of Adoptions; 1970-1974, Chief of Licensing for the State Department of Social Services. Committees and Task Forces: 1977-1978, Licensing Regulations Committee.

**Kathy Lester:** 1950, M.S.W., USC. 1950-1959, Mental Hygiene, aftercare supervisor; 1959-1965, director, Psychiatric Children's Services, Children's Hospital, Los Angeles; 1966-1972, social work consultant, Department of Social Services; 1974-1983, supervisor/manager, Licensing, Los Angeles County; 1989-present, Pasadena Partnership School Age Child Care. Committees and Task Forces: National Association of Social Workers, Professional Standards Committee; Child

Care Standards Commission on Children's Institutions; Pasadena Standards for Children; Pasadena Child Care Consortium.

**Linda Lewis:** 1972, Elementary Teaching Credential, Pacific Oaks; 1973, director, Pasadena Volunteer Bureau; 1974-1975, curriculum writer and teacher, Los Angeles Unified School District, Special Education Division; 1976-1978, director, Child Care Information Service, Pasadena; 1979-1981, planning consultant, United Way, Inc.; 1981-1989, Executive Director, Information and Referral Federation, LA County; 1989-1992, senior associate for parish development, All Saints Church; 1992-present, executive director, Children's Services Agencies, Los Angeles.

**June Solnit Sale:** 1946, bachelor of arts in Economics, UCLA. 1962, Certificate in Early Childhood Education, Center for Early Education. 1969, M.S.W., Community Organization, UCLA. Director, Summer 1965 Head Start Program for Center for Early Education; 1966-68, educational coordinator, Head Start for Los Angeles County Economic and Youth Opportunities Agency; 1969-72, director, Community Family Day Care Project, Pacific Oaks College; 1969-79, faculty member and director of extension, Pacific Oaks College; 1979-92, executive director, UCLA Child Care Services; 1994-95, director of child development services, Santa Monica/Malibu Unified School District. Has been a member and chair of the Los Angeles Mayor's Advisory Committee; member and chair of the Governor's Child Development Programs Advisory Committee. Currently is a child care consultant as executive editor of the Working Parents Newsletter.

**Mary Soth:** Director, Long Beach Day Nursery, 1978-present. Prior to that, Soth taught for 10 years at Long Beach City College, educating teachers for work in early childhood education.

**Alice Walker Duff, Ph.D.** 1965-1970, Upward Bound, Occidental College; 1970, assistant administrative analyst, School of Education, UCLA; 1970-1971, tutor, Supplemental Education Program & Coordinator, Black Student Recruitment, UCLA; 1971-1972, administrative analyst, Model Neighborhood Commission on Justice, Los Angeles; 1972-1973; instructor, Sociology, Mohawk Community College; 1974-1975, consultant, Utica Community Action 7 Associate Faculty, Afro-American Literature Utica College of Syracuse University; 1976-1978 coordinator, Child Care Referral Service, Joint Center for Community Services, Los Angeles; 1978-1980, assistant director, Child Development Services Division, Joint Center for Community Services, Los Angeles; 1980-1993, deputy director, Crystal Stairs, Inc.; 1988-1994, principal, Morris McNeal, Child Care Planning and Management Firm, Los Angeles; 1993-present, executive director, Crystal Stairs, Inc. Board Membership: California Alternative Payment Program Association, Appointed; California Child Care

Advocates, founding member; California Child Care Resource and Referral Network; LA's Best; Los Angeles Affiliate of National Black Child Development Institute, LA City Commission on Children Youth and Their Families, Child Care Committee; Los Angeles County Child Care Planning Committee; Los Angeles County Family Preservation Policy; Los Angeles Educational Partnership, board member/vice president; Los Angeles Ethics Commission, inaugural member; NAACP; NAEYC State and Local Affiliate; NAEYC Work Force.

**Vivian Weinstein:** 1936-1942, Group work with pre-adolescents; 1943-1960, various positions as teacher and director for children's programs; 1960-1970, coordinator of services, Marianne Frostig Center of Educational Therapy, Los Angeles; 1970-1970, consultant, Los Angeles Urban League Head Start; 1971-1973, child health training coordinator, Charles Drew Postgraduate Medical School, Los Angeles; 1973, M.A., Early Childhood; 1974, Established State-funded infant and preschool center at the King Drew Medical Center - the first center to serve infants in South Central and established a state preschool program housed in a public school, operated by King Drew- and among the first programs to integrate children with developmental disabilities; 1973, assistant, subsequently associate, professor, associate director, Child Development Division, Charles Drew Postgraduate Medical School; Committees and Task Forces: 1972, Appointed to the first Mayor's Child Care Advisory Board in Los Angeles, elected chair and served two terms; 1974, Wilson Riles Task Force on Child Development and Child Care Planning; 1977-1979, Appointed to the Governors Advisory Committee (now CDPAC), served two terms as chair. Served on many local and State committees, task forces and commissions on child care health issues, young children with disabilities, child abuse and neglect, infants born exposed to drugs. Spoken widely at local, State and national conferences and meetings. Currently, member, Los Angeles County Child Care Advisory Board; Chair, Los Angeles Planning Committee on Block Grant Funding; Chair, Children's Committee of the Los Angeles County Managed Health Care Planning Council.

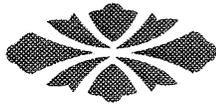
**Marge Wyatt:** 1956-1965, member, Board of Directors, NAACP, Pasadena; 1969-1975, member, Board of Directors YWCA, Pasadena; 1971-1976, member and chair, Pasadena Child Care Consortium; 1973-1976, chair and member, Child Care Information Service; 1973-1993, member, Board of Directors, United Way of San Gabriel Valley and Greater Los Angeles; 1977-1985, Pasadena School Board member (president for two years); 1977-1978, chair, Wilson Riles Commission to Develop a State Child Care Plan; 1984-1987, member and vice president, Pasadena Mental Health Association; 1985-1995, member, Board of Directors, Pasadena Education Foundation.

**Brenda Yonemura:** 1996-97, director of Pasadena Day Nursery which was established in 1910.

**Docia Zavitkovsky:** 1936-1996, volunteer, aide, teacher, supervisor, director in co-ops, private and publicly-funded programs. 1944-1983, Santa Monica Unified School District Children's Centers; 1958-1978, instructor, child development, Santa Monica College; 1965-1975, national and State consultant, Head Start and Follow Through; president, National Association for the Education of Young Children; board of directors, Council for Early Childhood Professional Recognition (CDA); regular feature contributor to the Child Care Information Exchange.







# Introduction

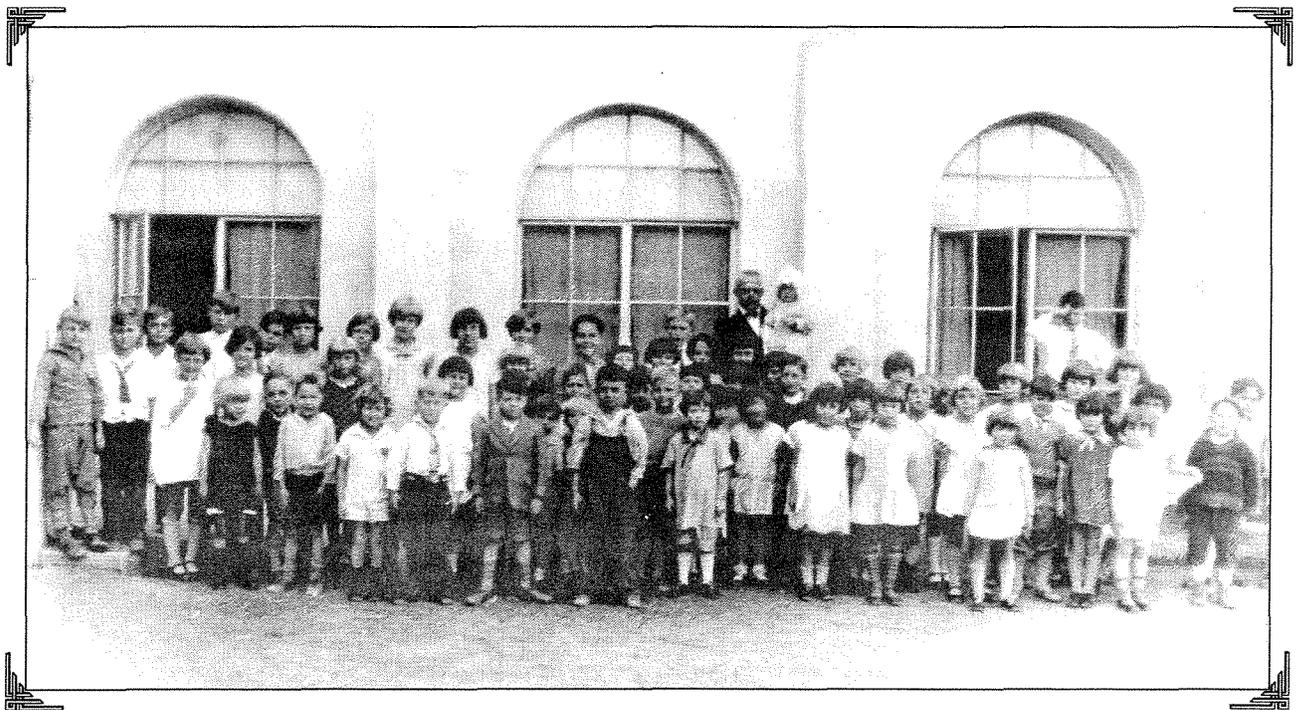
On the brink of a new century, with passage of major federal welfare legislation, child care and development services are at a critical juncture. Although many challenges confront children, families, child advocates and professionals who serve children and legislators, it is an opportune time to thoughtfully reflect on the history of the child care and development delivery system to better inform our future decision making. These decisions are critical because they will set the course for child care and development services over the next several decades.

This study reveals that underlying philosophies about whom child care was meant to serve, how it changed at different points in the twentieth century, and how this has impacted the funding, administration, regulation, and quality of child care and development services. This report also documents critical developments in the child care and development delivery system from 1900 to the present, **with particular focus on Los Angeles County**. Because of its size, ethnic, economic and geographic diversity, Los Angeles County's experience has State and national relevance. State and national policies impacted the evolution of child care and development services in Los Angeles County, so these are also discussed to set Los Angeles in a broader historical context. This report examines important issues and developments of each era, based on oral histories of key child care and development leaders and a review of historical documents and scientific literature, and identifies lessons to be learned. It concludes with questions about the future of child care and development services and how history might inform and guide the decision making process of State and local leaders.

Several researchers have previously examined various historical aspects of the child care and development field at the national level (Clarke-Stewart, 1993; Robins & Weiner, 1978; Steinfels, 1973), but there is no detailed, comprehensive history of the child care and development delivery system at the local and State level in California. Much of this history lives in the memories of important child care and development leaders, some of whom began their careers with the advent of Lanham Act child care programs during World War II. This research seeks to capture at least a portion of this wealth of information. Oral histories were collected in 20 interviews, between July and September 1996 with key child care and development leaders, primarily from Los Angeles County. [1] Participants were selected on the basis of their vast experience and knowledge of the child care and development field.

Efforts were made to include at least a sampling of professionals from various sub-fields within the child care and development field, but we were not able to contact all child care and development pioneers. Those interviewed provided extremely useful information about the impact of national, State and local policies on the child care and development delivery system.

Providing accessible, affordable quality child care has been an ongoing challenge; yet, in spite of these challenges, California has made some important decisions to support child care and promote quality. **If history teaches one lesson it is this:** for a vision to become a reality, it must be shared. This requires the active engagement of all in developing the vision. It is our fervent hope that this report will help stimulate thinking, discussion and development of ideas which will bring this about. "To know nothing of the past is to understand little of the present and to have no conception of the future...yesterday is today's tomorrow" (Alna Johnston, Footprints of the Pheasant in the Snow).



**Joe's Kids:** Local Long Beach businessman Joe Mottell, one of the earliest benefactors of the Long Beach Day Nursery, with "his kids" during the 1920s. Source: Long Beach Day Nursery.

## 1900-1930

"In the early 1900s, the goal of social workers, settlement houses and group child care was to help prepare those children to become 'Americans' with regard to diet, cleanliness, and American child-rearing practices." -- Vivian Weinstein

### Key Issues And Developments

- **Formal child care serves to "socialize" immigrants and "dysfunctional" families according to mainstream values.** Urbanization, industrialization and the influx of immigrants in the early 1900s fueled the development of formal child care arrangements in California because many women had to work to help provide for their families. Some believed that these trends were causing the breakdown of family life and child rearing practices which, in turn, were producing children who were "small, dirty, ill-behaved" and not prepared for adult roles in society (Steinfels, 1973, p. 41). Day nurseries provided the first formal child care services to children from low-income and/or immigrant families (Robins & Weiner, 1978). Although children were the service recipients, these nurseries were developed to combat the "maladies" associated with immigrant families, poverty, single-parent households and working mothers. In Los Angeles, charitable organizations and individuals operated day nurseries, including the Breed Street Children's Center in Los Angeles, established by the Cheerful Helpers (an auxiliary of the Thaliens Clinic)<sup>[2]</sup>, the Pasadena Day Nursery, in 1910 by a group of philanthropic

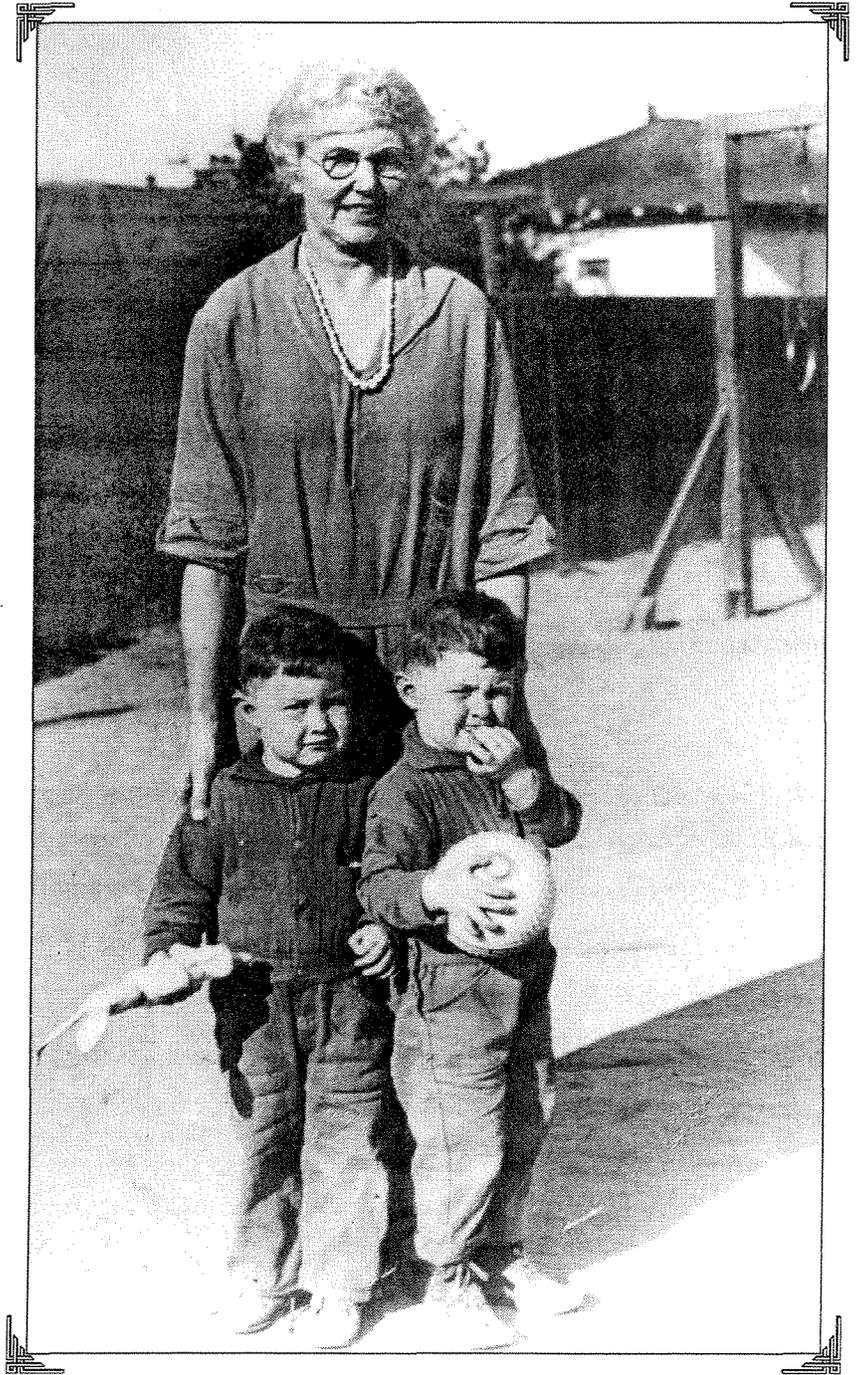
women<sup>[5]</sup>, and the Long Beach Day Nursery, in 1912 by the Associated Charities of Long Beach<sup>[4]</sup>.

Many of these charity organizations viewed the need for day nurseries as temporary, "which, with improving economic and social conditions, would naturally be phased out of existence...the proper place for development is in the home" (Steinfels, 1973, p. 51). However, in 1913, the National Federation of Day Nurseries found that families faced a variety of situations that made it necessary for women to work. Some worked because their husbands were sick, deceased or had insufficient incomes. Members of the Federation concluded that these situations would not be readily ameliorated with widows' pensions<sup>[5]</sup> and claimed that nurseries provided additional advantages for children from poor homes (Steinfels, 1973). Charity workers were involved with child care for many years. In fact, both the Pasadena and Long Beach Day Nurseries are still in operation and have evolved with changing times and increased knowledge about child development.

Much less is known about informal child care arrangements in the early 1900s. Yet it has been documented that, throughout history, most children have been cared for by domestics, neighbors and/or relatives (Robins & Weiner, 1978). For example,

Child care in the African American communities was fairly well established. There was and still is a lot of informal child care because African American women have had to work the entire time they have been in the United States (Dr. Alice Walker Duff).

- **Regulation of child care emerges as a state issue.** In the early 1900s there were two main efforts to regulate child care (1) the Association of Day Nurseries<sup>[6]</sup> voluntary standards and (2)



Florence Fisher, first employee of the Long Beach Day Nursery, rounding up two of her young charges. Source: Long Beach Day Nursery.

California's mandatory licensing regulations. The Association of Day Nurseries published standards for day nurseries in 1917 that emphasized health, hygiene and sanitation. They also made the first recommendations for staff child ratios: "eight infants or sixteen runabouts [toddlers] should be under the care of one attendant." Membership in the Day Nursery Association was voluntary and, as a result, the "pressure for compliance depended on educational efforts rather than punitive measures" (Steinfels, 1973, p.54). While members of the Day Nursery Association were interested in improving quality on a voluntary basis, California passed its first licensing law in 1911 directed toward the regulation of children's home finding societies (foster homes and orphanages) (Hubner, 1980), in response to reports of child abuse in these institutions (Robins & Weiner, 1978). According to Hubner (1980), in 1913, licensing provisions for day nurseries were added to the original 1911 statute. The first day nursery standards for California were not adopted until 1920 (On the Capitol Doorstep, 1995) and in 1927, child day care programs were included (DSS, Biennial Report, 1930-32). The State Board of Charities and Corrections carried out enforcement activities (Hubner, 1980). However, early licensing standards were rarely backed up by adequate enforcement (Robins & Weiner, 1978).

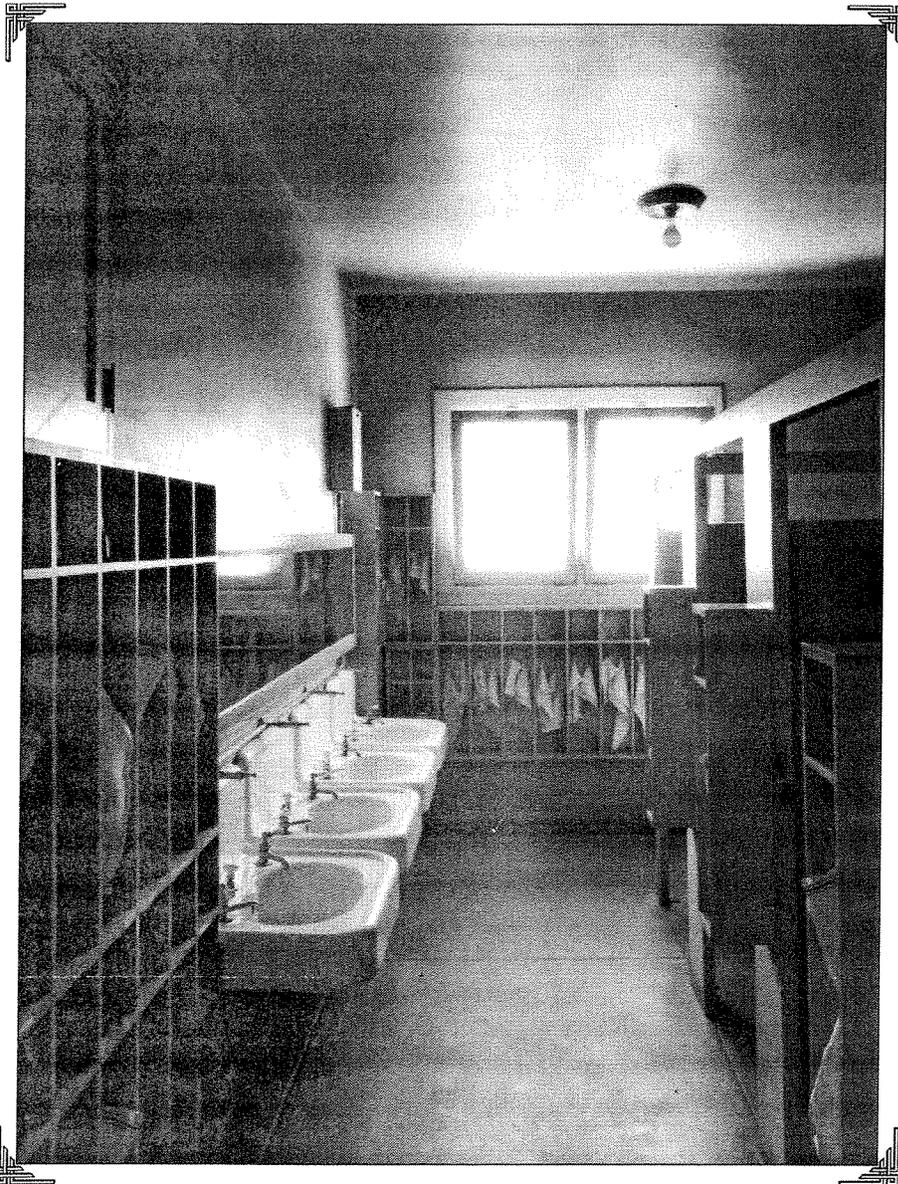
• **World War I (1917-1918) increases the demand for child care.** Large numbers of women went to work in factories that supported the war effort (Robins & Weiner, 1978). During this period, there was no federal support for child care and child care demands were met through local governments, expansion of existing private facilities and informal child care arrangements (Robins & Weiner, 1978). Although there was no federal action, the war indirectly highlighted child care issues, "because of the common belief that early childhood problems were

responsible for the high rate of physical and mental deficiencies that disqualified men for military service" (Robins & Weiner, 1978, p.31).

After World War I, day nurseries declined in popularity and interest for several reasons: (1) legislation in 1921 restricted immigration; (2) passage of the widow's pension allowed many mothers to stay home to care for their children— albeit in "genteel poverty" (Steinfels, 1973); (3) the 1920s seemed to be a period of affluence and economic expansion which,

## **Profile: The Long Beach Day Nursery**

On November 4, 1912, the Long Beach Day Nursery, a non-profit school for children living in single parent homes with working mothers, was conceived. It was housed with Associated Charities. The founding women, "sought to redeem a social condition and improve their community by their volunteer service" (Newton, Long Beach Story, 1985). Based on excerpts from the Long Beach Day Nursery file, "at the turn of the century, a lifestyle as a single mother was looked upon as devastating. The home was considered to be the social, governmental and economic unit, a cradle wherein good citizenship was made possible. Through the misfortune of illness, death or separation, many mothers were forced to find employment outside the home in order to keep their families together. What to do for their children was indeed a problem" (p.1). At the Long Beach Day Nursery, records indicate that children spent time in outdoor play, story-telling, music appreciation and crafts. After lunch, the children napped and teachers bathed and dressed in more formal attire for the afternoon session. They were taught manners while they ate supper.



A 1920s-era child care center bathroom, complete with individual "towel cubbies."

"did not actually get rid of slums or poverty, but in flush times there seemed to be less reason to notice that not everyone's street was paved in gold. If men were working, they could support their families, and that made the day nursery seem less of a necessity" (Steinfels, 1973, p. 65).

- **Knowledge of child development results in an emphasis on hygiene and structure.**

Although program quality in most day nurseries was below what is now considered quality care, there was a tremendous range in the type of services and quality of care that was offered (Clarke-Stewart, 1993; Robins & Weiner, 1978). For the most part, the charity women implemented programs according to what they believed to be in the best interest of children. Brenda Yonemura, former director of the Pasadena Day Nursery, alluded to this when she described old documents she found at the center:

I can see through some of the pictures and records that the desire for child care was to be 'child centered.' The child care providers are wearing starched white aprons, the children are lined up and everything is perfect. You get the feel of the typical orphanage where everything is very stiff, formal and regimented (1996).

In the early part of the 20th century, child-rearing emphasized health and hygiene. By the 1920s, knowledge of child development was dominated by Watsonian behaviorism which stated that all behavior could be shaped via external rewards and punishments (Salkind, 1985). Vivian Weinstein, who worked in a child care program when a Cheerful Helper visited, recalled the following interaction:

One of the Cheerful Helpers came to visit and was watching a youngster vigorously painting away. She noticed that the boy had painted two suns and asked him why his picture had

two of them [implying there was something wrong with that]. The boy ignored her, as children do, and she repeated her question until the boy finally responded: 'it was a very hot day!'

## Lessons To Be Learned:

- **The philosophy of whom child care should serve impacts the delivery of services.** The Standards of Admissions to Day Nurseries defined child care as a form of family and child welfare using terms like, "problem families, maladjustment, temporary expedients, correct social diagnosis..." (Steinfels, 1973, p.61). In doing so, social workers declared that child care was not a service for "normal" families. Teachers generally disapproved of working mothers and felt that child care should be used as a last resort, only as a better alternative to institutionalization. This view dominated the public's perception and child care was seen as "custodial and an undesirable service to women and families who were not normal" (Steinfels, 1973, p.60). Despite these trends, many women needed and wanted child care. Those who had to work continued to depend on a variety of informal child care arrangements.

- **Because licensing has not included provisions beyond minimal health and safety requirements, it has not guaranteed quality child care.** The first distinctions emerge between quality child care and licensing standards. In this era, quality child care standards were distinct from licensing requirements. Day nurseries could obtain information about quality standards and make efforts to meet those standards; however, these efforts were voluntary. These quality standards were not incorporated into the early licensing laws which laid the foundation for the future of licensing laws that provide minimum health and safety standards only.



## 1930-1940

"The Works Progress Administration during the Depression established child care programs to set up a cottage industry because it was important to find gainful work for the adults" (June Solnit Sale).

### Key Issues And Developments

- **Child care programs serve as an employment service for teachers under the Works Progress Administration (WPA).** The first major public funding for child care in California became available in 1933 under the federal WPA initiated by President Franklin D. Roosevelt (Clarke-Stewart, 1993). In response to the Depression, federal grants were supplied to school districts to establish nursery schools that would provide relief work for teachers, cooks, nurses etc., who otherwise would be unemployed. School districts also established contracts with the junior high schools whose students served as aides in the centers while receiving training in child development.

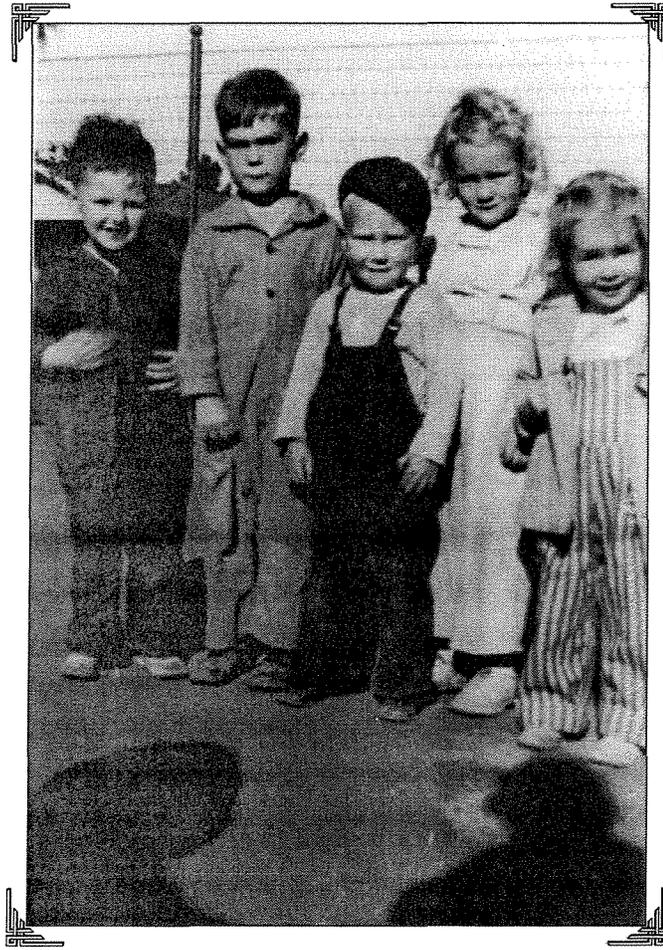
- **Regulation of child care shifts from State to local government.** By 1932, in about 15 California counties, various local agencies assumed responsibility for the investigation and supervision of boarding homes. The State Department of Social Welfare issued licenses based on these agencies' recommendations. "Since 1925, it has been the policy of the State to delegate as much supervision to local organizations as they desire to assume. This is not an evasion of work by the State. It is an invitation to the community to participate in forming standards and a

guarantee that the child will have added protection and the foster mother will have help in meeting her problems" (DSS, Biennial Report, 1930-32, p.60). In 1936, the California legislature passed licensing laws to protect children from the common hazards believed to be present in all types of care received in the absence of their parents (On the Capitol Doorstep, 1995; Hubner, 1980) and replaced the State Board of Charities with the newly-created State Department of Public Welfare to administer day care licensing (Hubner, 1980).

- **Research on children declines.** Abundant research funds from the 1920s were withdrawn during the Depression. However, as the earlier empirical findings became more widely known and established, the field of child and developmental psychology became segregated into sub-fields and research-laboratory schools developed throughout the United States (Cairns, 1983). Most of these institutes awarded degrees that helped build the profession in both research and applied settings.

I was in college in the mid '30s, and we did not call it child development. It was child psychology. During the '30s and '40s, there was the recognition that infancy and early childhood were very important years in human development. Women who worked in the home, as well as professionals, studied child development, although this field of study was usually in home economic departments (Vivian Weinstein).

- **Cooperative child care movement grows.** Cooperative child care was started by the faculty wives at the University of Chicago in 1915. It became increasingly popular between 1930 and 1960 (Clarke-Stewart, 1993) with the growth of child development theory in the United States. Several of the interviewees for this report began their careers in cooperative child care programs.[7]



Women who were at home, many of whom were professionals before they had children, and women who studied about it in home economics initiated cooperative child care (Vivian Weinstein).

The purpose of most cooperatives was to provide children with activities found in other preschool programs and offered parents opportunities to participate and learn more about their children.<sup>181</sup> Despite many of the advantages of cooperative child care, it was not a viable option for most working mothers. Parents were largely responsible for administering the program and providing care, thus if the parent worked, they needed to have a flexible work schedule (Clarke-Stewart, 1993).

## Lessons To Be Learned:

- **Cooperatives demonstrated that when child care is designed to serve children and their families, program quality is improved.**

Cooperatives introduced the notion that child care (particularly the preschool educational experience) was beneficial for children.

With recognition that the early childhood years were important to later development, trained child care providers brought skills to cooperative preschool programs (Vivian Weinstein).

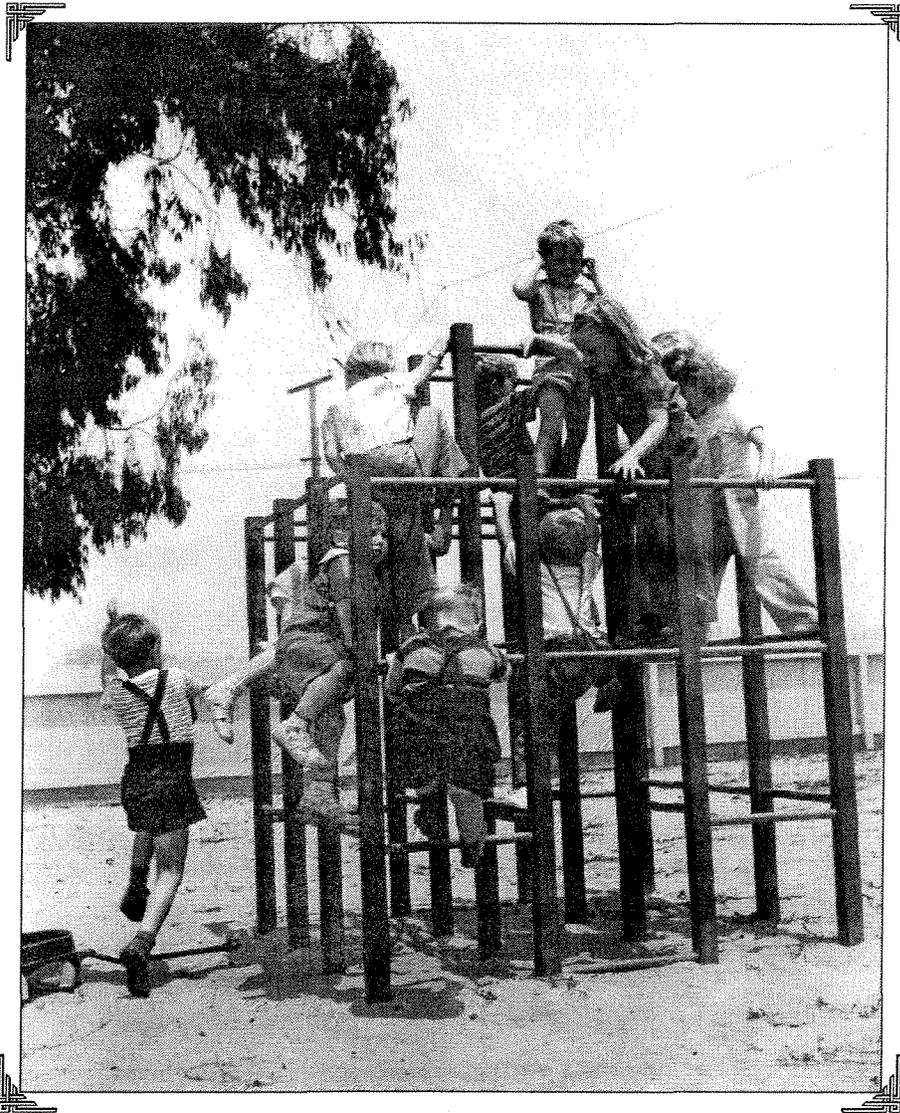
Cooperative child care offered a beneficial preschool experience for children, as well as an opportunity for parents to learn about their child's development (Docia Zavitkovsky).

- **WPA was designed to serve unemployed professionals rather than children, so it has mixed results for child care and development.**

Partly due to the WPA and growing knowledge of child development, day nurseries and cooperatives began to attract professional workers, especially teachers and social workers. Teachers were the first professional workers to move into child care on a full-time basis. Their entry had a mixed impact. Their skills and influence raised the quality of care by introducing an educational component and reducing the prevalence of custodial care, but less attention was paid to the affective and physical needs of children. Nursery school teachers were not trained in theories or methods for dealing with infants and young children, and colleges did not offer specialty courses in early childhood education. For these reasons, children from birth to age two were no longer accepted into these centers (Steinfels, 1973). Furthermore, despite the influx of professionals, salaries were very low.

Many women went into the field for other than monetary reasons. In some ways, this has worked against us, since wages and salaries were secondary to the rewards gained from working with children (June Solnit Sale).

- **Elimination of federal child care subsidies resulted in a loss of needed services.** As a response to the national economic crisis of the Depression, government subsidized child care was temporary. Although the WPA program helped improve the perception of women who used child care (Steinfels, 1973), that, too, was short lived. The WPA program was terminated in 1938, just five years after its inception and the withdrawal of these funds caused many child care centers to close.



Children explore the jungle gym at the Douglas Aircraft Company child care center in Santa Monica in 1944. Source: Douglas Aircraft Company historical archives.

## 1940-1960

"...existing and anticipated requirements for workers in essential activities render necessary the employment of large numbers of women, many of such women may be found to be mothers of young children. No woman responsible for the care of young children should be encouraged or compelled to seek employment which deprives her children of her essential care until after all other sources of labor supply have been exhausted, but if such women are employed, adequate provision for the care of such children will facilitate their employment" (War Manpower Commission, Directive No. IX, August 1942).

### **Key Issues And Developments:**

- **Child care functions as an emergency service for families employed in the war industry.**

The next federally subsidized child care programs came into being under the federal Lanham Act of 1943, strictly as an emergency World War II measure (P.L. 150/1943). The purpose was to meet child care needs of large numbers of women so that they in turn could meet the employment needs of defense-related industries. These child care centers were located mainly at the major shipyards and arms factories. They had a major impact on child care in Los Angeles County because of the concentration of defense-related industries in Los Angeles and Santa Monica.

Some programs, like the Santa Monica Children's Centers, relied on the resourcefulness of dedicated staff and volunteers. Docia Zavitkovsky,

who began work there in 1944, reports:

We worked six days a week, and all holidays except Christmas. When staff was low, we often worked 10-hour days. We were not overly endowed with money, so we made doll beds, stoves, sinks and manipulatives using muffin tins, clothes pins, rubber stoppers, wooden rings, plugs and switches; on rainy days, we closed off the hall of the elementary school and, much to the consternation of the classroom teachers, let the children mop and scrub the hall and wash the windows - under supervision of course! We swept the yard everyday because there was no grass or macadam and carried the boxes of dirt to the alley; we joined parents on Saturdays to paint and repair toys. We were highly motivated. We were proud of our growing ability to cope in any situation, be it as the aide, teacher, cook, housekeeper, laundress, volunteer and even as carpenters and plumbers when necessary.

- **California is the only state where the Department of Education (CDE) administers Lanham funds.** The federal directive mandated state departments of Social Services/Welfare to administer Lanham child care programs. Because CDE was responsible for meeting the educational needs of children, many Californians concerned about child development thought CDE should be responsible for setting standards and supervising child care (Mahler, 1964).<sup>191</sup> In 1942, the California Committee on Children in Wartime was organized to establish basic policies concerning standards for care and supervision of children, provide a clearinghouse of recommendations from interested individuals and community organizations, and help coordinate services throughout the State. Their report recommended that the Superintendent of Public Instruction

to have authority to establish standards for child care centers and issue permits to properly qualified child care personnel. They also suggested that the California Department of Social Welfare (DSS) place infants under two years of age in foster homes (because it was felt inadvisable at that time to place infants in group care) and establish programs for children whose difficulties precluded group care.<sup>[10]</sup> In January 1943, the Legislature enacted an urgency law to "provide a means for meeting an emergency existing in certain communities in this State, created by the employment of women with children in industry as a direct result of the war."<sup>[11]</sup> It authorized governing boards of school districts to establish child care centers for children between two and 16 years of age whose parents were gainfully employed.

• **Expansion of child care during World War II puts pressure on licensing capabilities of Social Welfare.** This pressure accelerated the delegation of licensing to the local levels in 1945 (Hubner, 1980). Locals were permitted to enforce local sanitation, health and hygiene requirements in licensed facilities. In 1946, counties were reimbursed three dollars by the State for each family child care home license per month (Hubner, 1980).

• **World War II ends; Lanham funds withdrawn.** At the close of World War II, the Federal Works Agency announced the termination of Lanham Funds in 1946, which caused child care centers to close (with few exceptions) throughout the nation. Although the war was a major impetus for women to enter the work force, they did not return to their previous jobs as homemakers when the war ended.

• **Parents contest child care closures, and launch an 11-year struggle to continue State subsidies.** Parent, professional and community

partnerships helped the California State Legislature recognize the continuing need for child care for working mothers.

When the War ended and federal funds were withdrawn, parents throughout the State protested so vociferously that legislators, after much debate and soul-searching, enacted a bill that continued California Child Care Centers on a year-to-year basis. The programs remained under the California State Department of Education (Docia Zavitkovsky).

In March 1946, the California Legislature voted to continue these programs for another year. Shortly thereafter, centers were notified that their funds were terminated. Again, the community responded and the following year, the legislature voted to subsidize child care on a year-to-year basis, then later voted to subsidize child care on a two-year basis. Although the Legislature voted to continue operation of the centers for two years, it appropriated funds for only one year.

In 1953, the Legislature passed a law that called for operation of centers for two years, expiring on June 30, 1955. However, in 1953, they allocated funds for only one year. California was the only state that provided funds for child care centers under the jurisdiction of the State Department of Education (Rancho Independent, 1/1/54).

With operation and funding of child care centers in jeopardy once again, child care professionals, parents, business and community leaders in Los Angeles County reconvened and rallied to pressure the Legislature to continue funding of these centers.

Sertoma club members visited Lucerne Day Nursery in Los Angeles

to build support for permanency. [Visiting] members included an insurance broker, auto body service repair person, realty broker (Los Angeles Times, 8/24/54).

Securing funds on a year-to-year basis was no easy task. According to Docia Zavitkovsky,

People in the community - interested, concerned and supportive of continuing the child care program - came together to show their support and to become better informed. Parents and staff had little understanding of the legislative process, but were quick learners. The State Child Care Association asked each local parent association, I believe 46 school districts had child care centers, to each send two delegates to Sacramento to speak on behalf of continuing the centers. The parents in my district, Santa Monica, raised enough money to send two parents - a nurse and a father who had been in the Marines and was enrolled in a vocational program in a community college. When they arrived in Sacramento, they went to register in order to speak. It being their first experience, they registered as agitators instead of advocates. They left Sacramento well aware of the difference. This was only the beginning of the battle, for the State Legislature appropriated funds to keep the centers open for one year only and it was only through the continued efforts of concerned people that Legislators were convinced that funds should be appropriated on a year-to-year basis, then on a two-year basis until 1957, when they became permanent, but still required the approval in the Governor's budget. Being on a year-to-year basis posed problems. Each year, we would receive notice from Sacramento informing us that centers

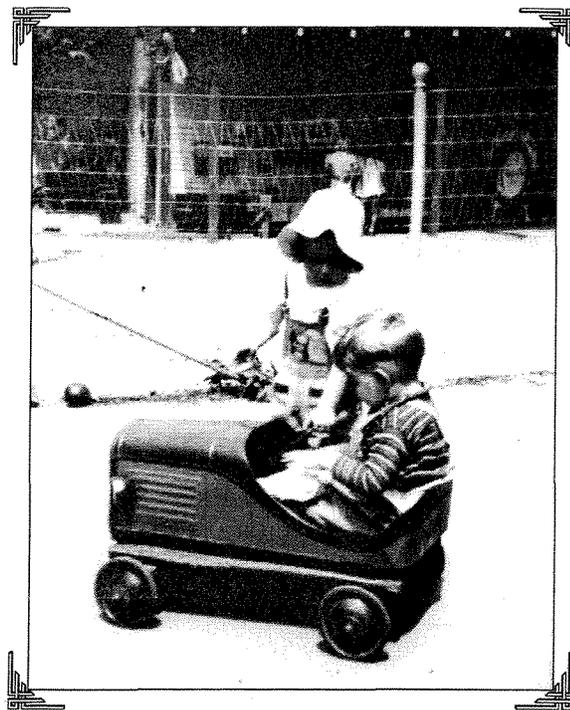
would close as of June 30 and we would notify parents, and then worry. Usually, we would get a second notice informing that we could continue for another year, but I remember one time that we didn't hear until 4 P.M. on June 30.

In 1949, the Legislature granted school districts and counties to levy permissive tax overrides for child care. Although Los Angeles was one of the first two counties to do this, it was not until 1959 (On the Capitol Doorstep, 1995).

As a result of public pressure and the problems associated with the insecurity and instability of these child development centers, Assemblyman Geddes authored a bill to continue funding on a permanent basis.

### **"Geddes' Bill Continues Child Center Programs"**

We [members of the Legislature] feel the need to place the centers on a fixed basis in fairness not only to the administrators and other personnel, but also for the parents who must work and have a place where their children can be cared for...It is hard to secure and retain competent personnel to operate the centers when they don't know from one year to another whether or not they have a job ahead of them. Many working mothers are being kept out of centers because of means testing which bars parents earning above a specific amount [Assemblyman Geddes]...the bill appropriated \$4,535,000 to perpetuate the program. He needs 54 cosigners to pass the Assembly and at the time of this article, he had 51. The Geddes bill seeks to take more advantage of the opportunity of giving lone mothers training so they can get jobs rather than remain on the State



Learning the rules of the road begins on the playground. Source: Long Beach Day Nursery

Welfare program. The bill would increase the ceiling on a salary two parents and one child can make and still be eligible for the centers from \$300 per month to \$385. Governor Goodwin [Knight] supports continuing the centers on a permanent basis if an appropriate plan to share the cost between the parent, the school district and the State can be worked out. However, in order to insure the passing of this bill, support from the people is vitally needed. Only support from the parents and citizens who realize the necessity of this program will light a fire under the legislators and get the bill through. (Los Angeles Times, 2/1/53).

The bill faced opposition. Most of the centers were located in four metropolitan areas; thus, rural regions did not want to pay for a service that did not benefit them (Westlake Post, 2/10/55). This argument reflects the ideology that child care only benefits those direct recipients of services rather than the community and society at large – a debate that continues today. Others objected because they felt child care 'institutionalized' children, making it difficult for them to integrate with other children (Westlake Post, 2/10/55). In addition, Hulse, Republican chair of the Senate Finance Committee, proposed to cut the \$1,300,000,000 budget by \$39,000,000 without increasing taxes. School revenues and child care centers were the targets for cuts (Los Angeles Times, 2/23/53).

The public persisted in applying pressure and local officials responded with a back-up plan:

"City council candidate Perry Parks said that if the State Legislature will not vote to keep the 246 centers open because a few rural legislators object to them, then he wants the council to provide local aid" (Los Angeles Times, 1955).

Community efforts resulted in the 1957 passage of the State Child Care Center Program, Chapter 182, which made these child care programs permanent and extended services to single parents in job training.

...Passage brings victory to a fight that lasted years waged by civic groups. For a long time, the Legislature considered permanent centers to be communistic. That argument is no longer heard and it never should have been heard. Child centers will soon be part of the State Education system where they belong. (Los Angeles newspaper citation not preserved).

Finally, after 11 years, and with continued parental support and child advocacy, the California Legislature passed continuing authorization for child care centers. From then on, funds were allocated for these purposes in the annual budget. In 1960, it cost \$10 million to run the centers and the State funded up to 60%; 30% came from parent fees and 10% from taxes levied by local school districts. The federal government paid nothing (1960, Los Angeles newspaper citation not preserved).

• **Knowledge of child development/ education increases.** After the Depression, there was again a great deal of child development research which did not level off until 1970. There was a "broad national coalition of concerned teachers and parents who pressed for more attention, scientific and otherwise, to the needs of children... and World War II demanded therapy specialists (Cairns, 1983, p. 86).

This was a period of intense child development research and interest. Child development became a separate discipline. Important institutions

were established nationally, such as the Peabody Institute in Tennessee. Erickson wrote *The Stages of Man*, which served as an impetus for more research and education. My son's cooperative nursery school teacher was a graduate of Erickson's. She had a degree in child development. There were the beginnings of trained people who brought real skills to the field...Los Angeles was a major center during the late '30s and early '40s of Freudian-trained analysts and had a major influence in the County. They stressed that emotional development was an important part of a child's development and stood in opposition to behaviorism (Vivian Weinstein).

The demand for child care providers and the development of child care facilities precipitated development of the field of early childhood education. Some child care center directors encouraged their staff to take child development courses, but it was difficult to find courses and there were no State requirements.

In the late 1940s, Marion Reuting, supervisor of the Burbank Children's Centers, insisted that we take courses in child development—that it was important that we become knowledgeable about young children. Few colleges offered courses. Several of us went to Los Angeles City College in the evening. Los Angeles Valley College later offered some evening classes, but it wasn't until Head Start in 1965 that a faculty person was hired in the fall of 1967 to teach child development full-time (Anabelle Godwin).

The Pacific Oaks Children's School in Pasadena was founded in 1945 by Quaker families. It opened with 60 children and, by 1961, 165 children

were enrolled.<sup>[112]</sup> In response to the growing demand for teachers educated in early childhood, the Pacific Oaks College was formed in 1959.<sup>[113]</sup>

Pacific Oaks was a wonderful school with its humanistic philosophy. It developed an educational program in response to the interest of so many community members who wanted to learn how to run preschools. They contributed probably more than any other single institution in advancing the idea of standards in half-day schools (Vivian Weinstein).

There was also growing knowledge about what constituted quality child care. CDE recommended that the State provide a retirement plan for child care personnel to make it easier to recruit and retain qualified personnel. They felt that a stable child care staff was good for children. This legislation never passed, and benefits for providers remain a major concern for child care today.

Under the current program, there are now 85 child care centers with an enrollment of 3,207 children in the Los Angeles city school district, while Los Angeles County has 140 centers with 5,800 children. John Weber, supervisor of child welfare centers, State Department of Education,<sup>[114]</sup> told conference attendees [at the Health and Welfare Legislative Seminar] that he felt parents would be better served if a provision were enacted into the State child care program to provide a retirement plan for child care personnel. This, he explained, would make it easier to retain qualified personnel who work now under drawbacks of temporary program set up under two-year legislation (Los Angeles Times, 1955).

• **Child advocates inform California's administrative policy.** The Southern California Association for Nursery Education (SCANE) was incorporated in 1957 as a non-profit child advocacy organization. In 1971, it officially changed its name to the Southern California Association of Young Children (SCAAYC). From its inception, it greatly influenced the State's administrative decisions.

California had a very legislatively aware professional organization. SCANE and representatives in the Department of Education (Helen Heffernan) believed that learning took place all the time - that it just didn't happen in the classroom, but wherever the child was. Because we were going to have centers for elementary school children in addition to pre-school children, it made sense for these children to be on the school grounds and not have to go back and forth to more places. Also, since schools already had the facilities, accounting departments, and available administrative services, it was decided that's where they should be and that's where they stayed (interview with Docia Zavitkovsky by Annette Bothman, 1976).<sup>[15]</sup>

They felt that:

The school district has administrative, budgeting and auditing facilities which guarantee the most economical expenditure of funds. The neighborhood-centered elementary school provides convenient and suitable housing and playground space, especially essential for school-age centers. They have available personnel who can assist in the organization, supervision and training of teachers... In addition, it has been found that the close relationship between child care center and public personnel aids in early identification of potential physical or emotional problems... and fosters productive use of health guidance services so that existing conditions may be corrected or ameliorated either before the child enters upon his formal education or soon thereafter (Mahler, 1964, p.4).

## Lessons To Be Learned:

• **Subsidies for child care were a response to a crisis and a low priority.** Since child care was primarily to support the War effort, when the crisis was over, federal funding for child care disappeared within six months after the end of the War. Although California continued to fund its centers, there was opposition from those who felt child care should support wartime conditions.

It is the opinion of this [Senate] committee that the wartime conditions which motivated past legislative action providing State support for child care centers no longer exists (Mirror News, 1/5/55).

Since child care subsidies were a response to the crisis, child care was not a high priority. It was not even the central component of the Lanham Act.

Included in the Lanham Act were construction and maintenance of water works, sewers, sewage, garbage, refuse disposal facilities, facilities for the treatment and purification of water and, lastly, child care (Docia Zavitkovsky).

After 1945, until 1970, the State funds which replaced Lanham Act funding were administered in the backwater of the State Department of Education (Dr. Jack Hailey).

As a low priority, child care was not adequately funded. Staff worked long hours for low wages and in general they were not regarded as professionals. Consequently, it was difficult to recruit and retain quality staff. Despite notable efforts to promote provider education, opportunities remained limited. In addition, the urgent need for child care did not allow adequate time for planning these programs.<sup>[16]</sup> The expansion of child care services during World

War II taxed the licensing capabilities of the State Department of Social Welfare and accelerated the delegation of licensing to local agencies (Hubner, 1980). Ultimately, all of these factors contributed to a wide range of child care quality that ranged from excellent to custodial.

• **Parent-professional partnerships effectively lobbied for subsidized child care in California.**

These collaborative efforts made California a leader in the child care and development field because it was the only State that subsidized child care for working parents.<sup>[17]</sup>

• **The increased need for women to work following World War II, coupled with their need for child care, instigated changing perceptions of women in the work force and the role of child care.** For the first time, public policy recognized that child care was essential for women to be able to work. CDE issued a Bulletin in 1943 that highlighted these changes:

It is no longer a question of whether women with children of preschool and school age should be employed. At the present time, they are being employed in rapidly increasing numbers as community surveys disclose. Representatives of industry have expressed the belief that provision of additional child-care facilities is of importance to solving the problems of labor shortage. The school authorities in more than 70 of the most populous California communities have expressed the need for a program of extended educational services in order to safeguard children from situations in which their physical, mental, and emotional welfare is jeopardized.

• **Child care workers are not viewed as professionals except by those within the field.** In the early years of child care and development, "child

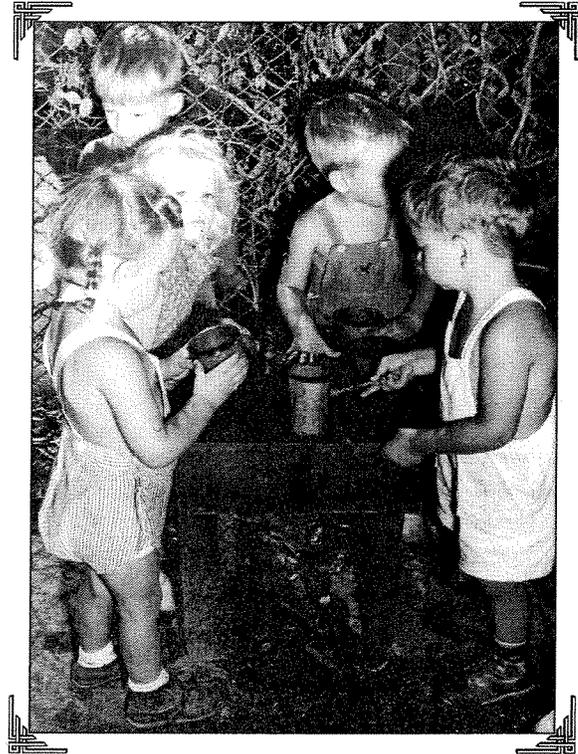
care was viewed by many as babysitting and custodial" (June Sale, 1996). It was seen as "something anyone could do" (Vivian Weinstein, 1996). Consequently, providers were viewed by many as "babysitters." (June Sale & Vivian Weinstein, 1996). Weinstein remembers conversations with some men who questioned the value of teacher education. They would say "any woman can take care of kids" (1996). Docia Zavitkovsky also discussed the perceptions of child care providers during this period:

We were not seen as professional staff, in fact, we were often called the 'ladies.' There were no men on staff because they were in the armed services or working in essential industry. In some centers, we were not permitted to use the teachers' lounge or restrooms. These were restricted to those with teaching credentials. I did not know you had to have a permit to go to the bathroom. It was a long slow process to move to becoming an integral part of the school setting; to being seen as an important member of the team; for being included in the school meetings; for having the same benefits... if not the same salaries because of funding; for being recognized for the quality of the program; for child care and classroom staffs sharing the good as well as the troublesome things; and for preschool centers to be set up in middle schools so that middle school students could participate in preschools as part of their class work.

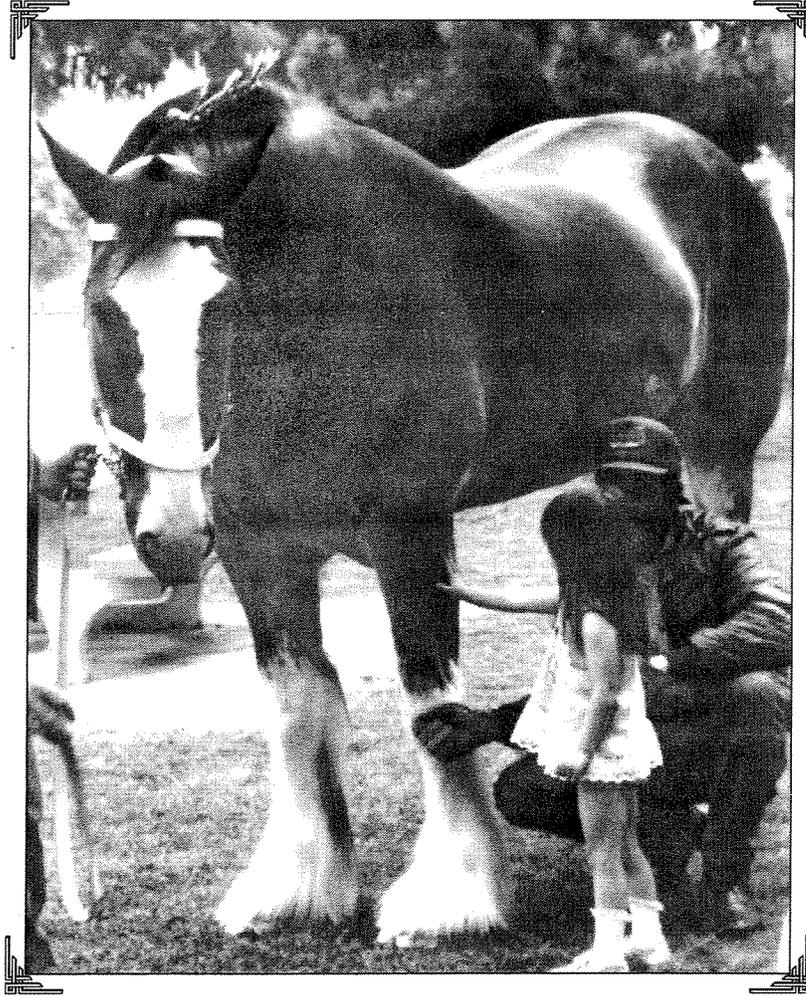
However, people within the profession were aware of the importance of their work and very supportive of each other.

When we were feeling low on the totem pole - our status level was zero. Lois Meek Stolz told us that one of the problems that we had was the word 'care' as a label for the job we were doing—that people did not realize what an important word it was—that it had many psychological meanings which were important in terms of

human development but which had come to have meaning which implied that anyone interested in care knew nothing about education when the fact was that you couldn't really know about education unless you practiced and understood the psychological meaning of care. Child care people she said, not only understood the meaning of care, but had the best opportunity to educate than any of the teachers in California. We were teaching when language development was occurring most rapidly; basic motor skills and self competence in the motor area was being established; psycho-social development was taking place and children were developing a concept of self (Docia Zavitkovsky).



**"The early years of child care were interdisciplinary" (Docia Zavitkovsky, 1996). One such comprehensive program was developed in 1945. The ground floor of the Gale Manor Apartments in Los Angeles was converted into a nursery and playground for the children of working parents. It provided care for sick children, made doctor appointments, did shopping for many of the families and provided nutritional dinners at a low cost. The only requirement was that you were a tenant and a working parent (Clarke-Stewart, 1993).**



## 1960-1970

We were awarded \$9 million to establish Head Start in Los Angeles County. It was a very exciting and challenging time (June Solnit Sale).

### Key Issues and Developments:

- **Growing understanding of child development and the importance of preschool experience increases enrollments in half-day preschool programs.** From the 1960s on, recognition of the importance of the early childhood environment coincided with increasing numbers of women moving into the work force.<sup>[18]</sup> As Barbara Biber, from Bank Street, said in 1955: "...the whole nursery school movement is becoming more and more tied in with the problem of the working woman who is also a mother."<sup>[19]</sup> Many middle class children attended preschool programs, typically cooperative child care programs, and it was believed that these early educational opportunities helped prepare them for elementary school.

The trends between 1940 and 1960 gave rise to large numbers of middle class children attending half-day preschool programs by the 1960s (Vivian Weinstein).

Partly in response to Nazi theories of genetic determinism, child development researchers became increasingly interested in the impact of the environment on behavior (Laosa, 1984). Research questions about how cognitive development occurred

were stimulated by a national reexamination of the educational process, influential articles on Piaget's work, and the decline of social learning theory (Cairns, 1983). A 1960 CDE publication reported that early childhood programs strengthened family life (especially in single-parent situations), curbed juvenile delinquency, enlarged the labor force and in the long run saved the State money which otherwise would have gone for welfare payments. Hunt drew parallels between the effects of maternal deprivation and collective social and cultural deprivation. In addition, "investigations of language development, thinking, sensation and information processing flourished as they had in no earlier era" (Cairns, 1983, p. 89). Bloom reported that intellectual development occurs most rapidly in the preschool years and failing to intervene is tantamount to lost opportunities (Laosa, 1984). Based largely on these research trends, the federal government asked for an interdisciplinary panel of experts in 1964 to design a program that would help communities meet the emotional, social, health, nutritional and psychological needs of preschool children (age three to school entry) from low-income families (Laosa, 1984). The panel's report was the blueprint for Head Start.

Researchers began looking at why children from middle class families did better in school than children from low income families. They found that part of the reason was poverty, but it was also a result of their preschool experience. The half day programs in Los Angeles, such as the Pacific Oaks Children's School and Bank Street became models for Head Start (as did those in other large middle class communities) because it was felt that quality programs could make a difference for children (Vivian Weinstein).

- **Early childhood education is expected to break the cycle of poverty.** In the 1960s, there was renewed attention to the importance of early childhood education. Child care policies were based

on a convergence of social, political, economic and intellectual trends (Laosa, 1984). They were also based on the philosophy that child care was a way to get women off welfare (Clarke-Stewart, 1993) and research that indicated early childhood as an opportune time for intellectual development (Laosa, 1984). In addition, the Kennedy-Johnson administration acknowledged that many children and families in the United States were living in poverty and that poverty was an impediment to equal opportunity. They declared a war on poverty and attacked social problems through Head Start and AFDC-linked child care services, including Title IV-A and the Work Incentive Program (WIN). Like the Lanham Act, these programs were a response to a crisis. This time, child care was a weapon to fight an "internal war". With the launching of the Head Start preschool program, the federal government supported child care services based on the importance of early childhood education and its potential for equalizing opportunity.

There were large gangs in big cities such as New York, Washington D.C. and Los Angeles. The federal government did not know what to do about this growing problem. Existing gang abatement programs were not effective. In Intelligence and Experience, McVicker Hunt linked maternal deprivation with social and cultural deprivation. Head Start was largely premised on this work in an attempt to respond to these growing problems through an enriched, intellectually stimulating preschool experience (June Solnit Sale).

• **Administering agency redefines its primary client which shapes the services provided.**

Unlike past programs, the child was the primary client for the Head Start Program. Head Start began in 1965 as an eight-week, part-day summer

program. Over the years, it was expanded to an eight-month program.<sup>[20]</sup> It provided part-day educational programs for three-to-four-year olds from low-income and/or non-English speaking families. Even though it was not a full-day child care program, it had an enormous impact on child care in general. Head Start was unique in its focus on the total development of the child. It included education, health care, social service referrals, parent and community involvement and education. At the same time, the California State Legislature authorized some of their existing State Child Care Centers to conform to Head Start regulations, establishing the State Preschool Program (Freis & Miller, 1978).<sup>[21]</sup> The State Preschool Programs were funded through federal Title IV-A matching funds.

June Solnit Sale, who wrote a proposal for and was awarded the first Head Start grant for Los Angeles County in 1966, notes:

The Economic Youth and Opportunities Agency (EYOA) which was the local joint powers arm of the War on Poverty, was asked to submit a proposal for Los Angeles County in 1966, following a very successful eight-week summer program in 1965. I was asked to write the proposal for EYOA and we were funded at the \$9 million level. This was a period following the Watts riots in 1965 and the minority community had concerns about who would operate the programs and how they would be staffed...and properly so. At that time, there had been no organized educational opportunities established by colleges or universities that could support the tremendous need that arose for teachers needed in the Head Start program, and certainly none that spoke to the needs of people of different ethnic backgrounds. Pacific Oaks, UCLA Extension and California State University, Northridge were given grants to start training and educational projects. Fourteen delegate agencies with varied background and experience with children's programs were funded. The program quality was uneven, the regula-

tions under which we operated were not clear and the political stresses were deeply felt. Many of these local agencies had never received federal funds before, so there was a good deal of confusion at the beginning, especially with the required paperwork. I considered this period a landmark in bringing attention to the fact that we needed well qualified, educated teachers who represented and could work in low income areas.

• **Aid to Families With Dependent Children (AFDC) clients entitled to certain child care services.**

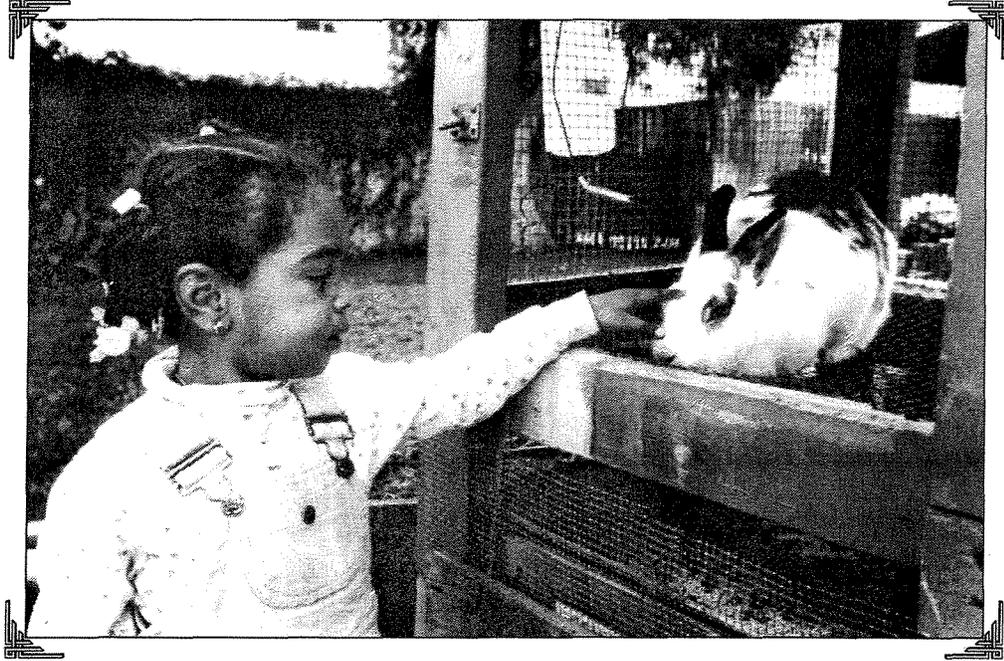
In 1962, Congress passed Title IV-A of the Social Security Act which re-established federal support for child care services, although participation was restricted to those parents receiving AFDC participating in work and training programs (On the Capitol Doorstep, 1993). Federal funds were available to local governments on a 3:1 matching basis (Freis & Miller, 1978). Title IV-A provided some federal support for the State's child care centers which had previously been supported entirely by State funding (Freis & Miller, 1978). Although according to Pat Dorman, editor of On the Capitol Doorstep, "AFDC-linked child care services have never been allocated enough funds to serve those who are eligible."<sup>[22]</sup> This component of the Social Security Act was significant because it was the beginning of an official public policy that tied child care to welfare with different administrative procedures for subsidized child care. Congress subsequently passed the Work Incentive program in 1967 that partially subsidized child care to allow parents to participate in the WIN program. There was a lag between the passage of the WIN program by Congress and its adoption by California. In 1972, California established the AFDC/WIN program (AB 282, Ch. 1177). Yet, this same year, the Federal Revenue Sharing Act limited the amount of Title IV-A and IV-B funds any one state could receive. California and New York were especially hurt since both states had large child care

systems and their budgets exceeded these new ceilings. In 1975, the federal government expanded Title IV-A eligibility for child care to include low-income families not receiving AFDC (On the Capitol Doorstep, 1995). These provisions were established under Title XX, a new addition to the Social Security Act.

• **Onset of multiple funding streams with different administrative procedures.**

Additional administrative bodies were introduced in California to administer child care services for targeted populations. As mentioned earlier, California was unique in housing Lanham child care services under CDE. These services were continued after the end of World War II, supported by State funds. When AFDC-linked child care services became available, the federal government mandated that they be administered by the State Departments of Social Welfare (now Social Services)—the implication being these services were a form of welfare. And finally, Head Start grants are awarded by the Health and Human Services Regional offices and the programs are locally administered by community-based, non-profit organizations and school systems.<sup>[23]</sup>

Each of these administrative bodies had -- and continues to have -- different missions and different "primary clients" related to child care services. The immediate goal of the Department of Social Services (DSS) was to move participating parents from welfare to work, thereby promoting the economic self-sufficiency of participants and reducing welfare expenditures. Child care services were needed to free parents from their care giving responsibilities, making it possible for them to participate in the work force. Conversely, the California Department of Education's child care mission is to enhance the child's learning. In 1965, the legislative intent for child care programs was changed from, "the provision of child care" to "provision of supervision and



instruction” and Child Care Centers were renamed Children’s Centers (Freis & Miller, 1978). The division in philosophies and mandates of CDE and DSS were similar to distinctions between Head Start and AFDC-linked services. Head Start began under the auspices of the Office of Economic Opportunity, but it was transferred to the Office of Child Development in 1969, reflecting the philosophical differences between welfare and child development/education.

• **Emergence of national licensing requirements.** Several events during the 1960’s encouraged the development of national licensing requirements: 1) efforts by the National Children’s Bureau, 2) the establishment of Head Start and subsequent child care assistance programs, and 3) the 1967 amendments to the Social Security Act that made federal funds for child care services available to the states (Costin, 1973). In 1968, the Federal Interagency Day Care Requirements (FIDCR) passed establishing stringent regulations for child care programs receiving federal funds. It outlined requirements for environmental standards, educational services, social services, health and nutritional services, training of staff and parent involvement (FIDCR, 1968). Similar to Head Start, FIDCR took into account the needs of the whole child. Its primary goal was to “obtain a common set of program standards and regulations and to establish mechanisms for coordination at state and local levels...[and] to raise and never lower the level of day care services in any state” (p. 1-2, FIDCR, 1968).

<b>FIDCR Child Staff Ratios</b>	
Less than six weeks	1:1
Six weeks to three years	1:4
School Age 6-10 years	1:15
School Age 10-14	1:20

Small family child care homes were the only types of care authorized to care for children under three years of age and were limited to a total group size of five and only two of which could be under two years of age.

Seven years later, in 1975, FIDCR was revised and then suspended, “when it was discovered that most states were not meeting the original FIDCR requirements” (On the Capitol Doorstep, 1995, p.1). FIDCR had a very limited impact, although it was the closest that the U.S. had ever come to having national child care licensing standards. It was more a philosophical thrust than an implementation of actual standards.[24]

• **Problems of providing non-subsidized, affordable child care to working parents emerges.** There were ever-increasing numbers of women entering the work force during the 1960s. Head Start offered part-day programs for poor children, but this did not meet the full-day care needs of the children of the working poor. Many other women needed child care, but did not qualify for subsidized child care. As a result, proprietary facilities emerged and provided a large portion of child care for mothers who otherwise would not be able to work. Although they offered a desperately needed service to many parents[25], the quality of care varied considerably (Clarke-Stewart, 1993). It was and remains extremely difficult for all types of child care programs to balance their budgets and still provide care that parents can afford. This becomes increasingly problematic for providers who are trying to make a profit. The easiest way to maximize profit is to have the largest number of children per adult that the State allows (Clarke-Stewart, 1993). This not only compromises the quality of care, it presents serious challenges to licensors.

We did not have many licensing problems with the day nurseries. There were more

problems working with facilities that were trying to make a profit. They did not meet the standards, especially staff-to-child ratios. A lot of staff were housewives. We started requiring fingerprints of staff and found some had criminal records. Yet, we had enough staff and tried to help them meet the standards. Some did not know they needed a license. In El Centro, I found a fully operating proprietary facility with no license. They did not meet the regulations, but we did not want to close it because it was the only one in the area (Francis Lee).

• **Staffing controversy emerges.** Head Start created a demand for teachers, especially teachers from the same communities as the children being served. The demand for child care providers stimulated a debate about appropriate child development education. Everyone agreed that there was a need for qualified teacher aides. The importance of recruiting aides with first-hand knowledge of the culture and community was also acknowledged. But, these aides often did not have a formal education in early childhood development. Some felt that aides should receive credit for their life experiences until they were able to take child development classes; others felt that aides should not be hired until they had taken child development classes because that could compromise the quality of child care. June Sale and Betsy Hiteshew recalled this controversy.

It was a debate about quantity vs. quality as well as about what constitutes appropriate child development education. People had strong views. I felt that what was needed was more child development classes, but we also needed to make it easier for them to work with children and gain the skills they needed without putting up barriers. It was very important not to lower standards for quality. June and I didn't always agree, but we were both very active in testifying before the legislature (Betsy Hiteshew).

There was a small group of educators, including myself, who believed that teacher aides in Head Start who came from the neighborhoods in which we worked should receive academic credit for the life experience and knowledge of their culture and communities and the families and children with whom they worked. The idea was to give these wonderful people, without whom we could not have succeeded, a limited amount of academic credit that they earned in the "school of hard knocks", that would encourage them to go on and become lead teachers. Further, we believed and testified that quality programs could not be achieved without valuing and incorporating knowledgeable, experienced and educated community-based people into the programs. As it happens, we had to wait another 15 years for the Child Development Associate (CDA). It is not a matter of quantity vs. quality. It is a matter of values and justice (June Solnit Sale).

• **Specialized education for child care providers.** There were a lot of individuals who were eligible for teacher permits because they held bachelor degrees, but they had never worked with young children. There was great fear that they would impose teaching practices that were not developmentally appropriate for younger children.

When Head Start began, there was such a need for teachers with knowledge and skills in early childhood education. Some teachers tried to push the first grade curriculum into kindergarten and the kindergarten curriculum into the preschool programs. This was a very big issue. (Betsy Hiteshew).

Understanding this need, Pacific Oaks College offered courses specifically on early childhood development and helped prepare Head Start teachers<sup>[26-27]</sup>, but these educational opportunities were scarce.

These concerns were validated at the State level by the formation of the Governors Advisory

Committee on Preschool Education (also known as the Child Development Programs Advisory Committee, CDPAC).<sup>[28]</sup>

When State Preschool was started, there was some concern that the Department of Education, which knew about kindergarten and elementary education, might not know about younger children. They set up the advisory committee so that the representatives from the State Departments of Social Services, Health, and Education and experts from those three fields had to talk to each other. It was a nine-member board that was supposed to ensure that the State Preschool Programs were comprehensive and that the Department of Education understood the importance of family dynamics, child welfare and development, and child health (Dr. Jack Hailey).

The Governor's Advisory Committee, in a way, was the first public recognition of an important child care issue. They became important players in the child care and development delivery system (Betsy Hiteshew).

## Lessons To Be Learned:

- **Knowledge of child development and the will to support programs on behalf of children secured public funding for child care.** As mentioned earlier, research on child development highlighted the importance of early childhood experiences on subsequent development. Along with this were the "beginnings of educated child care professionals that brought real skills into the child care field as we understood child development then" (Vivian Weinstein).

- **Head Start brought the importance of early childhood education to the forefront of child care policy.** Although Head Start was an element of the War on Poverty, it was specifically designed to meet the needs of the children it served.

Like all other types of child care, the quality of Head Start Programs varied. Regardless,

The things that were constant were the basic needs. To be wanted, loved, cared for, housed, clean. Later, we saw the importance of cognitive development. Head Start started this notion for kids to enter school with some chance of success (Vivian Weinstein).

At the end of Head Start's first summer program, Docia Zavitkovsky reported,

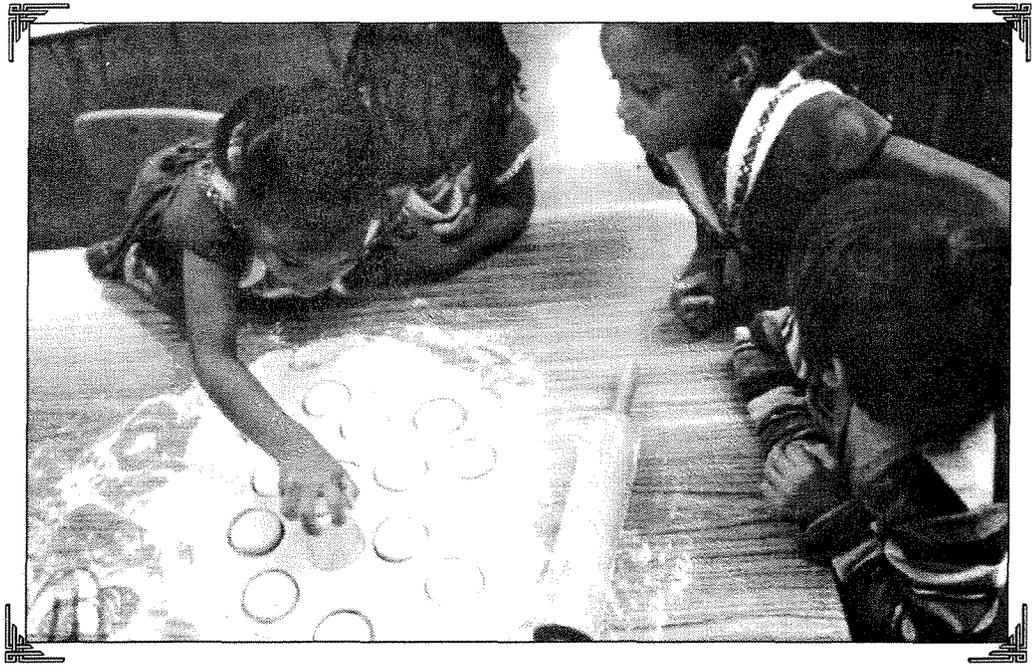
I still have a feeling of awe that almost 600,000 children and their parents were involved in a summer program and became aware that ages 3-6 were crucial, formative years and that parents had an opportunity and responsibility to influence children's intellectual development.<sup>[29]</sup>

- **Head Start supported the professional development of child care providers, parents and stressed the importance of quality standards.**

Head Start was a tremendous boost for those taking care of young children. However, one of the most effective aspects of Head Start was that it brought a lot of parents into the program and was the beginning of their career development. For instance, Mary Coleman, head of the Head Start Urban League, began as a parent in Head Start. Head Start stayed strong because of parent participation (June Solnit Sale).

Head Start began the movement to have an integrated staff. It was especially significant in pointing out the need to understand race and culture (Marge Wyatt).

Head Start emphasized the whole child and specified that quality care must encompass the child's needs in five domains: education, health, social services, parent involvement and community action.<sup>[30]</sup> As mentioned earlier, it stimulated discus-



sion about appropriate teacher preparation. Elizabeth DeCola worked on licensing Head Start facilities in Los Angeles County. She recalled,

Head Start was wonderful. They helped push for standards. They provided administrators with handbooks and materials on administrative issues, supplies, staffing and program activities. They involved parents and community members. They realized that children needed to be prepared for kindergarten. Sometimes schools had no kindergarten. Along with this, there was the realization that what children needed in preschool and in before and after-school programs differed from those in school. They didn't want preschools run by kindergarten teachers.

• **Child care was stigmatized as a service to low income families.**

Parents resent the labels poor, inadequate deprived and disadvantaged; some at first refused to send their children, but later sent them after seeing the benefits of the program.<sup>[31]</sup> This stigma is alive today, especially when child care is tied to welfare.

Tying child care to welfare is very troubling to the extent that people receiving welfare are generally denigrated. On the other hand, all people who are going to work need help paying for child care and should get that help. Particularly, people who are receiving AFDC and going to work need that support and should have it as an entitlement. I am not that concerned about its association with welfare; I am concerned that support is not associated with everyone (Dr. Alice Walker Duff).

Many middle class women still felt pressure to stay home to care for their children, but this view began to change in the 1960s.

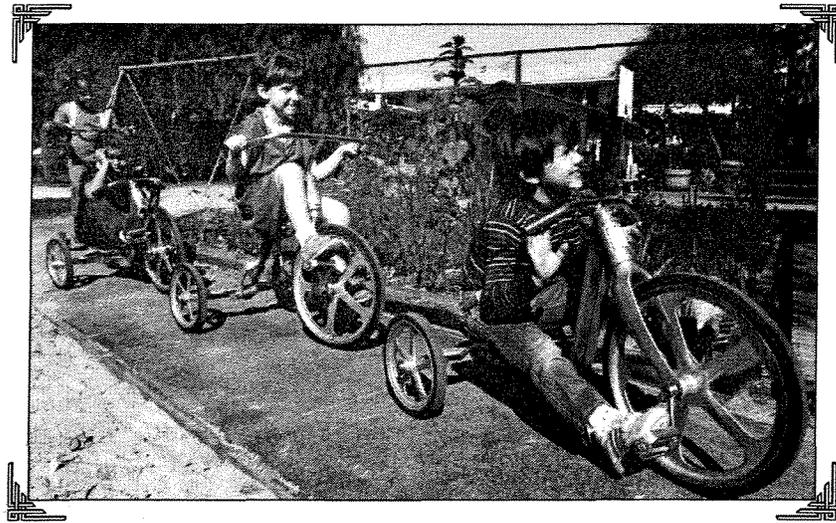
The 1960s was the decade where the big shift began, but early in the decade you were considered not a good mother if you had children and went to work. The big issue was

that child care was considered something you used only because you had to or an enrichment program for poor children. You only worked if you absolutely had to, and if you did work, you were not supposed to like it. The idea of working because you wanted to not because you had to was very, very unusual. I know that among my group I was looked at sideways when I went back to work and my youngest was seven years old. This view has changed dramatically (Betsy Hiteshew).

Many women had to work. Working meant that they could provide for the family and with this came a sense of pride.

I remember riding on the buses with Hispanic and African-American women who were going to work to provide for their families. They did not have a choice. They were proud to be able to work for their families and did not care what anyone else thought of that (June Solnit Sale).





## 1970-1990

The explosion of Caucasian women into the work force initiated the transition of child care from being seen as only for those people who cannot afford it and can't take care of their families to child care as part of the landscape of America, which is a normal and ordinary part of healthy family functioning (Dr. Alice Walker Duff).

### Key Issues and Developments:

#### National Issues

- **Increasing numbers of women with children in the work force generated demand for child care across socio-economic groups.** In the late 1960s and the 1970s, the dramatic increase of women from all socio-economic groups participating in the work force, job training programs or returning to school, exacerbated the need for child care. Between 1967 and 1970, enrollment in nursery schools and voluntary kindergartens doubled (Clarke-Stewart, 1993). As a result, working mothers "began to form a more vocal constituency for federal assistance" (Robins & Weiner, 1978, p. 34). Coupled with the knowledge of child development, efforts to gain support for child care were becoming stronger at local, state and federal levels of government, particularly in the early 1970s.
- **Defeat of the Federal Comprehensive Child Care and Development Bill (FCCCD) of 1971 and federal child care budgets cut.** This bill called for a national network of comprehensive child care and development services that would adhere to

universal standards and be available to all children — not just the poor, handicapped or at-risk children — on a sliding fee scale. This was the first attempt to address universal child care on a national basis and the only legislation that came so close to becoming law. It passed both houses of the Congress, but when it reached President Nixon's desk, he vetoed it on the grounds that it was communistic (Steinfeld, 1973) and would lead to the demise of the American family by shifting child care from a family to a communal approach (Clarke-Stewart, 1993).

The argument that child care was communistic was a very big issue at the State level as well. Every time we tried to get support for child care and development services, we heard the argument that child care was part of the communist plot (Pat Dorman).

In addition, individuals within the child care and development field could not agree on what should constitute national standards.

Nobody could agree on what was "good enough". It was difficult because you have child development people who are saying that programs need to be developmental and provide opportunities for play and you have safety people who are saying you need x number of square feet, this regulation in terms of food and this kind of record keeping. Some of the child development standards are 'touchy-feely,' while the licensing standards tend to be more 'cut and dry' and easier to do. There was a real tension. Some people wanted higher and/or different standards than others. Some wanted more developmental programs oriented towards the child's experience and toward ensuring the values of adult-child interactions rather than a more institutional approach. It's still a struggle, and we never did get national standards. June Sale was on the national committee at that time and she told me it was a nightmare (Linda Lewis).

In 1981, the Reagan administration cut direct federal funding for child care services and eliminated FIDCR (Clarke-Stewart, 1993). Most of the cuts hit in 1982. The child care food program was cut by 30 percent; AFDC income disregard was capped at \$160 per month per child, and Title XX became the Social Services Block Grant and was cut by 23 percent (On the Capitol Doorstep, 1995). To replace these cuts, the Reagan administration increased reliance on child care tax credits in 1982 (families could deduct money they spent on child care from other earned income) that were established in 1976. The increase from 1976 to 1982 was insignificant. Federal child care tax credits increased from \$2,000 for one child to \$2,400 (On the Capitol Doorstep, 1995), a 0.012 percent increase over a six-year period. Head Start continued to be funded, but it served less than one-fifth of eligible children and it did not serve the full-day child care needs of working parents. Toward the end of the decade, the federal government required states to guarantee child care for all AFDC parents who were working or participating in education or training programs as well as 12 months of transitional child care for parents no longer eligible for AFDC due to employment. This was funded under Title IV-A, but required a state match of 50 percent. Through the 1980s, "the official policy in the United States continued to be federal subsidies for child care for the poor through Social Security and tax credits for child care for everyone else" (Clark-Stewart, 1993, p. 37-8). This made states increasingly responsible for funding and administering subsidized child care services.

• **Diverging philosophies over whom child care should serve.** Women entering the work force sparked debates over whom child care is for and who should provide, fund, and administer it. Increasing numbers of women from all socio-economic groups questioned the predominant philoso-

phy that child care serves children from poor and/or dysfunctional families. The debate was framed as less government control and involvement vs. universal standards and regulation. The issues focused on what the role of government should be in relation to family life and child care, parental choice and access to child care. Many child advocates felt that comprehensive child care and development services with an educational component should be universally accessible since so many women were working. In order to provide affordable, quality care, government subsidies seemed necessary even with parents paying according to their income. Others felt that the role of government should be to provide a safety net for those families most in need. They felt that services should be targeted for AFDC recipients to help wean them off welfare, for low income families to keep them working, and for children at risk of abuse and neglect.

Nixon's FCCCD veto and the subsequent passage of the Work Incentive Program (WIN) had a tremendous impact on policies about whom child care was for over the next two decades. The federal WIN program was established under Title IV-A of the Social Security Act in 1967 (On the Capitol Doorstep, 1995) to enable parents receiving AFDC to participate in work and training programs by providing for child care services. It required states to match 25% of the federal funding.<sup>[32]</sup> The State Legislature authorized \$3 million in 1972 to establish the WIN program in California. However, one year later, the federal government changed the eligibility standards and it cost the State \$9.4 million to replace this federal cut. The decisions and policies that ensued created a multiplicity of funding streams with different requirements and made the administration of government subsidized child care programs extraordinarily complicated. These policies viewed child care as a vehicle for moving women off welfare as opposed to being a service for children.

• **The Child Development Associate Program.**

This national program was initiated in 1972, in response to the need to upgrade the quality of the early childhood educators serving children 3-5 years of age in center-based child care programs. The program is administered through the National Association for the Education of Young Children (NAEYC) through their Council for Early Childhood Professional Recognition, in cooperation with the Administration for Children Youth and Families. Between 1972 and 1975, to best meet the physical, cognitive and social-emotional needs of children, task forces of child development specialists designed a set of competency requirements for child care staff. The first CDA credential was awarded in 1975. California, along with 39 other states, has since incorporated the CDA credential into their requirements for child care staff.

## State Issues

• **Changes in the structure of the State departments, coupled with changes in government philosophy, impact child care licensing.**

By the late 1960s and 1970s, the multiplicity of funding streams, administrative procedures, and philosophies that originated in the 1960s became increasingly problematic. In 1967, CDE's Children's Centers were required to give admission priority to AFDC-families in order to become eligible for Title IV-A funds (On the Capitol Doorstep, 1995). This required a series of interagency agreements between DSS and CDE, and County offices had to certify income eligibility. In 1970 (only three years later), DSS was given the funding authority for all child care and preschool programs in an attempt to garner as much Federal Title IV-A reimbursement as possible (On the Capitol Doorstep, 1995). Two years later, CDE was designated as the single State agency for child care through the Child Development Act of

1972 (AB 99, Ch. 670). This Act transferred funding authority for all subsidized preschool programs (including AFDC-linked child care services) from DSS to CDE. One of the main purposes was to consolidate subsidized child care programs under one comprehensive program. Along with this, it established new priorities to first serve children at risk of abuse and/or neglect and next families with the lowest incomes. Many of the interviewees considered this Act a major victory.

The Child Development Act of 1972 was initiated primarily because several community groups supported it. Many of us felt that child care should serve everyone. We tried to make this a reality, but it was a two-year bill and we had to change the focus to serve children at risk of abuse. Conservative legislators opposed universal child care and standards because they felt it was similar to the policies of communist Russia (Marge Wyatt).

When AB 99 passed, DSS continued to have authority for child care under contract with CDE. This had a tremendous impact on Los Angeles County as well as on the relationship between DSS and CDE at the State level.

When DSS had direct authorization of child care funding, the staff set up and ran some good centers. But once they no longer had this authority, their employees were let go. Those left did not have the education on how to use the contracted dollars. The County Department of Social Services was not utilizing their funding and returned \$10-12 million to the State each year. The problem was that this money did not go to a special child care fund; it went back to the General Fund and child care dollars were lost. The Governor's Advisory Committee (now CDPAC) felt that this was outrageous. In Los Angeles, Karen Hill-Scott and I met with County Social Service representatives asking them to subcontract this money to R&R so they could help serve children, but Social Services would not do this. Finally, the



Governor's Advisory Committee convinced the CDE to terminate their contract with the DSS. In addition, money that was not utilized was to be put in a fund for children at-risk that would then be allocated to R&R respite services. Education made these changes in the late 1970s. The tension between DSS and CDE is partly due to the bureaucracy of who is in charge and partly to do with different philosophies concerning whom child care serves (Vivian Weinstein).

Shortly after the tug-of-war between DSS and CDE, the California Department of Health (DHS) entered the picture. In 1973, the Community Care Facilities Act gave jurisdiction for general licensing to the DHS and required uniform licensing regulations for all community care facilities (AB 2262). This involved the consolidation of various licensing activities including those of mental health, health (nursing homes, homes for alcoholics...) and children's homes.<sup>[35]</sup> The basic reason was to develop "more appropriate standards for residential facilities; however, child care centers and family day care homes were also included" (p.5, Hubner, 1980). As a result, this Act provided the impetus to develop separate regulations for family child care homes (Hubner, 1980).

In 1974, Governor Jerry Brown supported government deregulation, both for fiscal reasons and because of his libertarian philosophy. Some felt child care did not need to be deregulated. Others who also wanted better family child care homes and more family child care homes run by African-Americans and Hispanics opposed regulation for several reasons: there was arbitrary application of licensing rules; many of the county welfare licensing inspectors were considered old-fashioned, and had strong prejudices. Most Welfare Department workers did not speak languages other than English and records from that period demonstrate prejudices against racially mixed marriages. Social workers had a reputation of imposing their

own standards. As a result, constituents in San Francisco pushed for the removal of licensing of family child care homes (Kathy Lester<sup>[34]</sup>).

Elizabeth DeCola, State Department of Health, helped prepare recommendations for child care regulations, but they were never enacted because of departmental restructuring.<sup>[35]</sup>

When departments combined, most of the administrators were from the Health Department. These administrators were primarily retired military officers and were eager to reform nursing homes. They allocated a large portion of funding to nursing homes—four to five times the funding of child care facilities. Yet, all programs needed new regulations. Child care centers were a low priority because some believed that parents stopped by on a daily basis and knew what was going on there. This had a devastating impact. People were now afraid because licensing was reduced to minimal health and safety standards. Prior to that, the regulations were more comprehensive. This raised questions about how to define health. There was a lot of conflict about that. With a narrow definition of health, many people said that you did not need all of those program components and activities characteristic of child care facilities (Kathy Lester).

There were also dramatic changes in the enforcement of licensing regulations.

Rather than working with centers to help them meet licensing requirements, it was decided that the way to enforce licensing was to close down those facilities that were below standard. To legally enforce requirements, we now had to go to court to close them down. Legal enforcement is not very effective in promoting compliance; personal relationships are. Elizabeth DeCola had the ability and liked the flexibility to discuss problems with administrators and make a difference. With this uniformity, she couldn't do that. This [more effective and flexible

approach] requires a trained qualified staff and a close relationship between the staff and supervisor to know each other well and trust that they are doing their job to promote compliance (Kathy Lester).

When the Health Department took over Social Services, it was going to let centers self-certify by taking an oath. Most swore that they met the regulations. Some were probably lying through their teeth; others really thought they were. Eventually, the Department of Health did not want it anymore and Social Services came back (Elizabeth DeCola).

This change in enforcement caused changes in the licensing staff as well.

They changed the name from Licensing Inspector to Evaluator and hired people that passed the State analyst exam. They no longer required backgrounds in child care or social work. Although some became interested in child care, most of the new staff did not have the commitment, education or experience working with or for children. The State training for this staff emphasized writing skills necessary to take legal action. These staff members then worked their way up to management positions (Kathy Lester).

All of these changes added tension between licensing inspectors and program administrators.

It took months for the provider to understand all of the requirements. Providers didn't want to take time to fill out the forms, and the licensing staff did not have time to look at the whole program and help them make changes. The provider wants to get a license and start as soon as possible. The inspector, with a huge caseload, wants to get as much done per visit, so they make a long list of items that the provider needs to comply with. On the other hand, the provider cannot do everything on the list because they do not have the money because they can't legally open up for business until they have a license.

For example, to start a center, they need to submit the staffs' fingerprints. This is expensive for them and delays were common. The police had the ability to get it overnight, but it took weeks and months to process them for child care facilities. So we couldn't issue a license. Some would start their programs anyway, and we would have to go to court to prevent the operation of an unlicensed facility. They could not afford to wait weeks and months for all the paperwork and final licensing visit. Half of the staff required licenses and others looked the other way. The provider is also frustrated with other requirements and would become angry at the State licensor. But, most of the problems were with local requirements involving zoning, fire, sanitation and clearances (Kathy Lester).

To complicate matters further, budget cuts reduced the capacity for licensing staff to assist child care providers in meeting licensing requirements.

When I worked for the County of Los Angeles, there were about 3,000 facilities that we were responsible for. I had nine staff whose licensing caseloads were too heavy. When the funding was cut, I was cut down to two. Elizabeth DeCola was one of two for the entire County. The quality of child care facilities varied, but unlike the for-profit nursing homes, most administrators of child care facilities were interested in children. Those who wanted a good facility tried to do more to have a good program and exceeded the minimal standards. When there were enough, licensing staff could spread their good ideas. Staff like Elizabeth DeCola, who had a masters in social work and an interest in child care, would make efforts to help other facilities improve. We hoped to help them upgrade so they were not substandard. That discussion could not take place with the reduction of staff, nor could we visit all the facilities that we needed to. Because we were familiar with the facilities, we knew which ones were excellent and which ones had problems and went out to the questionable places first. We were surprised to find out

that those we thought would obey the rules did not (Kathy Lester).

In July of 1978, the DHS reorganized and DSS took over licensing of family child care homes and community care facilities. These regulations were issued as Title 22, Division 6 of the California Administrative Code (Hubner, 1980).

In 1984, the ombudsman licensing program was established (SB 1754, Ch 1615) to improve communication between parents, providers, community care licensing and other State agencies and child care licensing (On the Capitol Doorstep, 1995).

Senator Torres was able to get a bill through that established the child care ombudsman program. Although its intention was not to have monitors visit programs to make sure that abuse was not going on, it had that flavor and appealed to the people who applied for those jobs. That program was severely cut back a few years later and then slowly reinstated. Los Angeles originally had two ombudsman offices but went to one. The thrust of the legislation was not only to establish the ombudsman, but to separate residential care licensing activities from child care at every level below the Deputy who heads Community Care Licensing. If you were a licensing worker, we wanted you to have one caseload or the other – child care or residential care— not both (Dr. Jack Hailey).

• **Introduction of Resource and Referral Services and the Alternative Child Care Program.** R&R services began as a grass roots movement in the 1970's in Northern California under the leadership of Arlyce Curry and Patty Siegel to provide parents with information about available child care. The first R&R in Los Angeles County was the Child Care Information Service (CCIS)<sup>[36]</sup>, which was an outgrowth of the Pasadena Child Care Consortium.<sup>[36]</sup> Marge Wyatt (who volunteered and

was primarily responsible for the Pasadena Consortium) reports:

In 1970, a child care consortium was developed to organize existing child care and related services and to be an advocacy group for funding. In 1971, the Consortium created the Pasadena Child Care Information Service. United Way took both of these components under its wing, and, with the help of the City of Pasadena, staffed it for several years. Later it was called CCIS and funded under the California Department of Education's resource and referral policy. Child care decision-making went to CCIS. The current focus is on quality child care.

Marge was a chair of the Consortium. I went to Pasadena in 1976 to run the Child Care Information Service, which was a two-person office (funded by United Way and private donations) for providing information and referral services to parents and providers (Linda Lewis).

Shortly after CCIS, the San Fernando R&R was formed.

In the 1970s, the San Fernando Valley Child Care Consortium was formed. It was sponsored and staffed by the United Way. One of the most important objectives of the Consortium was to get the R&R going. In the beginning, all of the workers were volunteers. Members of the National Council of Jewish Women answered the phones and did some of the staff work. Marge Morris became the paid director after AB 3059 passed (Anabelle Godwin).

Prior to 1976, child care resource and referral services were limited to three communities in Los Angeles County. With the adoption of AB 3059 and the introduction of State funding, child care resource and referral services were expanded to families living in eight areas of the County. This legislation appropriated \$13 million to experiment with alternative payment arrangements, resource and referral

services, more lenient staff-child ratios and the use of differentiated pay scales for staff (Ch. 344). Linda Lewis discussed the development of community consortiums into more structured resource and referrals.

In 1976, AB 3059 provided the first funding for resource and referral services. It provided a substantial amount of money for alternative child care programs, including a pot specifically for what we called then 'information and referral' and is now called 'resource and referral.' They funded some significant number, maybe 20 agencies around the State, including the one in Pasadena. So we went from being a \$30,000-a-year agency to \$400,000 overnight. But we had the fundamental experience having done resource and referral. Because we were only one of the three agencies in place before this funding became available, we were a resource for other agencies that were setting up resource and referral services. I worked a lot with Patty Siegel who was at the San Francisco Children's Council and Arlyce Curry with Bananas. Several other agencies in Southern California got funding, including Crystal Stairs. There was a small program in Santa Monica in the office of Santa Monica Family Services. Because there were so few R&Rs, there were not a lot of guidelines on what they were supposed to be doing. It was a very hippie, seat-of-the-pants, make-it-up-as-you-go kind of operation. Because these were very grassroots kinds of community programs, most with heavy parent involvement, they were extremely non bureaucratic. They were very different from the school district-run programs which were typically public-funded. This was really the first batch of child development programs which were not. It was a very exciting time. There were lots of crazy things, and it was difficult to modify the paper and pencil record keeping system to one that was acceptable to the State. It was a time of experimentation and trying to build a system for organizations that hadn't ever need-

ed it. We went from two people in our office to 11, which is a very different kind of organization and that happened over a very short period of time. But I felt the whole time I was there that we were doing something really important and that we were doing something fun and very creative. There was lots of good thinking and goodwill that was going into it. We were working both at the local level in developing our program and in a Statewide network to try to support each other. I was the convener for Southern California and Patty Siegel was the convener for the North and we met in someone's living room. It was very much a grass roots effort - all of which has evolved in 20 years.

One of the newly-funded resource and referral agencies, Crystal Stairs, developed from a pre-existing partnership between the Neighbors of Watts (a small group of female Westside Los Angeles residents concerned for Watts), and Dr. Karen Hill-Scott, professor at the Joint Center for Community Studies at UCLA.

The Neighbors of Watts wanted to see if South Central Los Angeles needed more child care. On one hand, people were telling them that there was a great need for child care and, on the other, that there are lots of available spaces and family child care homes are going out of business. Because they had conflicting information, they came to Dr. Hill-Scott's class to investigate the child care supply and demand. The first thing they found out was that there was no central place to go to find out about child care— no information about how it was organized, how much it cost or how many children were served. Through that process they found out that both of the things they were hearing were true. After collecting a lot of data for this class, Dr. Hill-Scott understood the need for resource and referral services and applied, through a non-profit corporation, for child care resource and referral services and got funded. Crystal Stairs was formally founded in 1980.<sup>[37]</sup> The

name has had a wonderful effect because people always ask, 'How did you get your name?' Then we can tell them about the poetry and the striving and not giving up and reaching and turning corners and sometimes going in the dark. It represents the families that we serve and reflects the goals they want for their children. It captures our aspirations. Quality child care is enriching for children (Dr. Alice Walker Duff).

In 1984, because of demonstrated need, AB 3138 (Ch. 1603) was adopted, expanding R&R funding by \$1.5 million annually, thereby assuring that every county in California had child care resource and referral services. Locally, the issue was to ensure that all families in the County of Los Angeles had access to these services. In 1984, two new R&R contracts were awarded, making child care resource and referral services available County-wide. Funding for R&R was increased again in 1990 (AB 1428, Chapter 1331). This permitted expansion of their roles and responsibilities. Dr. Alice Walker Duff discussed the changes in the resource and referral services now provided through Crystal Stairs:

We started really responding to the input of the community and child care providers and it became clear that support for child care was really, really important. That's where we began trying to find that support for child care. Support for the availability and accessibility and quality of child care got started. We were interested in gang diversion, but in a very early, preventive mode. We wanted child care to be seen not really associated with what other people saw as social pathology, but rather something that normal, regular ordinary people needed that was good for parents and children. At the time, we were very interested in moving on. That is when we started Crystal Stairs (Dr. Alice Walker Duff).

Bureaucratization resulted from the rapid growth of R&Rs and increased reliance on State funding.

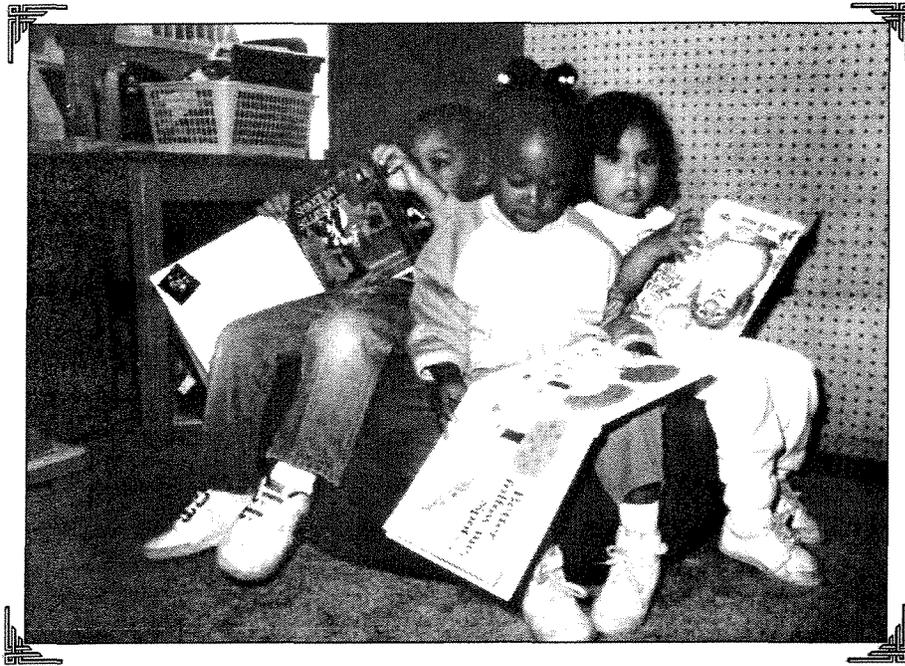
The State legitimately required programs to submit paperwork that justified their services and expenses, but this increased the amount of administrative work and shifted the focus of the organization. Of course, this problem is not unique to the R&Rs.

I find some of the people running resource and referral to be very focused on procedures and forms— very bureaucratized. Unlike the original vision, they are not coming from 'what can we do to help parents,' but 'what is our job.' It feels very much less parent-driven and supportive to parents. I think when you spend a large portion of your time interfacing with a very bureaucratic, very demanding funding source, you do develop that mentality. You have to cover yourself...I am critical of it, but I also know that they offer a very important service and that there are developmental reasons that it has gone the way that it has (Linda Lewis).

Despite some of the problems that R&R had to face, they have had a tremendous impact on the child care and development delivery system.

R&R provided information for parents and helped improve the quality of child care. Initially R&R focused on serving parents looking for child care; now it is much more comprehensive and provides a broad range of services (Betty Brady).

Alternative Payment Program (AP), (AB 3790, Ch. 986) "arose from a growing awareness that a standardized delivery system may not necessarily meet the variety of family and community needs" (Freis & Miller, 1978, p.8). To promote program flexibility and to improve program responsiveness to local needs, the CDE was allocated \$13 million annually to fund AP arrangements and was expanded to approximately \$17 million in 1977-78 (On the Capitol Doorstep, 1995). APs were not required to comply with federal regulations, but did have to comply with State regulations. The goal was to provide parents



needing publicly subsidized child care with greater child care options, to address unmet community child care needs, and to develop cost-effective ways to deliver child care and development programs. The program included center care, family child care homes, voucher/vendor programs, resource and referral agencies and capital outlay (Alphabet Soup, Children's Glossary of Terms, GAC, 1977).

Governor Jerry Brown supported alternative child care proposals based on his philosophy of less government and the inclusion of private child care in the subsidized mix.<sup>[38]</sup>

Alternative payment allows for a more extensive use of private for-profit and family child care settings rather than school-run or non-profit programs. There was some talk a while back that AP would be cheaper, but I do not think that is the case anymore. There is also the notion of flexibility: people have evening, early morning and weekend work and the centers are not open at those times. AP can be a responsive, customer-oriented system (Dr. Jack Hailey).

I remember quite clearly that Governor Brown used the word 'cheap' to describe this child care proposal (Pat Dorman).

Although AP programs were designed to give parents more choice, there was and still is some controversy about AP programs. First of all, some were concerned that converting all child care subsidies to APs would destabilize community-based child care programs. Dr. Jack Hailey stated that there are many centers that have been operating for years and have become an important part of the community in that they provide stable services for children from low-income families (1996). If all subsidies were converted to vouchers, then the stability of these neighborhood child care programs would end. There is no reason to expect that all of those families who receive vouchers will go to that facility. Child care

and development centers that are also family and community centers could go out of business because they may not be able to sell empty spaces to people with money. This concern holds true for converting everything over to a voucher system. However, according to June Solnit Sale,

Alternative Payment programs have given more choices to parents and have not destabilized center programs. Although excessive conversion has the potential to do so, there has to be a balance.

There were also concerns about the impact of AP programs on the quality of child care. AP programs can be more difficult to regulate for quality of child care than child care centers.

If I'm the consultant with the Department of Education, and I am doing a quality review, I can look at the quality of care for 30 or 40 or 50 children in one center in five or six hours and get a real picture of that. If those children are in 40 different places in various locations around the city, I can see eight of them for 10 minutes, each in a six-hour day. It is a very inadequate way of evaluating the quality of the program. We allow 15% of an AP contract to go for support services, but that doesn't include evaluation or monitoring. Partly because evaluation and monitoring for quality is easier, I think it is a good idea to keep a good deal of these funds in contract center sites. There was never an argument about that in the past.<sup>[39]</sup> This issue is more recent as so much of the federal money is designated as a certificate and that side of child care has had to grow a lot in a hurry (Dr. Jack Hailey).

It is difficult to accept a policy of AP programs because how do you ensure quality? The administrative costs and analysis to monitor program quality are expensive. How can you look at a program's quality if you cannot find it? Is that good public policy? (Pat Dorman).

Virtually everyone agrees that AP programs are an important component of the child care delivery system, especially because they allow parents to shop for the child care that they want. However, parental choice will be limited to the child care that is available in a community. If all of the available child care is of poor quality, then parents do not really have a viable choice, regardless of how flexible the child care delivery system is. AP programs are only useful to the extent that there is an adequate supply of quality child care services.

Alternative payment does allow parents to select care in the community and they can shop for what they want. Although, in general, the quality of care is very, very minimal. It takes money to run a quality program (Dr. Alice Walker Duff).

Parents should have choice in selecting a child care service. Because there are very few quality programs available to parents, they truly have no choice (Pat Dorman).

• **Regulation of infant care and child development services emerges.** The exact date when DSS licensing specifically included regulations on infant care was not available; however, sources at DSS believed that their programs could legally provide care for infants in early part of the 1970s.

Family child care homes provided much of the care for infants, but it was illegal for them to do so until 1971 (June Solnit Sale).

Since CDE's Title V requirements are secondary to Title XX, the date when their center programs were able to provide infant care legally is probably similar.<sup>[40]</sup> Certainly, by 1974, the State legislature authorized the Superintendent of Public Instruction to "enter into agreement with the school districts or county superintendents of schools for the establishment and maintenance of programs for the care and development of infants and the training of students in

their role as parents as part of the high school program." The infant-care component of the legislation included "supervision and group care providing for the physical and emotional needs of the infant in a manner which conveys concern and engenders trust, educational stimulation from the earliest developmental stages onward and health screening and treatment" (SB 1860, Chapter 1504).

• **Child advocates at the State level work with locals to support legislation.** Two major child advocacy organizations, the California Children's Lobby and On the Capitol Doorstep, were founded in 1971. In general, they were founded along similar principles, but they had somewhat different beginnings. It was not long before they began collaborating with each other as well as with local leaders. According to Pat Dorman, Elizabeth Berger, who started the Children's Lobby, and Emma Gunterman, who founded On the Capitol Doorstep, were the "grandparents" of tracking legislative issues concerning child care.

On the Capitol Doorstep was founded by Emma Gunterman in January 1971 to inform legislators about farm workers' needs for child care. She recognized that Children's Centers received State funds to provide child care, but there was no child care in rural areas— especially for farm workers. Emma wanted to fill this gap, so she began to gather information at the State.

There was no public child care in rural areas. There were the Children's Centers, but they were in larger communities and were closed in the summer. I informed the Butte County Board of Supervisors that this was a problem and got a bill to run child care centers in smaller regions. In order to have more centers, we needed more money. The item had been closed in the budget, but I was able to get the legislators to reopen it and more money was authorized. At that time, there was one person, John Weber, for the State of

California working for child care. He held a part-time position under CDE. Since I was at the Capitol, I had access to information and became the source of child care information for the child care directors association. In exchange, they would pay me a small amount of money, something like \$25 per month (Emma Gunterman).

The California Children's Lobby was organized in March 1971, as a non-profit organization. It developed out of conversations that took place after the White House Conference on Children and Youth. Its organizers felt that they had been hearing the same story for the past 30 years – children's needs were not being adequately met. The goal of the lobby was to educate legislators and lobby to "change the status quo for children."<sup>[41]</sup> Sue Brock, the first paid lobbyist was known for saying, "You don't have any enemies, you have people who work with you and people you have to educate". Bi-partisan board members were actively recruited throughout the State.<sup>[42]</sup> There was a strong connection between the Lobby and local organizations such as the Los Angeles Mayor's Advisory Committee, the Pasadena and San Fernando Valley Consortiums and the SCAEYC.

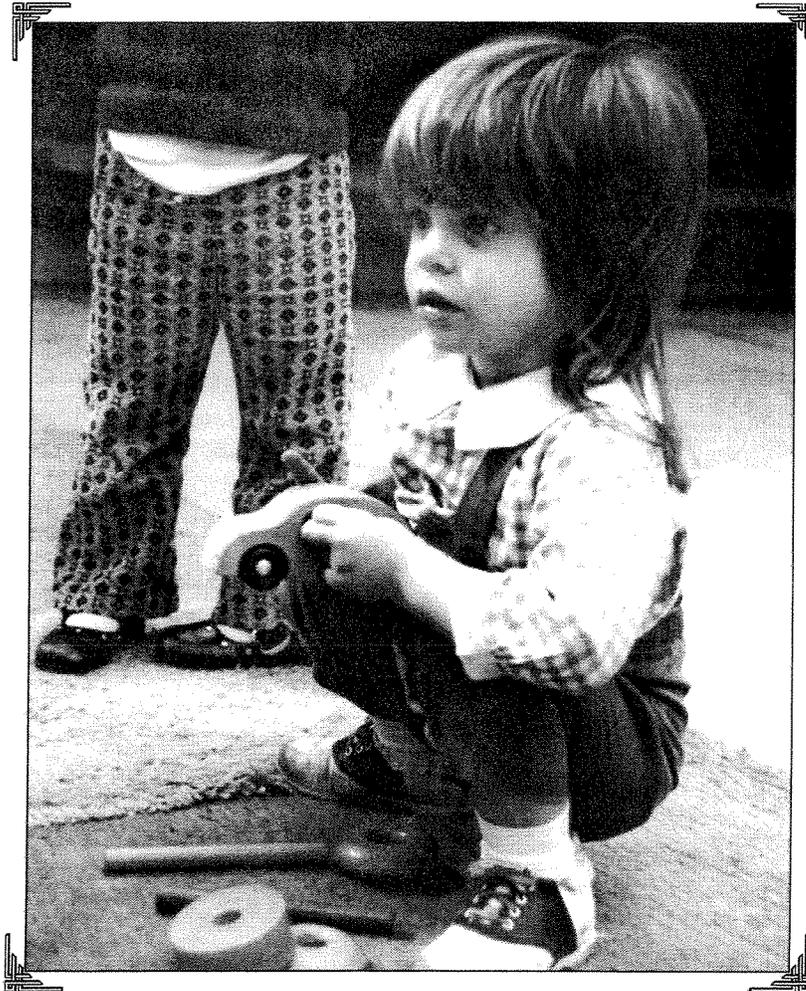
Elizabeth Berger was a lobbyist who started the Children's Lobby, which had several divisions, one of which was child care. Elizabeth Berger helped Sue Brock learn how to lobby. Sue became the first paid lobbyist who spent full-time on child care issues. Kathy McCreary was the first chair of this subcommittee. Then came Betsy Hiteshew. We were from the Southern California group. It was difficult for southern and northern members to meet jointly, so we would incorporate these joint meetings with the CAEYC conferences. Pat Dorman of On the Capitol Doorstep was consultant to the group. The child care group broke away from the Children's Lobby for funding purposes and is now called the Child Development Policy

Institute. Anne Broussard is the present chair and Dan Galpern is the lobbyist (Anabelle Godwin).

Sue helped Emma with migrant child care. Children were getting killed in the fields. Because she had to educate legislators with a variety of perspectives, she created a very powerful image of a baby in a box at the end of the crops. She would explain that you get food from these farms, but in order to provide that food for your table, there are farm workers with children in boxes at the end of the rows in crops because they have no child care (Pat Dorman).

Betsy Hiteshew was the president of SCAEYC from 1977 to 1979 and later chaired the Children's Lobby Policy Board. She reported that the most important issue for children's advocates was promoting quality child care:

Child care was considered something you only used because you had to, or an enrichment program for poor children. Now it is viewed as a necessity and a service that people have to have (like a car to get to and from work). Naturally, people want their kids to have a safe place, free from abuse, with all the basics. But it is my feeling that the majority of parents don't think of child care as a major, major influence on children's lives such that it should be receiving at least as many resources as elementary educational programs. Children in low quality programs get bored, but high quality programs offer all sorts of fun and educational activities for the children to choose from and well-educated teachers whom the children adore. The effects are somewhat subtle and cumulative, but quality programs affect children in a positive, life-affirming way.



## The first major accomplishment of the Children's Lobby.

In 1971, AB 734 established State-funded campus child care programs throughout the public post-secondary educational system: all campuses of the University of California, the California State Universities and the community colleges (Ch. 176). Supported by a combination of federal (75%) and local (25%) funds, it provided child care services to the children of students enrolled in vocational or career development programs. After just five years from the initial legislation, the legislature appropriated an additional \$200,000 annually for campus child development centers (AB 3059, Chapter 986, 1976). It also authorized the use of public funds as local share to obtain State matching funds.

The impetus for campus child care came mainly from female students who had children and needed child care to pursue their education. Sue Brock and Assembly member Yvonne Brathwaite Burke (currently a Los Angeles County Supervisor) contributed to the development and success of the campus child care bill.

Early in 1969, I went to U.C. Berkeley with a baby and there was no child care. I started child care there through the Student Union. We wrote a proposal to get funding and received Title IV-A funds. I found out that other campuses who were trying to get something going did not find an ear that would hear their concerns. I started an independent study to create campus child care programs at the same time the California Children's Lobby was starting up. I volunteered for the lobby at first and was a paid lobbyist from 1971 to 1985 (Sue Brock).

I heard about Sue Brock and her need for campus child care, so we met and worked together (Emma Gunterman).

• **Proposition 13 passed by voters.** This proposition eliminated the local permissive tax overrides (which Los Angeles levied for child care purposes in 1959). These local taxes were used to support some school district children's centers, adult education preschool programs and campus child development programs (On the Capitol Doorstep, 1995).

Proposition 13 caused dramatic budget cuts in Los Angeles (Marge Wyatt).

When Proposition 13 passed, there was a great deal of concern about what government finances would look like and how much State dollars would have to be used to bail out local governments for things they had been paying for— including the local schools and a large portion of taxpayer dollars that select districts voted to tax themselves to support child care and development services (Dr. Jack Hailey).

A major turning point for child care advocates was the passage of Proposition 13. Many of us were not aware of these dollars and we became educated about them as we worked. As Proposition 13 became visible, we began to be more aware of financial issues—the way dollars were spent and who controlled what. After Proposition 13 passed, On the Capitol Doorstep developed five special bulletins to send a message to the locals. We informed them about an upcoming hearing about what would happen to Child Development Programs and told them we needed their help at the Capitol to capture State funds. Busloads of people, from all over the State, came up for the hearing. I will never forget the look on Assemblymember John Vasconcellos' face (chair of the education budget subcommittee). He was so surprised to see so many people and asked who they represented. Our item was last on the agenda, but when he found out that all these people were for child care, he changed the agenda and took us first. It was the first time I saw what parents and providers can do to affect policy. We got mostly what we wanted

– we hoped for \$43 million and ended up with \$35. Local dollars previously provided through Proposition 13 were replaced with State dollars (Pat Dorman).

• **State buys out Title XX child care funds.**

The term “buy-out” refers to the equal exchange of State dollars for federal dollars in the State budget for child care. The initial buy-outs occurred in 1976 and allowed the State flexibility with respect to administrative and program requirements in child development programs. The buy-outs allowed the State to regulate some of its child care centers according to Title V licensing standards rather than requiring them to meet the more stringent FIDCR standards (On the Capitol Doorstep, 1995). The resulting freed-up federal dollars could be used in other federal social service programs.<sup>[43]</sup> Approximately 50 percent of the child care agencies that received federal Title XX funds now received subsidies through the State only. Buy-outs severed the strongest tie between child care agencies and the federal government. Because State standards were more lenient than FIDCR, most of the child care advocates at this time were opposed to any more State buy-outs of child care funds.<sup>[44]</sup> However, this buy-out was critical because of proposed federal budget cuts in Title XX funds. Child advocates working with Senator Gary Hart protected child care from the federal budget cuts, in 1981, by replacing federal Title XX funds with State dollars.<sup>[45]</sup> Although it was not an ideal, it proved to be the best route to take at the time.

The social services block grant provided some child care dollars at the local level. We also fought for child care dollars in the State budget and then a gradual build up of Federal dollars for child care began. Then, the buy-out debate began. Child advocates concerned with program quality were concerned about the buy-out especially because there

were more stringent requirements at the Federal level. FIDCR required one adult to four children and head teachers in child care centers were required to have a B.A. degree (Pat Dorman).

• **Efforts are made to implement a State plan for child care and development services began with the Wilson Riles Commission.**

By the end of the 1970s, concerted efforts were made to address major problems within the child care and development delivery system. The California Superintendent of Public Instruction, Wilson Riles, appointed the Wilson Riles Commission to develop recommendations for a State plan for subsidized child care and development services. Marge Wyatt served as chair and Ken Jaffe served as vice chair.<sup>[46]</sup> The Riles commission issued its report in 1978 and included recommendations about the need for and availability of child care services throughout the State (see Addendum C for summary of their recommendations).<sup>[47]</sup> Areas of particular concern included: universal access to child care and development services; diverse linguistic and cultural needs; the quality of child care and development services; and funding for these services. The Commission also addressed the organization and administration of federal dollars. Initially, the DSS was designated as the single State agency to do this. Although DSS, CDE and the Legislature agreed that the CDE should be the single State agency, the U.S. Department of Health, Education and Welfare did not approve of this change. As a result, separate funding streams and agency responsibilities forced the two departments to develop interagency agreements about program funding, operation and evaluation.

• **Child Care and Development Services Act passed in 1972 and 1980.** This act, authored by Senator Sieroty, replaced the Child Development Act of 1972 and enacted some of the Riles Commission's recommendations (SB 863, Ch. 798, 1980). Senator Sieroty was extremely supportive of child care and development services. It integrated alternative payment programs into State child development programs. In addition, it increased State funding by \$12 million annually, with priority given to infant care, teen parents, rural child care, resource and referral services and services for children with special needs. Dr. Jack Hailey worked closely with this legislation.<sup>[48]</sup>

A lot of what was in this bill was already in the code. The bill reorganized and cleaned up the code. During this time, the important contribution of the Advisory Committee was to work out a way in which the alternative child care program, which had its own separate chapter at that time, could be integrated into Senator Sieroty's Bill. These two chapters, child care and development and alternative child care, merged in this process. There was a separate piece of legislation that Assemblymember Bill Lockyer was carrying that would make more permanent the alternative child care piece. Lockyer asked Sieroty to merge these two bills and in return he would be considered a principal co-author and help the bill on the Assembly floor.

There were efforts to reach populations who were not getting services. Until 1980, families who were on AFDC were given priority over other families eligible for subsidized child care. The Committee recommended that priority should go to lowest income families first regardless of whether they were on AFDC. This was incorporated into the bill. There was some hesitation by the Governor, but ultimately he supported it. Also at that time, the AP program gave first priority to children who were abused or at risk of abuse. There was some discussion to have all subsidized child care services adopt the AP prior-

ities. That recommendation was taken. If you served someone at risk of abuse or neglect you earned slightly more money for each of those children. Both of those policy decisions are back on the table (Dr. Jack Hailey).

It took two years to pass the bill - a long process of satisfying many different constituents.

The Governor's Department of Finance did not want to spend the money. Proposition 13 had just passed and there was a great deal of worry about what government finances would look like and how much bail-out would have to go for all kinds of things that local governments had been paying for, including the local schools and the big chunk of taxpayer money that select districts had voted to tax themselves to support child care and development services. Local school district child care programs had to be bailed out for the loss of local property taxes to the tune of about \$38 million. That money is now part of the base of State child care. The bill took two years to pass because of the complicated nature of the policy and the large appropriation. It was a big appropriation for that time; we did not see another appropriation like it for five or six years (Dr. Jack Hailey).

• **Geographic equity is examined at the State level.** The GAC was asked to examine this issue to determine if the child care system served a proportionate number of African-Americans, Hispanics and Caucasians who were eligible for services. According to Dr. Jack Hailey, who was then the Executive Director of the GAC, they found that geographic equity was a major problem.

For example, if you are poor and working - and live in Fresno County, do you have an equal chance of getting subsidized care as someone in San Francisco or Los Angeles? In 1980, the answer was unequivocally 'no.' Fresno, the Central Valley and growing counties like Sacramento,



Riverside, and San Bernardino had much less money per working person, per child, per poor child, per working woman— by whatever measure you were using— than San Francisco and some other counties, and parts of Los Angeles (Dr. Jack Hailey).

After examining this issue, the committee recommended that geographic equity be included in the priority system for new contracts.

The committee recommended language to revise the education code because we needed geographic equity. Even though we were not going to take any money away from current contractors, we would give out new money in chunks that would bring us toward equity. Before the Seiroty bill, when the Department of Education had new money, it put all the proposals in one pile and gave the money to the highest scoring proposals. Those tended to come from counties with the most sophisticated anti-poverty infrastructures (Dr. Jack Hailey).

In addition, they recommended that CDE give priority to applications that came from within a particular geographical region.

Of course some agencies felt that they would love to expand into a new geographic area and implement a high quality program that would serve the needed population, but the committee made the recommendation that if there was a fundable grass roots agency or public school in that specific area, give them the job even if they had fewer points than the agency across town. The Committee wanted the money to reach smaller agencies that would serve families and children in their own area. For Los Angeles County, this was an issue because there were the larger established organizations, such as the Los Angeles Unified School District and the County School Office (that had the Head Start con-

tract and did the State preschool work) that wanted to grow (Dr. Jack Hailey).

The GAC found that the availability of child care County-wide masked some of the shortages of child care in specific areas within counties. As a result, they recommended subdividing counties with populations over one million.

We recommended that counties larger than one million people (then, there were only five) be subdivided and the data collected<sup>[49]</sup> and equity sought for subdivisions of those counties. For Los Angeles County, we used the five United Way regions. There was a higher concentration of poverty in South Central Los Angeles, so some of the expansion dollars went to that region; but other regions in the County received a larger slice because they, in fact, had proportionately less child care per poor person. Also, if Hispanic families were disproportionately under-served in some areas, you would not only accept proposals from areas of those counties, but you would hope that the leadership was Hispanic. Sometimes that meant a new agency would receive funds. Collecting the needs data was tough. Each proposal writer had to do some of their own and we heavily used local county, public school, and census data (Dr. Jack Hailey).

Although the Committee made a concerted effort to move toward achieving geographic equity, limited additional funding for child care programs hampered substantial achievement of this goal.

Unfortunately, after the Seiroty bill, we didn't get any more new money for a long time, so we were not able to take additional steps to achieve geographic equity until we had Senator Roberti's Latchkey bill<sup>[50]</sup> and subsequently, the Federal Child Care Block Grant.<sup>[51]</sup> Funding is still not geographically equitable, but it is getting better (Dr. Jack Hailey).

In addition, there was misunderstanding about poverty and the need for child care.

People would say, 'there's no need for child care in South Central because people there are not working.' I was surprised that they would say that. There were lots of people who are poor and working. We would speak to a large number of people who were fully qualified for Head Start (which was poverty level) and worked full-time, full-year. They did not earn enough money to get themselves out of poverty and those people needed child care. There was a small sum of State money to help those people, but there were a large number who were sort of invisible to the community (Dr. Alice Walker Duff).

### Local issues and initiatives

Leaders in child care and development in Los Angeles County influenced and mediated public policy decisions through organized efforts to improve the quality and accessibility of child care and development services. The following are important contributions of local efforts within Los Angeles County:

- **First research on family child care.** Family child care has always been crucial in meeting child care needs, but very little data was available until the 1970s. This first research documented the importance of family child care. June Solnit Sale, in collaboration with her colleagues at Pacific Oaks College in Pasadena, conducted one of the first studies of family child care, The Community Family Day Care Project.<sup>[52]</sup>

The idea behind this project was to study family child care from inside the homes over a period of time. So many children were being cared for in family child care homes and so little was known about them. Pacific Oaks students had their practicum placements in the homes and worked with a specific provider once a week (each student worked with three providers). Once a month, the students cared for the children while the fam-

ily child care providers attended group meetings with our staff to discuss their problems, develop resources and find solutions to areas of concern. The women asked for classes which were provided through Pacific Oaks. The project operated out of a store front located between a laundromat and a doughnut shop and parents would stop by for information about child care. We had a toy loan, newsletter, cooperative buying program, a no-interest loan fund and tried to find substitutes for providers. The project lasted only three years, but we learned a great deal about the strengths and weaknesses of this kind of care (June Solnit Sale).

The Community Family Day Care Project surveyed the surrounding area to: (1) identify women actively involved in the neighborhood child care system, (2) determine how existing neighborhood programs could be enriched, and (3) develop alternative child care plans for children and their families in this neighborhood (Solnit Sale & Torres, 1971). Members of the Community Family Day Care Project organized a group, WATCH (Women Attentive To Children's Happiness) whose goal was to promote quality family child care. June Solnit Sale describe the role of WATCH:

WATCH members would have monthly meetings that served both the social and professional needs of the group. There was a great deal of camaraderie and community feelings that developed as well as serious discussions about quality child care.

Other pioneering studies of family child care included Arthur Emlen's work from Portland, Oregon<sup>[55]</sup>, and the National Council of Jewish Women study in 1972. These early studies highlighted the advantages of family child care, finding that: 1) they are usually located in residential areas, near a child's own home, enhancing accessibility; 2) they often share the values of the child's parents; 3) they can be more flexible and adapt to parents' work

schedules; 4) they provide infant care, one of the largest unmet child care needs, and 5) they can be somewhat less expensive because the building is already available. These studies also identified some of the problems with family child care. As with other types of child care, quality ranges from custodial to superb. It is more difficult to regulate because of the heavy caseloads of licensing staff; it is easier and less costly to visit larger centers serving more children in one place. Many providers are not adequately trained, many programs are short-lived and quality suffers (Clarke-Stewart, 1993).

• **The Mayor's Advisory Committee on Child Care and Development had its beginnings in the early 1970s:**

The City of Los Angeles was closing down a child care facility called the People's Play Group because they claimed it was violating local zoning ordinances by locating their child care program in a residential area. Ruth Beaglehole, head of the facility, brought this issue to the attention of Councilwoman Pat Russell, who in turn brought it to Mayor Bradley's attention. Mayor Bradley commissioned a task force to look into the issue. The task force was the beginning of the Mayor's Advisory Committee. The task force help change the zoning regulations to allow child care programs to exist in residential areas (June Solnit Sale).

Mayor Bradley legitimized the Committee's role and, as a result, it became the focal point for new and innovative child care issues and advocacy.

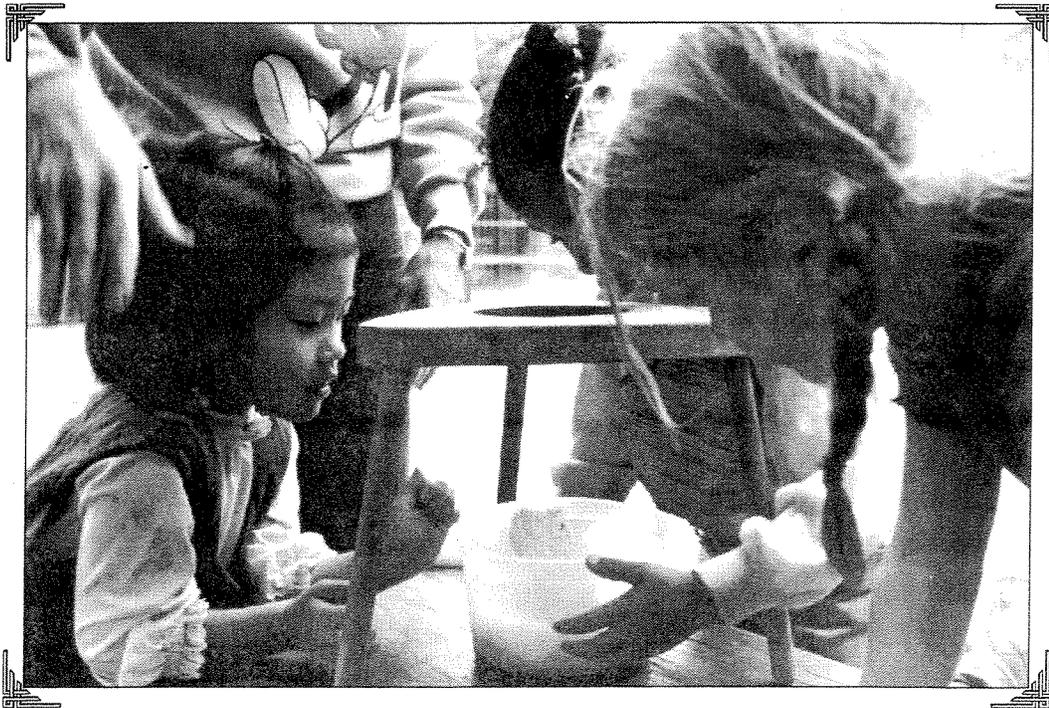
Mayor Bradley assigned a staff member to be a liaison between the Advisory Committee and the Mayor. This was the beginning of a very important connection to City officials, many of whom did not understand the need for child care, licensing and quality standards because their wives were able to stay home and take care of their children. The Committee was composed of about 50

appointed representatives from important agencies and organizations (NBIC, R&R, SCAEYC, providers from centers, family child care, churches, coops...). They worked together to educate local lawmakers and politicians on child care issues, helped the city take a position on child care legislation, and provided a major educational opportunity for all kinds of child care providers by the nature of the meetings and conferences (Vivian Weinstein).

Among their contributions, the Committee influenced the growth of employer-supported child care, instigated the development of the City child care coordinator position in Los Angeles, and held the first conference on infant care - when such care was only available through family child care.<sup>[54]</sup> These activities had a significant impact on the child care and development delivery system.

• **Employer-supported child care (ESCC) expands.** Although the first employer-supported child care in California was established in 1958, real expansion did not take place until the late 1970's. In 1958, the Kathy Kredel Nursery School was established as an on-site child care program at Methodist Hospital in Arcadia. News releases in the history files at the Kathy Kredel Nursery School indicate that this was the first employer-supported child care program west of the Mississippi.<sup>[55]</sup> Dr. Sandy Burud was the director of this work site child care center in the 1970s and discussed its advantages:

This seemed to be a great solution to the child care dilemma. Financial resources were put in by the hospital, and teachers in the center were very highly qualified and stable. There was low turn-over. The quality of the program was exceptional. It was great for children, and the hospital loved it because it helped recruit and retain nursing personnel. So to me, it sounded like a good solution to the child care infrastructure problems of the



country, so I decided to spend my career encouraging more of the same.

There were major budget cuts to child care and development services during the 1980s at both the federal and State levels, with increasing pressure on individuals and businesses to pay for child care. During this time, Dr. Sandy Burud was awarded a grant to work with the Pasadena committee to raise the level of awareness of child care issues, provide businesses with technical assistance, and demonstrate that businesses' self-interests would be served if they provided child care to their employees.

This project led to a three-year, national study of all the child care initiatives in the country, the National Employer-Supported Child Care Project, which culminated in a book. The book, Employer-Supported Child Care: Investing in Human Resources (1984), was the first 'how-to' book for companies. It included technical information on child care benefits, options and the employer's costs and benefits. Funding came through the Pasadena Child Care Information Service. When the project ended in 1984, there was enough interest that I started a consulting practice to work with employers to help them consider different dependent care benefits and we have done that for the past 11 or so years. We've worked with 125 corporate clients doing needs assessments, feasibility studies, researching various options, and helping them understand the rationale of offering child care benefits. Out of this work has come many companies that have adopted programs. We've recommended that work/life manager positions be created in some companies and that happened with many of our clients. Two years ago, we merged with Bright Horizons, a management group that runs work site child care centers (we had begun to manage a few of these). We set up the model whereby the corporation subsidized it by paying for start up costs and ongoing financial support. Over the years, we had come to manage six centers (with the

center's employees working for us) and were still doing consulting as well. With the merger, our parent firm, Bright Horizons, now manages 130 centers in 25 states. Our team went back to focusing on consulting and expanded our practice nationwide (Dr. Sandy Burud).

The first companies to consider child care for the most part were those which had between 1,000 and 5,000 employees.<sup>[56]</sup> Many large companies and some smaller ones now provide some kind of support to accommodate working parents. Dr. Sandy Burud discussed some changing business needs:

Getting employers to understand how it is in their enlightened self interest to sponsor child care and development programs is critical. The major issues for businesses used to be, 'Is this really a business issue, something we really should be spending time, attention and resources on?' Over time, companies have seen others becoming more involved in child care and this has changed attitudes a bit. They've begun to some degree to see it as a fact of doing business like having a cafeteria or parking lot or an up-to-date information services department. Major issues continue to be containing costs; everyone is trying to do more with less. So these modifications get put on the back burner. Child care issues have forced a major shift in the way businesses are run and ideas about work. Businesses are becoming concerned with how work performance is evaluated so that people can work at home or different shifts and have their work evaluated on output as opposed to on whether they are sitting at their desk from nine to five. Child care has become linked to other workplace issues like helping people balance their lives inside and outside work, wellness, or diversity initiatives. Employer-employee issues that started with child care have broadened in this way (Dr. Sandy Burud).

Employer-supported child care became recognized as one solution to the affordability, availability and accessibility of quality child care. As a result, Assembly Bill 131, Chapter 1130 passed providing incentives for ESCC. It allowed tax credits for employers who paid into dependent care assistance plans. In 1988, the Legislature authorized tax credits to employers who made contributions to child care program start-up costs and ongoing child care needs.

The California employer tax credit was a significant help in encouraging more employer participation in child care because it gives tax credits for employer contributions for child care start up and operating costs (Dr. Sandy Burud).

Not everyone was willing to call the outcomes of these laws "employer-sponsored" care:

Some employers made money off dependent care programs. They set up dependent care programs and saved money on payroll taxes. This was another way for the government to subsidize child care, not employers (Dr. Jack Hailey).

One of the challenges of encouraging employer participation in child care initiatives was general education that needed to occur informing employers of all aspects of this new benefit, including the tax benefit.

Most are not aware of the options. To help them become more aware, public education initiatives were a powerful tool. We held a series of breakfasts and conferences over the last 15 years and they always made a difference by providing information. Written information like the CDPAC employer-supported tax credit brochure, was most helpful. The first one was very well done, and we use it a lot (Dr. Sandy Burud).

Local initiatives in the City of Los Angeles also promoted employer-supported child care. These includ-

ed the City vendor preference policy and expedited processing of building permits.

The City of Los Angeles Vendor Preference Policy is significant and I would love to see it spread to other municipalities. If a company bids on a City contract all things being equal, if that company has family-friendly work policies in place, it wins the contract. On the form that is filled out, to be considered on the bidders list it states that this policy is in place and describes how to request information about work/life policies. So companies get it and read it and are motivated to consider adopting programs...

There has been an expedited processing incentive in the City of Los Angeles for companies that are building new developments if they have child care as part of their development. They also get height and density bonuses. I think it's still in place. It happens on an ad hoc basis as well being an official public policy. When a company submits a plan because they want to build something, and the Planning Department says, "well, what about child care?", that has a significant impact. This exists in Los Angeles, Carson, and Sun Valley. I don't know if these are all official city policies, or if some are ad hoc...

There are a number of cities in the country (about two dozen) where developers have to either put in space for a child care program or contribute to a fund to be used for child care (Dr. Sandy Burud).

• **Child care zoning issues:** In 1981, family child care licensing was abolished (AB 251, Ch. 102). Later it was reintroduced, but its original funding was cut by more than half. It dropped from \$8.8 million to \$4.1 million (AB 1670, Ch. 1162). In 1984, the leg-

islature passed the California Child Day Care Facilities Act (Health and Safety Code 1596.70) which recognized the need for children to be in safe nurturing care in home-like settings. To encourage family child care homes, this legislation limited local zoning regulations for both small and large family child care homes. Small child care homes could not be zoned or regulated at the local level at all, but local permits could be required of large family child care homes. Both small and large family child care homes had to meet State licensing requirements.

Despite zoning changes, there was resistance at the local level to support family child care. According to Susan Fogel, there were some legitimate concerns, but much of the opposition came from misconceptions about family child care.

Some community members thought of family child care in the same way they thought of other commercial enterprises. They did not understand the importance of having family day care in residential neighborhoods. Others believed myths that family day care depresses property values (it does not) or that the zoning regulations were needed for child safety (State licensing regulations cover safety issues). Legitimate issues, such as traffic, parking and extreme noise levels can be addressed at the local level. Unfortunately, the myths and unreasonable NIMBY concerns often get blown out of proportion.

Based on some of these concerns and misconceptions, some cities tried to find ways to regulate family child care homes through zoning laws. The California Women's Law Center<sup>157</sup> examined cities within Los Angeles County and identified which family child care homes had to meet city zoning ordinances and then examined the City policy to see if it was in compliance with State law. For those not in compliance, they assigned an attorney to work with the City to help bring its zoning policies into compliance.

When we discovered City zoning ordinances that were in violation of State law or when cities were drafting new ordinances, we contacted local zoning and planning departments and often testified at City Council hearings to bring the cities into compliance. Some cities were very responsive. Others were not. When we advised the City of Inglewood of a problem, they immediately brought their policy into compliance. On the other hand, a Palm Desert City Council member told me that they had a 'fine city attorney' and did not need me to tell them what the law was. Of course, they were wrong, and I did need to tell them what the law is. (Susan Fogel).

Despite the 1984 Day Care Facilities Act, family child care homes continue to struggle with local zoning regulations.

One year ago, the Palm Desert City Council decided that they needed a family child care ordinance. No one testified in favor of the ordinance, but they passed it anyway. Later, I found out that one person complained about one family child care home that may have left toys on the front lawn, and that was the impetus for the ordinance. (Susan Fogel).

Some cities tried to set up requirements like making them have a business license and tried to impose regulations that were broader than what the State allowed. For example, currently in the City of Beverly Hills, a family child care home incurred major expenses to fulfill local regulations, such as a requirement for an expensive masonry wall. We are now pursuing efforts to have the illegal provisions removed. (Susan Fogel).

It can be very difficult for family child care homes to understand the State laws and how they limit local zoning requirements.

We hope that when they [family day care homes] want to open, that they talk to licensing, resource and referral or that they find us or the Child Care Law Center. But some



things still go through the cracks. Family Day Care providers are still being harassed with illegal requirements and often go to great expense and difficulties to comply with these requirements because they don't know that they don't have to. A new obstacle for family day care homes is coming from homeowner associations. We have represented family day care providers whose homeowner associations have charged them fees and made them apply for 'variances' in order to provide child care in their homes. Homeowner associations have absolutely no authority to impose these conditions. (Susan Fogel).

• **New roles emerge for local governments.**<sup>[58]</sup>

To modify land use policies and promote incentives for employer-related child care, advocacy groups recognized the impact of local government on the operation of child care services. Organizations such as the Los Angeles Mayor's Advisory Committee on Child Care (1987), the Women's Issues Task Force of West Hollywood (1988), the Pasadena Child Care Coalition (1989), the County of Los Angeles Child Care Resource Committee (1990), were successful in developing child care policies that were adopted by their respective city councils and the County Board of Supervisors. They also sought to integrate a new awareness of child care issues throughout each entity's operation, from getting personnel departments to include child care in employee benefits, to having procurement departments develop vendor preference policies. These policies reflected a larger community commitment to the healthy development of children through accessible, affordable, quality child care. Sample policies are included in Addendum D.

The same strategy that works at the state and national levels works better at the local level. There is a bigger impact if 30 families go to a local council meeting and have a member of the city council carrying their agenda. Local people are far more respon-

sive to their local constituents because it takes far fewer people to knock them out of office. If, for example, all of the mayors and supervisors in California were to believe that quality child care was important to their communities, would make their constituents happy and put their communities on the map by bringing jobs, reducing kindergarten repeat rates, etc...that only trickles up to the State and federal levels, but it is the same kind of strategy and organizing and constituent development that is necessary at the State and federal levels (Sue Brock).

• **Emergence of Child Care Coordinators.**<sup>[59]</sup>

Collaboration between local governments and child care advocates served to make elected officials more aware of child care issues, while also making child care advocates more aware of the complexities involved in implementing government policies. To bridge this information gap, several local governments established child care coordinator positions. CDE's Child Development Division fostered this local government interest in Child Care Coordination activities by making small, one-time only grants, available on a competitive basis, to cities and counties throughout the State. While these funds were available, the number of child care coordinators peaked at 50 during 1989-1990. When the grants ended, a number of child care coordinator positions were eliminated.

While sharing the same title, child care coordinating duties vary from community to community. The child care coordinator with the City of Los Angeles was hired to implement the City's child care policy. In Los Angeles County, the coordinator was originally charged with developing child care services for County employees and later with County-wide child care planning activities. Since the late 1980s, many child care coordinators' responsibilities have expanded to include broader youth and family issues.

## Lessons To Be Learned:

- **Diverging visions fail the profession and children.** "Different interest groups have competed with one another to influence public policy with the result that governmental jurisdiction over child care-related programs is fragmented and spread over a multiplicity of agencies at the national, state and local levels" (Young & Nelson, 1973, p.4-5).

We must find better ways to work together in a coalition for children, to link elements together from all sources whether we are psychologists, teachers, social workers, child care providers, manpower specialists, recreations leaders, health professionals, parents or community volunteers; whether we provide service under public, voluntary or proprietary auspices; and whether there are variations in the local, state or federal policies under which we administer these services (Docia Zavitkovsky, 1977).<sup>[60]</sup>

- **Consequences of a "smaller" government includes fewer resources.** The shift in responsibility for funding child care from the federal to the State level is intended to reduce the role of the federal government and give states more flexibility. However, reducing the federal role and federal financial support strains the State's budget, reduces its flexibility. States then shift responsibility for funding and administering child care to the local level without providing adequate funding to carry out that responsibility.

Some program administrators do not want to have to report to the federal or state governments because they feel it hinders their program's flexibility. Yet others argue that because child care quality is so variable, good quality standards and adequate enforcement are critical to the well-being of all children. FCCCD failed in part because consensus on the content of quality standards was not reached. As a result, child care standards vary from state to state

and within California, the CDE (Title V) and DSS (Title 22) have different licensing standards. Title 22 is the primary source for all child care licensing. Child care programs that have contracts with the CDE **must also** comply with Title V. Title V has more stringent staff:child ratios and higher requirements for teachers and site supervisors. In addition, Title V requires that child care programs, under contract with the CDE, with two or more sites, must have a program director with a children's center permit (similar to a B.A.) and an administrative services master.<sup>[61]</sup> These different administrative procedures and regulations contributes to confusion and the wide range of program quality at the local level.

- **Diverging philosophies result in a complicated variety of funding streams and regulatory mechanisms.** In 1967, to obtain Title IV-A matching funds, the State Legislature required CDE's children's centers to give priority admission to AFDC-eligible families. This meant that DSS and CDE had to develop interagency agreements for the transfer of funds because the CDE administered State-subsidized child care and development programs while DSS had to administer all federal title XX funds.<sup>[62]</sup> These two funding streams created confusion among parents and administrators. "Existing sources of funds for subsidized services present a most confusing picture to individuals applying for funds" (Report of the Commission, 1978, p. 42). In addition, counties were required to determine the income eligibility of children in the children's centers which along with the interagency agreements, "proved cumbersome" (On The Capitol Doorstep, 1995, p. 3).

To rectify some of these administrative difficulties in obtaining the maximum federal reimbursements through Title IV-A, the Legislature gave DSS authority for the funding of all child care and preschool programs while program administration

would be under the authority of the CDE (Chapter 1619, 1970). This was still not the most effective way to administer subsidized programs and the Child Development Act of 1972<sup>[65]</sup> mandated that CDE administer State-subsidized child care. This required the CDE to request a waiver from the U. S. Department of Health, Education and Welfare for it to become the single State agency responsible for child care programs including child care centers and family child care homes. In addition, it provided \$1.5 million to establish child care centers to respond to community needs in "new and innovative ways." It shifted the emphasis of child care from supervision of children to the provision of a range of health, social service, and development activities. All new programs under this act would be supported by a combination of State and local funding.

These trends, coupled with fluctuations in funding, contributed to jurisdictional conflicts between the CDE and DSS. Partial resolution was attempted by designating some programs as primarily custodial - these belonged to DSS and other programs as educational - these belonged to the CDE (California Child Day Care Licensing Task Force, 1975). This resulted in compartmentalizing the needs of the same child into two different departments. The Licensing Task Force Report recommended that "further attempts must be made to bridge the simplistic and contradictory concept of education for young children as being opposed to care" (1975, p. 99).

• **Family child care can be a viable option if adequately supported.** As a result of research on family child care and the growing need for child care, family child care providers throughout the State organized their efforts to meet child care needs and to be seen as a viable high quality child care option.

Family child care providers organized and took control of their profession. I, along with

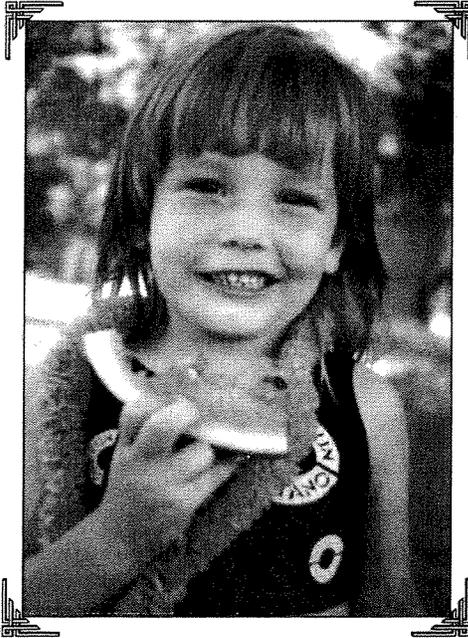
other advocates, used to go to testify on behalf of family child care in Sacramento; but that became unnecessary after awhile. The providers organized themselves and became very articulate on their own behalf (June Solnit Sale, 1996).

• **Incremental improvements in the status and quality of child care.** Discrepancies between the pay of child care professionals and professionals with comparable job skills illuminated the fact that child care was generally not highly valued. For example, campus child care directors were not treated with the same respect as faculty with similar education and experience.

When Los Angeles Mission College was opened in 1975, I was interviewed and offered one of two positions— director of the Campus Child Development Center or a full-time faculty position teaching child development. I took the full-time faculty position because it carried greater status and it definitely carried a higher salary. In later years, in this district, if you worked in the campus center with the same education as a faculty member, you got the same pay. This was a big difference from 1975 (Anabelle Godwin).

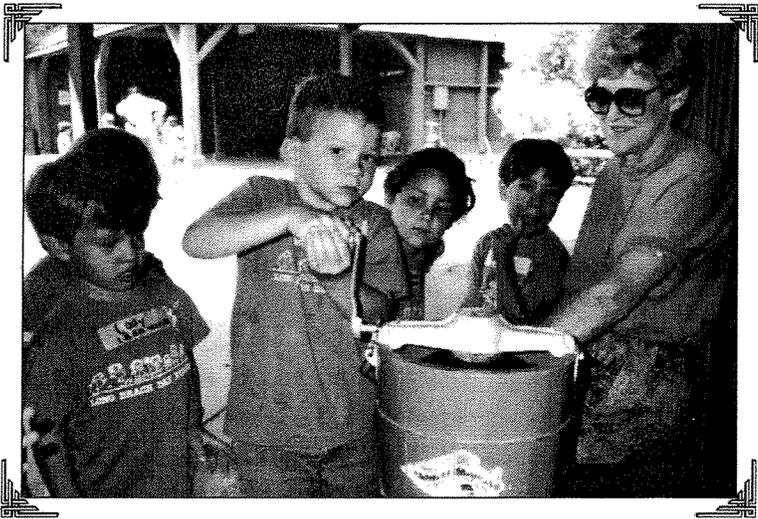
Although campus child development centers provided a small portion of child care, pay discrepancies were being addressed elsewhere. The child care program director at Glendale Adventist Hospital holds the same status and level of responsibility as other hospital department heads. The child care coordinators' position and pay is equivalent to that of other government employees in similar positions. Docia Zavitkovsky credits active child advocacy efforts for these changes:

The fact that people who were in it were knowledgeable and understood what young children were about helped changed this view.



Child care professionals and advocates worked diligently to increase the quality of child care through a voluntary accreditation process for both child care centers and family child care homes. In 1984, the National Association for Young Children (NAEYC) developed an accreditation process for child care centers as a way to improve the overall quality of child care. The accreditation process took two years and, by 1986, there were 18 NAEYC-accredited child care centers in California. Currently, there are 442 and another 776 are in self study.<sup>[64]</sup> In 1987, the National Association of Family Child Care (NAFCC) developed their accreditation process. Currently, there are 203 NAFCC-accredited family child care homes.<sup>[65]</sup>

NAEYC does a good job of publicizing issues. Their role in the accreditation of centers has been the most significant. I think the accreditation process needs to be strengthened. NAEYC has taken on a monumental task in reaching consensus on criteria for accreditation, and the fact that the evaluation system is volunteer makes it a little uneven. It seems to be better if we would bite the bullet and enable them to pay an evaluator and have more consistent quality evaluations. There are many programs that are accredited but don't meet the published accreditation criteria, like teacher-child ratios and the group sizes. I know some of the groups that are traditionally thought of as providing poor care have a target of getting all of their centers accredited and have managed to get their centers accredited because they are just slightly better than the horrible care that exists. It would be powerful if NAEYC could make those standards more universally applicable. We need a better regulatory system. I think federal standards is a good idea, but I don't know if they could foster it. I think it has been tried and failed (Dr. Sandy Burud).



## 1990-1996

"We are now at a pivotal point in history"

(Vivian Weinstein).

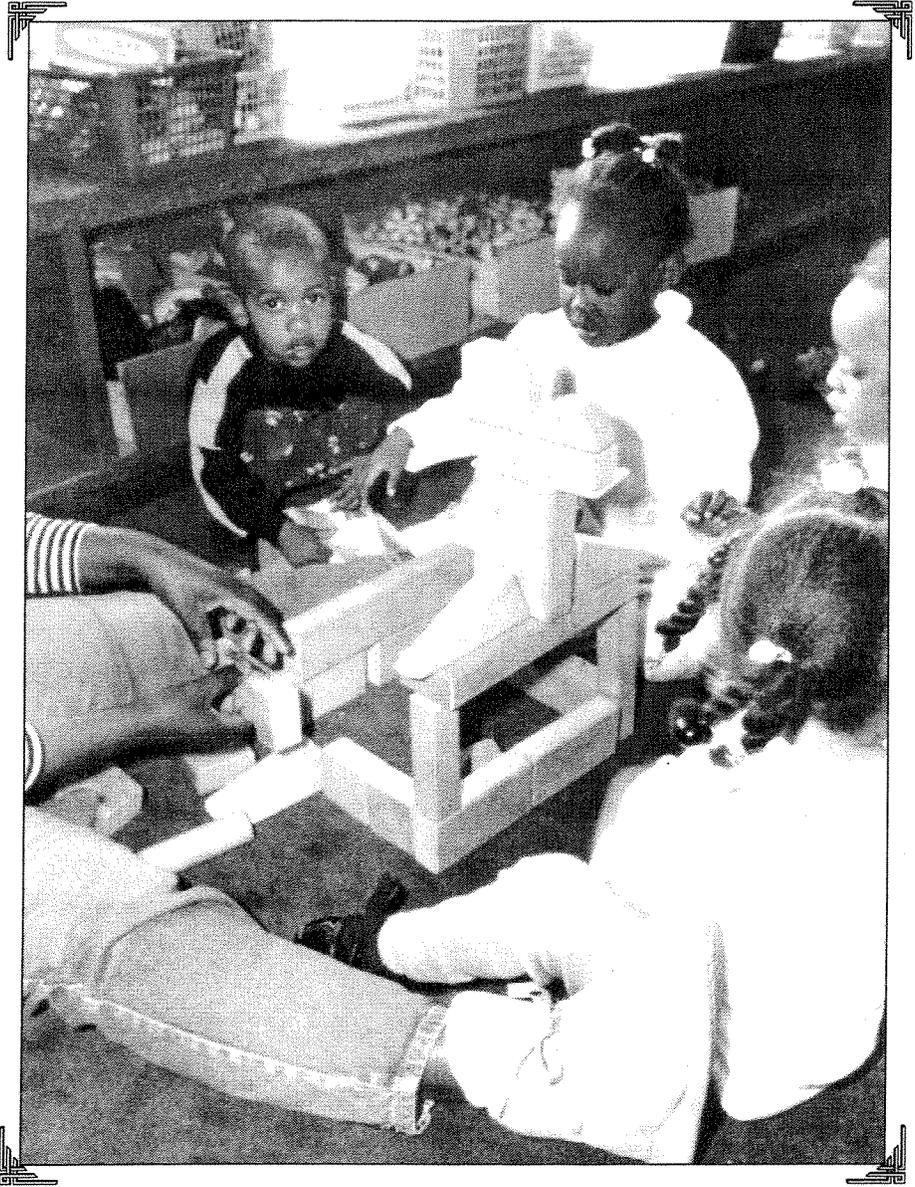
• **Administration of California's child care and development delivery system.** There is an ongoing debate between DSS and CDE over who should administer child care programs.<sup>[66]</sup> Although the Child Development Acts of 1972 and 1980 moved toward consolidating these funding streams, implementation of the Greater Avenues for Independence (GAIN) in 1985 effectively fragmented the system once again. By 1991, there were seven different delivery systems in California (On the Capitol Doorstep, 1995). While both departments serve low income families where parents are working or in job training, the different departmental missions are reflected in their child care components. The services funded by the CDE are considered to be an extension of that department's educational program, are held to specific standards, and are funded at relatively higher levels.<sup>[67]</sup> In contrast, the role of child care in DSS is to facilitate the employment of parents and, as an ancillary service, cost considerations historically outweighed concerns for quality care. Since DSS serves children and families who are more often at a greater disadvantage than other populations, this is particularly troublesome.<sup>[68]</sup> To improve the child care delivery system, Assembly Bill 2184 was adopted. It mandated the CDE, DSS and the Governor's Office on Child Development and Education to work together to streamline California's delivery of subsidized child care services (1991, Ch. 1205). The AB 2184 Task Force report was released in August 1996.

I think the thrust of policies since 1980 is that poor people who are working or in training or

trying to leave AFDC through earnings should be treated equally by the subsidized child care system. Their children are all the same, and all these low-income families are going through similar cycles: looking for work, on AFDC, in training, working at low pay, trying to work their way up and so forth. It isn't helpful to single out one part of this cycle and provide child care services only to families who are in that part of the cycle (Dr. Jack Hailey).

• **Federal Child Care and Development Block Grant<sup>[69]</sup>/Local Planning Councils.** "Enactment of the Federal Child Care and Development Block Grant (FBG) represented a fundamental turning point in subsidized child care for California" (CDPAC, FBG Issue Brief, 1996). It mandated that states submit a State Plan every two years. In California, SB 500 specified the restructuring of the State child care and delivery system. CDE was designated as the lead agency to administer and implement the FBG which required it to maintain the State Plan with the advice of the CDPAC, while priorities for FBG funding would be developed at the county level. The Los Angeles County Board of Supervisors authorized the Child Care Advisory Board to convene a planning body of no more than 45 persons for the purpose of setting local priorities for FBG funding. In the next two months, the local Child Care Planning Committee held several regional meetings that involved over 400 persons in defining local child care priorities. These were compiled and submitted to CDE's Child Development Division.<sup>[70]</sup>

In July 1991, AB 2184 (Speier) created local planning councils in each of California's 58 counties to address the evolving need for child care and growth through FBG funding from year to year. Local planning councils are needed to reexamine child care priorities and forward notices of those changes to CDE in order for it to modify existing contracts and award new contracts in a way that will



best meet the needs of each county. This bill mandated that local councils work in conjunction with CDE and CDPAC to establish local priorities to be used by CDE in awarding local service contracts for FBG funds. With the adoption of AB 2184, the Los Angeles County Child Care Planning Committee expanded its mission to develop priorities for the distribution of federal and State funds as they became available and to prepare a community child care plan.

• **The child care context in Los Angeles County.** Between 1991 and 1993, the Los Angeles County Child Care Planning Committee was confronted with several issues: an unmet County-wide need for child care and subsidized child care in particular; demographic shifts to the outlying areas of the County where there was little, if any, child care and no service infrastructure; and increasing community violence which put inner-city children at unprecedented risk.<sup>[71]</sup>

• **Personal Responsibility and Work Opportunities Reconciliation Act of 1996.** This federal welfare legislation took effect on October 1, 1996. It poses many challenges for Los Angeles County, where 514,252 children under the age of 18 are in families receiving AFDC and 296,394 are under the age of six. In its current form, this legislation will: 1) eliminate guaranteed child care assistance for families on welfare where parents are in school or job training programs; 2) eliminate the one-year guarantee of transitional child care assistance for families who leave welfare for low-wage employment; 3) consolidate AFDC-linked child care programs (Title IV-A, the Child Care and Development Block Grant, Transitional Child Care (TCC), GAIN, NET (non-GAIN Education and Training) and At Risk into one program called the Child Care and Development Block Grant, giving

states more discretion over where funding is concentrated, and 4) require states to meet a 25 percent caseload work participation rate the first year, and over time up to 50 percent. Currently, California is below 25 percent. If it does not meet these requirements, the State will have to pay a five percent penalty the first year and a two percent penalty for each additional year. This will increase the need for child care because states will have to place more parents in jobs.<sup>[72]</sup> Maria Balakshin, director of the CDE Child Development Division, reports that this will create a tremendous need for infant care.<sup>[73]</sup> CDE is now designated as the single State agency to receive and administer all federal child care dollars and their child care budget is approaching one billion dollars.<sup>[74]</sup> It is currently in the process of contracting with DSS to fund child care that was formerly provided through TCC and GAIN programs.<sup>[75]</sup> The State will also be challenged to match and spend federal dollars. Any carry over dollars will have to go back to the federal government.<sup>[76]</sup> The cap for the administration of federally funded Alternative Payment Programs is reduced from 15 percent to five percent, and there is ambiguity in how the government will define administrative costs, but it may be a more liberal definition than the current one.<sup>[77]</sup> The 25 percent reserve of the FBG to improve quality child care and support before and after school programs will be eliminated and replaced with four percent for quality improvements (a smaller percent, but calculated from a larger amount of federal dollars). There is no definition of quality, and it is anticipated that there will be tremendous competition for this funding. Also, this block of funding is not guaranteed, making it most vulnerable to federal budget cuts.<sup>[78]</sup> In addition, cuts in title VII, the child nutrition program, could hurt family day care homes who rely on this funding for children in their program.

In the upcoming months and years, we need to answer a fundamental philosophical question that

was raised in the 1970s: 'Will day care support the family and community or will it continue to be an instrument of government social policy offered and withdrawn solely in response to Washington's attitude on welfare and regulation of the poor?' (p.219, Steinfels, 1973).

• **Research further informs the field and policy makers.** During the 1990s, research on a variety of child care programs enriched our understanding of child development and the relationship between the quality of child care and child development outcomes. This section will touch briefly on some of the highlights of these important empirical contributions.

Advances in neuroscience have revealed that brain development between birth and the first year is more rapid and extensive than previously realized and it is more vulnerable to environmental influences than previously suspected (Starting Points: Meeting the Needs of Our Youngest Children, 1994). Although there is evidence indicating neural plasticity exists throughout the life-span (Schacter & Tulving, 1993), early environmental influences can have lasting effects on the number of neural connections, the way in which connections are made and which connections get pruned (Huttonlocher, 1994). The Carnegie Task Force on Meeting the Needs of Young Children discusses some of these research developments and concludes:

"We can now say with far greater confidence than ever before, that the brain responds to experience, particularly in the first year of life. That means that by ensuring a good start in life, we have more opportunity to promote learning and prevent damage than we ever before imagined" (Starting Points: Meeting the Needs of Our Youngest Children, 1994, p.9).

The Study of Children in Family Child Care and Relative Care assessed the child care arrange-

ments of 225 children and observed 226 child care providers in three communities across the country including Los Angeles (Galinsky, Howes, Kontos & Shinn, 1994). The study included regulated and non-regulated family child care providers, and non-regulated relatives who provide care. Child care providers who offered higher quality care were more likely to seek out opportunities to learn about child care and development, have higher levels of education, have higher adult to child ratios, charge higher rates, and are regulated. When homes provide good quality child care, children are more likely to have secure attachments to the provider and more complex play. In this sample, 81% (54) of the non-regulated family child care home are in this classification because they care for more children than allowed by State licensing laws. Somewhat surprising is the finding that low-income children are in better quality settings than middle-income children when they use centers. To date, the United States has made a greater investment in subsidizing center care and promoting quality improvement efforts for this population than for family child care and relative care, although there is concern that support for center care is eroding (p.91).

In 1995, Cost Quality and Child Outcomes in Child Care Centers (Helpburn et al.) reported that the majority of care, sampled from four states including California, ranged from custodial to harmful and is "sufficiently poor to interfere with the children's emotional and intellectual development" (p. 1). Only eight percent of the observed infant or toddler rooms were rated as good quality. Quality is related to higher staff-to-child ratios, provider education and experience, and higher teacher wage rates. They also found that parents do not seem to demand higher quality care so there are few economic incentives for centers to improve program quality.

Recognizing the relationship between child care teaching staff compensation and the quality of

care provided, the Los Angeles County Advisory Board worked with the National Center for the Early Childhood Work Force to assess local conditions (Profile of the Child Care Center Work Force in Los Angeles County, 1996). The sample included 474 individual child care center sites in the County, including a mix of private for-profit, church-related, non-profit and publicly-funded programs. This study revealed that even though child care center staff in Los Angeles County are relatively well-educated, they earn very low wages and less than one-third of the centers in the study offered fully paid health insurance to child care teaching staff.

How will this new information (in light of our history) affect the way we serve children and their families...the way we invest in child care and development services? (Kathy Malaske-Samu).

## **Lessons To Be Learned:**

• **Federal policy reflects an understanding that child care makes it possible for parents to work.**

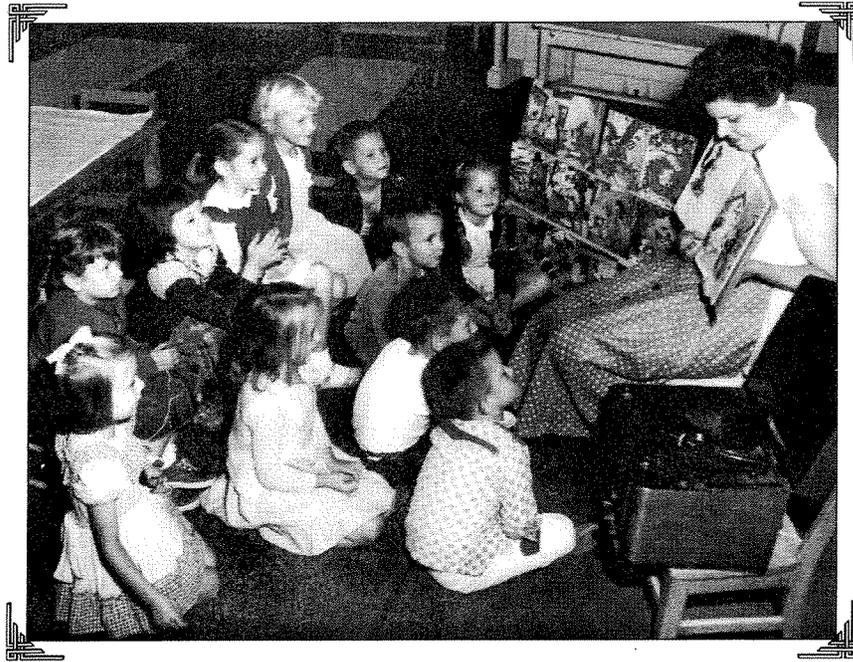
One of the things that welfare reform demonstrates is that when you say welfare, you think work, and when say work, you think child care. They got the message that if you want to make people work, you have to have child care. Unfortunately, they didn't get the second part of the message that child care has to be for everyone and high quality. We are still working on that. But progress has been made, I remember when it was one of those issues where when you talk to legislatures early on they did not make that connection between having to work and child care. Their minds were really affected by the Head Start model. They were thinking child care was to improve poor children's ability to compete in the world and not for working families (Dr. Alice Walker-Duff).

• **Regardless of state and federal policies, local efforts can have a positive impact on the**

**delivery system.** The Los Angeles County Local Planning Council has become an important part of the County's child care and development delivery system by compiling resource information on demographic trends that will affect the child care demand for and the availability of funds and by providing a forum to discuss pertinent child care and development issues. Based on their research, "it appears that shifting demographics, combined with static and historically inadequate resources, have resulted in an inequitable distribution of child care subsidies in Los Angeles County."<sup>[79]</sup>

In 1993, CDE announced that would be making \$11,862,094 in FBG funds available to parent choice programs in Los Angeles County and asked the County Child Care Planning Committee to recommend a distribution strategy. "The Committee struggled with a series of contentious issues related to resource allocation." Despite conflict, the committee members discussed important issues prior to conducting any calculations and reached consensus on the following goals:

- The overall goal was to work toward an equitable distribution of subsidized child care funds;
- The expansion should follow the original allocation and dedicate 19 percent of funds to the Department of Children's Services (among the 13 parent choice programs, they were unique in that they served children at risk of abuse and neglect County-wide);
- Indicators of need include: number of children receiving AFDC; participants in free and reduced school lunch, limited English proficient students in public schools; open child abuse cases and children with either an employed single parent or two employed parents;
- 50 percent of expansion dollars would be use to achieve a more equitable distribution of funds.



With consensus on the philosophical underpinnings, need and resource allocation formulas were then unanimously adopted by the committee and implemented by CDC.

This example illustrates the truth and importance of Docia Zavitkovsky's observations made in 1977<sup>[80]</sup>:

"...overcoming barriers (towards a policy for children because they are children) takes time, patience, tolerance, knowledge, flexibility, good health and a sense of humor. That means one can't sit complacently and wait for professional consensus to take place, for community people to be involved in a productive way, for legislators to support legislation which is good for children, and for the press to present all sides of the issues. Rather, it means one must make a beginning - accepting reality with all of its contradictions and imperfections, bringing concerned people together to examine the issues, determining a course of action, keeping the main goal in focus and remembering that conflict, uncertainty and differences are not necessarily destructive but part of the process of growth."

• **The child care and development delivery system remains inadequate.** Throughout the nation, for families in all socioeconomic groups, there is a tremendous unmet need for affordable, accessible, quality child care services. This is particularly true for Los Angeles County. Over the past 10 years, the weekly cost of infant care increased 56.5 percent and currently costs an average of \$127.41 per week. For children aged two to five, it increased 65.0 percent to \$89.11 per week and for children age six and over it has increased 61.6 percent to \$90.91 per week.<sup>[81]</sup> At least 367,737 children need care. Many children who are eligible for subsidized care remain on waiting lists. Families ineligible for subsidized child care cannot afford to pay for care. The

quality of child care programs remains variable. "Affordability and availability of child care were the most frequently reported issues challenging cities within the County."<sup>[82]</sup> These findings are based on a report by the Child Care Planning Committee of the Los Angeles County Child Care Advisory Board who surveyed 82 incorporated cities with a response rate of 56 percent.

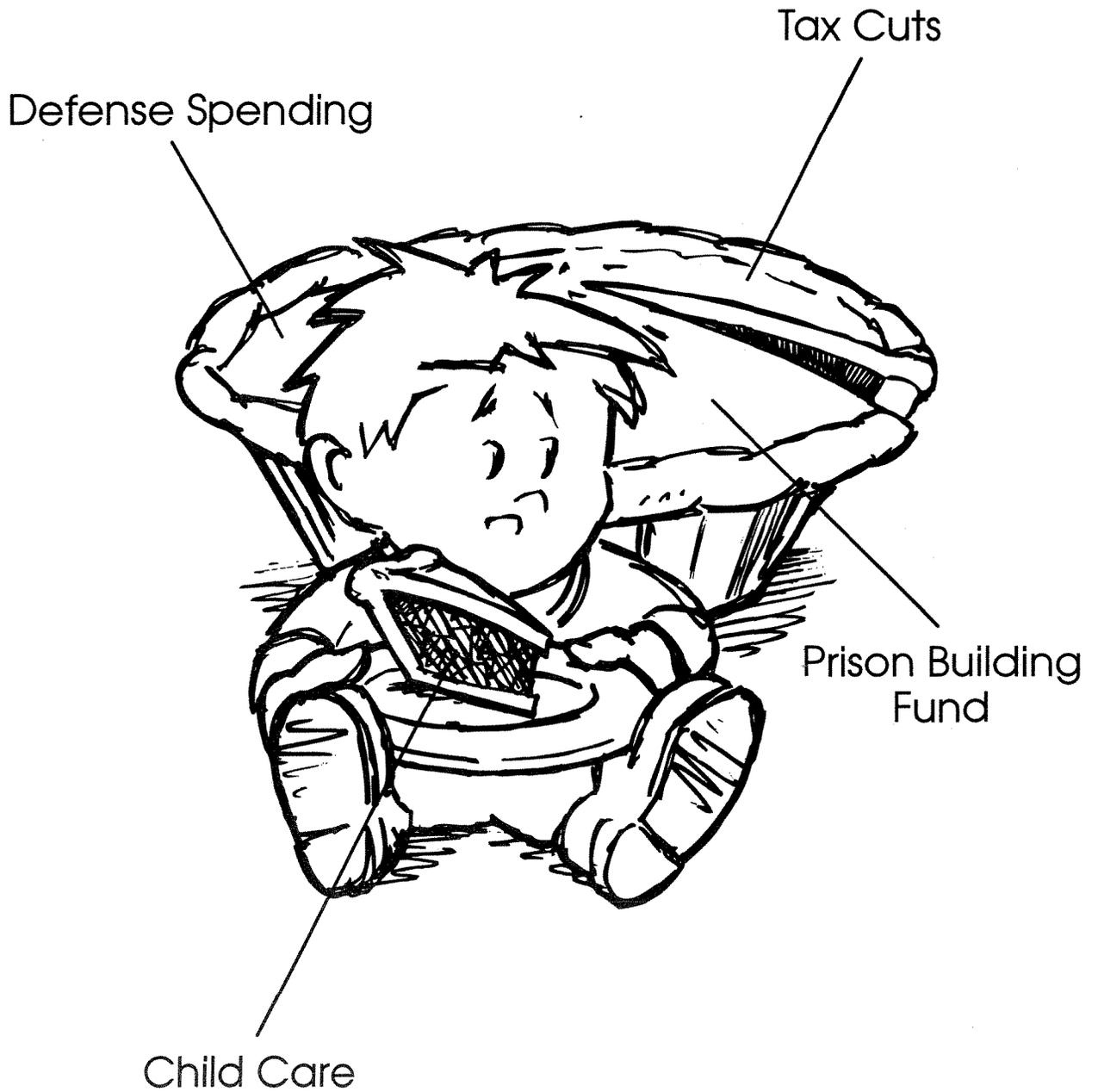
We have a huge, humongous waiting list of people who are working full-time, earning enough money so they don't qualify for public assistance, but not enough to afford the child care that they need in order to continue working. Most people don't really recognize that you can work at minimum wage full-time, full-year and not raise enough money to support yourself or your family (Dr. Alice Walker-Duff).

When I served on the Resource and Referral board, it suddenly became apparent that there are large groups of children who are not being cared for but should be. We don't even know who they are. One group of children who is not getting any care at all are the children who are dependents of the court. There are lots of children in unusual circumstances...I think it is a lack of priorities (Betty Brady).

Innovative programs and working collaborative partnerships in the County and many of the cities have made tremendous contributions to the child care and development delivery system; yet, the inadequate supply of good quality child care continues to present a serious threat to our future.<sup>[83]</sup> Child care providers are among the lowest paid professionals - often without basic health benefits.<sup>[84]</sup> Yet, we know better. A number of recent studies indicate that children benefit from quality programs run by well-educated, stable staff.

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# A Tiny Slice of the Federal Money Pie



## Future Directions

It is easy to run down the list of problems hindering child care and development services and everyone agrees that something needs to be done. However, much of the political action has not matched the rhetoric that children are valued..."If it did, we would have a national policy for children based on children's needs. We would be implementing the policy at the local level through community coordinated programs and we would be spending our time discussing how to improve and enrich programs and services."<sup>185</sup> Los Angeles County and some of the cities within it have taken action and developed progressive policies...can others follow their lead? If so, it is critical to step back, reflect on history and address the basic questions that still remain: 1) who is child care for?, (2) who should pay for it?, (3) who should administer it?, and (4) what action is needed? The decisions that are made now will set the course for the next several decades. In light of the history that was presented and some of the interviewees closing comments — what will be the future directions?

### Whom Is Child Care For?

At this point in the history of social policy in this country, whom child care is for is a basic question. In the past it has constantly fluctuated depending upon political needs rather than the needs of children and families (Vivian Weinstein).

- **Our philosophy of whom child care is for drives much of our funding decisions.** Early day nurseries, began by charitable organizations and

individuals, were targeted service for low-income, "disadvantaged" children and immigrants. Later, Federal funds were available for child care in times of emergencies like wars and the Depression, but they were quickly rescinded when the crisis passed (California was able to continue Lanham Act programs only because parents and advocates forced legislators to do so). For the most part, child care has been regarded largely as a marginal child welfare service (Steinfels, 1973). It was seen as an adjunct to welfare to enable families to work and get off welfare.

An issue that remained year after year and remains an issue today, is: **what does child care mean and how much are children worth?** An extreme conservative agenda would be: you should be able to babysit to watch small children without spending much money, without having supplies, without having well trained staff and with very inexpensive staff-child ratios. The more you know about early childhood education and development, the more you recognize that those are the years when you get the biggest bang for your buck. To overlook the importance of enriching programs is a social folly. This debate goes on today. By not taking care of children, we think we will save a dollar today, but we end up spending five dollars tomorrow (Sue Brock).

- **Quality child care serves everyone's self interest—children, parents, providers, business, schools and society.** New research shows all children can benefit from early childhood development programs. In addition, families, businesses,



communities, government — all of us— benefit from children who are adequately cared for. “The results of the methodologically strongest studies in a very vast literature indicate that early childhood programs can have substantial effects on children’s lives years after their involvement in the program...such as enhanced school achievement, higher earnings and decreased involvement with the criminal justice system...help parents strengthen their parenting skills and move towards economic self-sufficiency”. [166]

High quality child care makes a world of difference. The immediate changes and differences are subtle. It isn’t like children will be showing dramatic changes overnight. The changes are cumulative. Children in low quality get bored. High quality have all kinds of fun things for the children and the children adore the teachers. I think that children deserve to feel that they are coming into an environment where someone is really interested in what is going on with them, where they can kick back for a while and do something fun if it is an after-school program. Children are so receptive to their environment. They take in everything, the nuances of behavior of adults, whether the environment has been thoughtfully created or not...all of that. A quality program affects a child in a positive and life-affirming way (Betsy Hiteshew).

Good quality child care serves everybody. It serves children because it provides opportunities for growth and development—all that children need to grow up healthy, physically, cognitively and social-emotionally. It serves parents, especially those who have to work. It educates all parents about child care and development. It serves society if children grow up to be healthy with goals and opportunities to achieve those goals. The Rand corporation and many other studies show that good early childhood programs prevent problems later on. However, many legislators view child care in relation to the budgetary needs of welfare, they don’t think of the totality of what child care can do (Vivian Weinstein).

Child care is an integral part of normal child development and normal family functioning. It is a support to families, to children and to society. It should be seen as something that all normal people may need, want and use. It is not for people or children who have something wrong with them, it is for everybody...One of our hallmarks was that child care was needed for everyday, regular working people. It is needed for everyone, but different people access it differently and society needs to recognize that. The message that child care should be normal is a message that people weren’t particularly ready to hear. When you say work you say child care. Like a cheer. No matter what job it is whether you are making \$100,000 a year or \$10,000 a year, when you say work, and you are talking about grown up adults, you think child care. It needs to be available, accessible and high quality (Dr. Alice Walker-Duff).

• **Many believe access to affordable, quality child care will not be achieved until it is universal.** Because comprehensive, high quality child care and development services serve everyone’s interests, many child care advocates and professionals feel these services should be available and affordable to all families who need them.

Child care is a service that ought to be universal...It would generally elevate the level of child care quality and improve teacher compensation and benefit packages. If it was a universal entitlement like kindergarten or first grade it would be much easier for labor unions to get established and it is much easier for someone entering the profession to have some stability. On the other hand, the care for low income kids has been fairly stable, although by no means do we serve all the children who are eligible, but once people are in, we have done a pretty good job in keeping the program stable for the child and family. Virtually every organization that had child care and development funding in 1974-76 has funding now. There are a good deal of

new agencies in the mixing pot in the last five years (Dr. Jack Hailey).

Child care is for every child regardless of income status (Yolie Flores-Aguilar).

If we want to provide services for anybody, then we need to provide it for everybody. There is more buy-in to these services if everybody has access to them (Linda Lewis).

Efforts for universal child care and development services are well spent. If we stick with it gets built into the political agenda (Sue Brock).

• **Multiple problems of tying child care to welfare.** If parents do not have access to quality, licensed child care, it is not possible for them to get out of poverty. However, there are many problems by tying child care to welfare.

Sometimes legislators view child care in relation to the needs of welfare, they don't think of the totality of what child care can do (Vivian Weinstein).

We as a country have not come to grips with how we want to treat children and families. Twenty-five percent are living under poverty. The 'pull yourself up by the bootstraps' philosophy is a problem because every family, in all different circumstances, needs some kind of help. It is tough to raise a family and society should be helping to do that (June Solnit Sale).

It is critical that we stop looking at child care as a poor person's program. As long as it remains a service for poor families it will receive inadequate funding, will be low in quality, and on the budget chopping block (Yolie Flores-Aguilar).

Are all families now so much more fragile and all budgets of child care and development so much tighter that we can no longer give this top priority to children who are abused or neglected? Yes, these children may

take more staff time and they may not come everyday, but child care can be a very important piece of the families' reunification. We should not neglect these children. Also, do we want to limit subsidized child care to be solely a support for people on AFDC to help them leave the welfare roles? I hope not... In some ways by accident and in some ways by design, by taking the lowest-income family first, many families who are on AFDC are enrolled. They are looking for work, are in training, or are working part-time. We hope that their earnings increase, that they leave AFDC, and that their children receive a full or partial subsidy for the time the family needs it. But, there will always be some reason that the family becomes ineligible: the program may not serve children after age five, or the program doesn't take infants and the older siblings are in the program. We can think of many situations that the current system does not respond to, but in general, it works pretty well. So, to say 'Boom! We are suddenly going to make this a support service solely for families on AFDC' would be disruptive. We can get stuck in a Soviet model where the service is solely because we want something to happen to the parents – we can take care of Sonja and Ivan's children so that they can work and help the State or move off AFDC. No, it's better to set up the program for children who need child care AND the developmental services of a high quality program. If their parents are not working, we have State Preschool and Head Start. If their parents are working or in job training, we have child development full-day. We ought to respond to the needs of poor children for growth and development, use our money to reach as many of them as possible – regardless of whether they are on AFDC, looking for work, or are in low-wage jobs. At any point, the same family can be in one of those categories – so, it makes sense to commit ourselves to the children over the long term, as their parents find themselves in changing jobs or welfare circumstances. This is how we attract teachers and administrators – because they care about the children they work with every day, not because they see the benefits of

increasing parents' productivity in the work force (Dr. Jack Hailey, 1996).

Large numbers of women on welfare are now working or would like to work, but cannot afford child care. Many depend on make-shift arrangements that do not allow them peace of mind and do not provide quality environments for their children. Often, these women lose their jobs when their child care arrangements fall apart. (Susan Fogel).

## **If quality child care benefits everyone, then how should it be financed?**

Since families, businesses and government — all of us benefit from quality child care and development programs, then all should contribute to financial support. In the past, child care has been subsidized by the government for a portion of low-income families and by child care providers through low wages. It needs to be seen as an investment in order for government and businesses to be willing to support it.

• **State, federal and local investments in child care.** State and federal investments in child care nationwide total \$10 billion annually, but "these investment rates are dwarfed by the cost and coverage of the nation's universal system of free public schooling... and problems in quality limit the positive benefits that may be obtained" from comprehensive, quality child care.<sup>[87]</sup>

Every other industrialized Western nation supports families. For example, France allows mothers to stay home, if they want to, during their child's first year because they retain 90 percent of their salary. The U.S. funds child care if we need women in the work force because of the war, or to move women off welfare. But, we never adequately fund these services and we never make them

universal (Vivian Weinstein).

It's an old debate of whether we will pay now (for early child care and development services) or pay later (for school drop outs, poor health, crime, welfare...). Children who receive good quality care at an early age fair better than those without such experiences. It's a matter of priorities if we are going to pay on the front-end. Until then, we continue to fund more and more back-end programs (Yolie Flores-Aguilar).

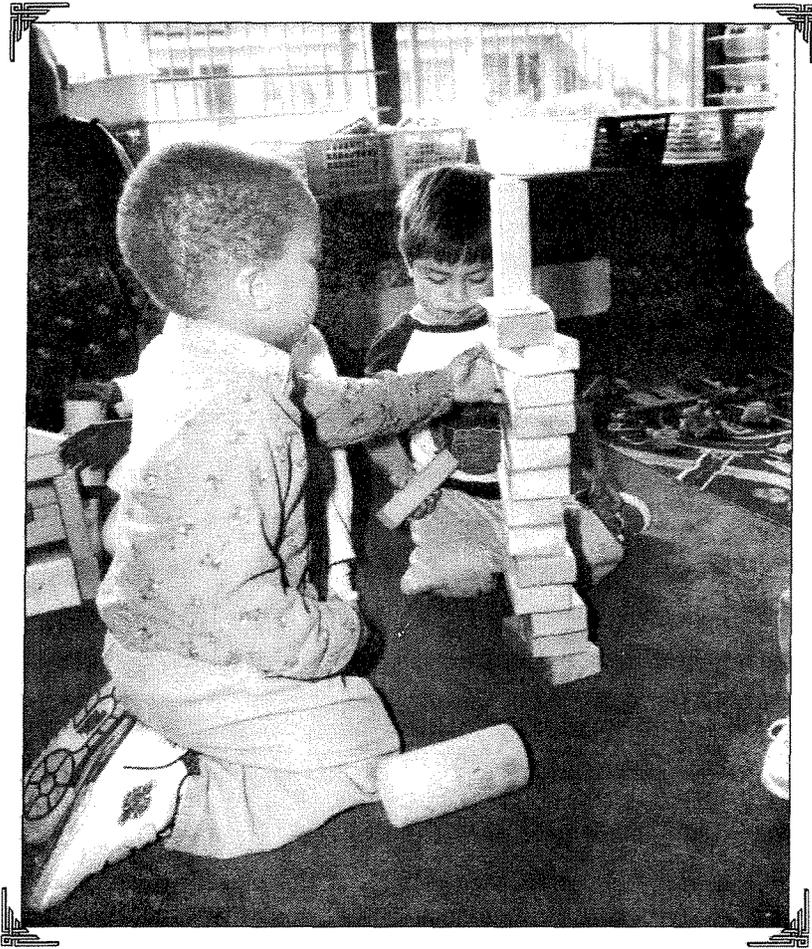
In the past, voters supported taxes that promote quality child care.

Proposition 2 was voted for by people which showed that people think if anyone in public service deserves a top salary, it is the men and women who have the job of bringing up the children for the greater part of the day (Los Angeles Times, 3/8/53).

Since child care is a broad social issue, I would support public tax dollars going into the child care infrastructure. There has been research that shows people would be willing to pay additional taxes for services like child care (Dr. Sandy Burud).

• **One of the problems over the years is that good child care costs much more than what many parents are able to afford. Sliding fee scales based on family income could be one possible solution.** Because many parents cannot afford to pay the actual cost of child care, providers have subsidized it through low wages and few, if any, benefits.

I think there is a way to figure out how to charge parents more. We have based our charge on what we thought our lowest paying parent could afford. The child care professionals end up subsidizing their own programs. The only other alternative is to ask government to pay more and that is a slow and incremental process. I believe that we have structured the program first and fore-



most to keep parents' costs down. And by putting parents first — charging the lowest possible fee, paying people the lowest possible wage, and providing lower quality care, there are losers. The losers here are the children, who are often in inadequate care and staff members who are paid inadequately and, therefore, have little incentive to take additional classes and improve their skills or stay in the field. So, we benefit families' budgets with lower rates, but we provide only marginally safe care (Dr. Jack Hailey).

If proprietors charged as much as they could for child care, then some of that money could be given to those families who could not afford it. You can also ask families to work off some of their child care costs (Elizabeth DeCola).

• **In addition to state and federal subsidies and charging parents more, employers can help finance child care.** There are endless amounts of ways in which employers can support child care.

They can offer on-site centers and several can go together for off-site, vouchers, contracts with community child care programs, discount arrangements, purchase of spaces and existing child care facilities, all kinds of child care referrals and information, programs that offer materials about how to select good quality child care programs, training for child care providers, promote accreditation of family child care, sponsor family child care, i.e., the Dayton-Hudson initiatives or the corporate champion project in Fort Worth, Texas, where they are raising the level of quality in the community. Many business join together to recruit and train family child care providers like the California Child Care Initiative. An employer can contract with R&R or publish an informational book for parents. Employers can create models of quality child care. These models can raise the standards of child care as well as parent's expectations. They can participate in advisory groups that can be effective advocates,

they can develop libraries with information on parenting techniques and increase consumer awareness about the importance of child development and quality child care. They can also provide incentives for child care programs to become NAEYC-accredited (Dr. Sandy Burud).

Although employer-supported child care is one excellent way to meet child care needs, it is not the end all solution to the issues of available affordable accessible quality child care.

We need to develop initiatives to encourage the full range of employer-supported child care because employers have a self interest in a good child care system. Employers are one of the few sources of financial resources. The more we encourage them to adopt these policies, the better off we will be. The caution that I add is that there needs to be a certain kind of activity encouraged. They should only get tax credits for qualified licensed facilities that meet certain standards. We want to encourage employer support of quality. We need to educate parents to be better consumers of quality care. If they are more informed consumers, they will have higher expectations and some of the poor quality care that exists will diminish. I think we need more financial support for parents to increase their purchasing power. Otherwise we will have more informed consumers, without enough money to buy good quality care. A combination of employer dollars/public dollars is necessary (Dr. Sandy Burud).

Information about the various options open to employers is available, but this information needs to get to the right sources.

I think sponsoring forums is a really good thing to do because then the audience hears the message firsthand. They can get questions answered directly. It's beneficial to sponsor forums where they hear from their peers about how programs work well. If information could get to city planning departments, about what the City of Carson did, it might be

replicated by other cities. Finding out how that originally happened would be great. Have a meeting of all the planning department representatives and have a presentation about this policy and its success would be very powerful (Dr. Sandy Burud).

The following are additional recommendations to improve and maintain public-private partnerships:

Evaluate ESCC from the business end. Businesses need current information about what other industries, that they can relate to, are doing... Determine where high-level business managers gather and get ESCC on the agenda. When meeting with them, speak in their terms (Dr. Sandy Burud).

Examine ways in which ESCC can be more effective in meeting child care needs. It could be better done with a co-pay like Blue Cross or in lieu of salary raises improve options. Either case, it will take a kind of organization that we haven't yet done (Dr. Jack Hailey).

## **Who should deliver and administer child care and developmental services?**

The decision of who should administer child care programs is critical for the future of child care in California. Early childhood programs tend to be administered by either state education or human service agencies depending on whether or not the original purpose of the program was education or child care. This is changing as the practice and purposes of early education and care are merging (Docia Zavitkovsky).

Although early child care and developmental services should be given the same priority and universal access as K-12 education, infants and young children are different from those of school-aged children. A range of high quality programs are needed to provide parents with a real choice that enables them to meet their individual needs – for some this

means family child care, for others, centers or work-site. Administering and regulating a diverse service delivery system has challenged California. To date, there is no one set of national licensing standards. As a result, the quality of care varies from state to state. California has two sets of licensing standards: 1) CDE's Title V regulations for Children's Centers and 2) DSS's Title 22 for all other types of child care. Although there are several quality child care programs in California, for the most part, parents are limited to mediocre to poor quality care.

There is a lot of confusion over the administrative functions of DSS and CDE. Licensing is somewhere in the middle. CDE handles qualifications for Permits and Title V regulations, while DSS (Licensing) is responsible for Title 22 monitoring. The two departments are not coordinated. We are working hard to correct that, but the infrastructure is still very fragmented (Mary Soth).

In California, originally the single state agency to administer federal funds was DSS. Because there was so much trouble getting that money spent, it got shifted to CDE. Under CDE, child care programs were focused on the child's developmental needs rather than protection. That is extremely important. I am extremely disturbed about the talk of shifting child care over to DSS because they see the provision of child care as a service to enable adults to work rather than looking at child care as a service to children (Linda Lewis).

We are a long way from the idea that child care and education go together (Betty Brady).

Until we expand the definition of health to include emotional and intellectual growth, there will always be conflict and challenges (Linda Lewis).

As reported by the Center for Research on Women,

The primary purpose of an administrative

structure should be to support and improve the quality of service delivered to children and families. There are a range of options in selecting an administrative structure at the State and local levels. For consideration, there could be a single State agency, joint management by two agencies, or the creation of a new agency - focused on children's services. Amid the political and economic considerations, the selection should be based on the capability of the State/local agency (or agencies) to fulfill the purpose and interest of the early childhood programs and to improve the delivery of services to children and families.[88]

• **Despite our knowledge that quality child care can have lasting beneficial effects on child development and tremendous efforts to improve quality, it is still extremely variable.**

"There now exists a significant research foundation to inform State policy development...[we] know with great confidence not just that quality programs work, but what makes them work".[89] Why is it that quality remains variable with a majority offering mediocre care? To meet universal quality standards, training for child care professionals needs to be more accessible and upgraded for both regulators and those who work directly with children. There have been commendable efforts to improve licensing.[90] However, all of the interviewees who discussed licensing issues feel that the minimum standards are too low.

Just two years ago, I observed a program for infants and toddlers in a building meant for adolescents. I opened the door and here were 11 rocking chairs, each with an adult holding an infant and all of them looking at a television. We really have to recognize that quality of care is a continuum (Betty Brady).

When I started my masters, I could not believe how bad the background and research in child care was. So much of child care is mediocre. Now we have good research that shows that quality child care

does good. It shows if you get it early enough it can help and be of value. Improving quality through the accreditation process is marvelous. The teachers, parents and directors do a self-evaluation. The purpose is not to cut people out, but to help you improve. This is voluntary and costs some money to have it done. We still have no overall federal program of quality (Anabelle Godwin).

There are still people who don't see a need for special early childhood education so long as they can get licensed. Today, I think there is much more attention to licensing. Community colleges also provide much more in the way of course work. I think courses and improved education have helped, but there needs to be a coordinated effort (Betty Brady).

It used to be that California had the highest standards. They are still pretty good, but the whole focus on children and education has changed. With the entrance into the field of for-profit child care centers that are pretty much cookie-cutter, I think they provide a level of protection for the children, but they are not very rich environmentally. Staff-child ratios are not what I would consider a quality child care program. That's a financial decision and a lot of the decisions about child care need to be driven by financial costs because parents can only afford a certain amount (Linda Lewis).

There needs to be licensing standards. Self regulation does not work, especially when centers are operating for profit. If some cut corners, others will too. At the same time, there needs to be more licensing staff trained in child development and equipped with skills to help program administrators meet the requirements. There needs to be better training for child care providers so they are committed to and understand the needs for children in care. This training could be better controlled. The personal relationships between provider and licensor are more effective in promoting quality than rules and regulations alone (Kathy Lester).

## Fast Food Worker



## Child Care Worker



### Entry Level Salary

Fast Food Worker: \$5.15/hr.

Child Care Worker: \$5.15/hr.

## Fast Food Worker

No experience necessary

Take customer orders

Make fries

Refill condiments

Clean tables and kitchen area

Sweep and mop floors

Empty trash containers

## Child Care Worker

Design safe nurturing environment that promotes learning

Communicate with child's parents

Stimulate child's brain development

Promote child's language development

Develop child's pre-math skills

Promote child's self-esteem and empathy for others

Lay foundation for child's future academic achievement

## What is the role of advocacy?

What we have really learned from the past is that if we want to do something we can. The issue is will. That has to come from people saying that this is their will and it has to get done. How we get there, I don't really know, but I do know that we have done it before (Dr. Alice Walker Duff).

In all of my years of experience, I have never found the commitment to children, in terms of advocacy, stronger in child care than in any other field (Pat Dorman).

- **“Collaboration is necessary to make the quantum leap for universal access to affordable, quality child care”** (Docia Zavitkovsky & Vivian Weinstein). “In essence, the diversity of interests has hindered the formulation of a coherent public child care policy” (Young & Nelson, p. 5, 1973). While the field remains divided on child care issues, it is unlikely that the Legislature will be influenced to make additional strides in this direction. We have learned that local efforts can provide leadership for improving the child care and development delivery system. Although their efforts are somewhat limited by competition for limited resources which accentuates factions within the field, collaboration is more critical than ever. In addition, advocates need to include parents and business leaders as well as professionals who work in the field. Without these participants, it can appear that professionals are advocating on their own behalf.

The advocacy movement has been good at keeping government-subsidized child care from being cut. There has been good year by year stability for contracts. The deregulation of family child care has been sidetracked. Yet, there has been no concerted, successful effort to increase salaries and quality. Money is spent on lobbying, called a “voice

for children,” but sometimes this is a disguised name for preservation of a particular subsidized contract (Dr. Jack Hailey).

- **Increase efforts to educate about the value of child care and development experiences.**

Many parents need information about quality care and the impact of such care. “There is evidence of inadequate consumer knowledge, which creates market imperfections and reduces incentives for some centers to provide good quality care.” [91]

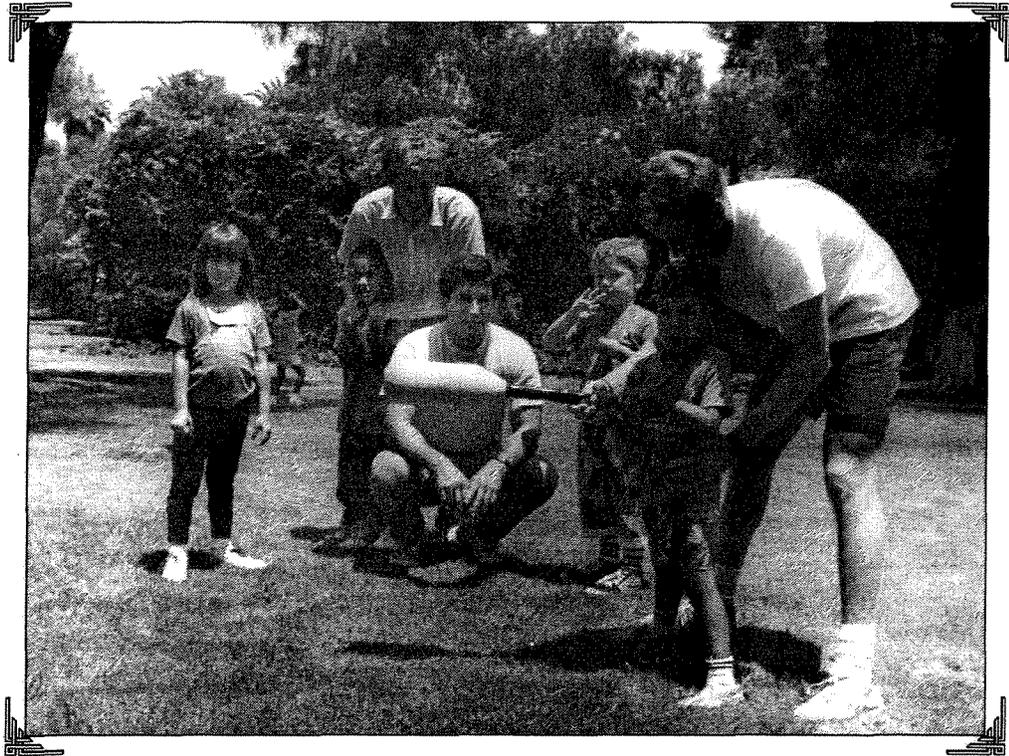
If a provider is able to demonstrate that a child in their care has acquired a concrete skill to show value for the dollars spent – can play the piano or twirl a baton – then that is considered better than a subsidized program without a swimming pool or other types of equipment... People don't understand what early childhood education is all about. We need to do a lot more educating about what it is about (Vivian Weinstein).

Parents do want the best for their children, but they are enticed by the surroundings rather than what the provider does and how the children are cared for. We have to get the word out. The Child Care Employee Project has been fairly effective in getting this word out (June Solnit Sale).

Now child care is viewed as a necessity, a service that people have to have (like a car to get to and from work). And naturally, people want their kids to have a safe place free from abuse, the basics. But, I don't think the majority of parents think of child care as something that it is a major influence on children's lives such that it should be receiving at least as much resources as the elementary schools (Betsy Hiteshew).

Parents need information about what constitutes a quality program (Brenda Yonemura).

- **Push for quality standards.** Cultural diversity is both an asset and a challenge to



A male teacher program at the Long Beach Day Nursery helped spearhead a growing interest in early childhood education among the male gender. Source: Long Beach Day Nursery

the child care and development field and needs to be addressed as an essential element of quality child care.

There are over 100 languages spoken in Los Angeles County. In 1996, NAEYC came out with a position paper stating the importance of matching adults to the languages of the children. This is a very desirable goal, but very difficult to achieve. It is hard enough to find qualified people in this low paying, high turn-over field, let alone to find qualified people with the number of different languages needed. We should teach people how to show caring and devise creative ways of communicating with children and their parents. Yet, things can go awry— a friend's daughter had some facility with Spanish. Her assistant was fluent in Spanish. The children in the kindergarten classroom they were assigned to were predominantly Armenian-speaking (Anabelle Godwin).

We have a tremendously diverse program. African-American, Caucasian, Asian, Indian, Native American... it is beautiful because they are all gathered to learn how to live and work together. Our program helps facilitate the education of the beliefs, values and customs of other cultures. We go to the families and ask them what they do around this time of the year and then we incorporate those ideas and the children learn from those activities... I think sensitivity and cultural awareness training could occur at a reasonable cost and could raise the level of quality of interactions with the children (Brenda Yonemura).

We have not resolved these issues of diversity as a whole. To solve them, it will take the willingness, first of all, to admit that [these racial and ethnic] issues exist. We have been reluctant to admit that the largest single federal program that exists is almost as segregated as child care is from school districts. They have their own funding streams, training and so the cross-fertilization between Head Start and child care becomes very difficult. Then you add on top of that racial and

class issues and it becomes increasingly difficult (Betsy Hiteshew).

No one in Los Angeles County has looked at what role diversity plays in child care. In our study, we found that most children in child care centers speak languages other than English. There is a direct link between one's culture and one's sense of self. In early child care programs, it behooves us to discuss issues of diversity and about how to get along. If we don't, we have missed a critical opportunity (Yolie Flores-Aguilar).

- **Push for adequate resources.** As a nation, we say that we value children and families, but will our future policies match this rhetoric?

Women in general are underpaid. This is particularly true of child care workers. There is a collision happening between increasing the supply of quality care and keeping it affordable. This is forcing other women into low paying jobs... There would have to be an enormous public ground swell demanding top quality early childhood education, but I don't see that happening. It is not at the top of the political agenda. When you talk to working families, the first thing that they are concerned with are their income, their benefits and their health. Only people with a small child will list child care as the third priority. If they have a school aged child, then schools are their third concern. If they have a college age then college is a concern. There's not enough ground swell to flip the agenda. It is terribly frustrating. There's just the most profound ignorance generally in the population as to what happens in early childhood and how important those early years are (Sue Brock).

Some feel that the public does not realize the cost and quality issues associated with child care.

To raise the quality of care, we need to pay teachers more. Without government subsidies, we (providers) have to charge parents more to cover costs. The public needs to be brought along with the realization that prov-

parents alone cannot cover the full cost of child care (Mary Soth).

Although lack of parental knowledge is a significant barrier to quality, the lack of available, accessible, affordable, quality child care compounds the problem.

Parents won't complain about a child care program if they are in desperate need of that service (Kathy Lester).

When I first began, many parents were desperate. They could only work if they got child care and many were using unlicensed, horrible child care. The women I observed said they had twice as many children as they should. If the inspector came, they put half of them upstairs. You can caution everyone against the violations of licensing, but these were women who had to work. I think it has changed with more adequate licensing and more general awareness that there are standards to be followed. If you want to stop by anytime and if the provider says you can't then that is a big warning. We need to continue to caution everyone against the dangers of licensing violations (Betty Brady).

There is a contradiction when parents, who pay for child care, go to look for it. The issue is whether or not they can afford it rather than the skill and training of the staff. It's not that they couldn't think about it, but if have to pay for quality care, they put their blinders on. As parents this is not the best choice, but sometimes they pay one-fifth of their income and this is a really tough decision (Vivian Weinstein).

- **Push for treating workers as professionals.**

Teacher preparation and competitive salaries are vital components to quality care.

We have to raise the level of professionalism in the field. The salaries that are being paid in this field are atrocious. They are barely above minimum wage and unfortunately the

program can't afford to pay them. To raise the level of professionalism we need more child development education. The voices that are speaking need to be heard. It is out there that people are growling at Washington and screaming this information. The government needs to listen. People are not just sharing information and coming up with problems, they are also coming up with answers (Brenda Yonemura).

I think it is O.K. to require child care and development units for everyone in child care including family child care, State child care teachers... I think it is absolutely appropriate to require ongoing education in the same way doctors are required to go back to school. People say we are underpaid and that we are a profession — so we should adopt the common practice of other professions to require ongoing professional development. That means college coursework and continuing education. Part of our job is to nurture children's cognitive and language development; to do that, we must know about that development (Dr. Jack Hailey).

It is important to provide access and a strong core of child development. I believe that what has kept the field from advancing is that we do not require as much academics as elementary school teachers. It is still very much a critical issue that we are facing today. As long as pay is tied to the amount of education that you have, it is going to be a disadvantage to early child care providers. (Betsy Hiteshew).

- **Push for better early childhood provider education.** The level of education and experience is integrally connected with professional status and pay scale.

Getting this training is beyond many providers without a B.A. degree. They can't stop working and can't afford to go to school. Some probably don't want to go to school. Additional educational requirements represents a threat to the livelihood of many of the

child care providers (Betty Brady).

The first thing that comes up when discussing raising the quality of care is the desire to raise the requirements for teachers. I scratch my head and say 'Hey, wait a minute, many aides and teachers are paid seven dollars an hour.' You can't raise the requirements unless you compensate with better pay. If you look at what child care professionals get paid compared with any other profession, child care consistently is minimal salary, most of the time without benefits (Brenda Yonemura).

Because it is difficult to mandate training when training is not readily available and wages are low, the State should subsidize salaries and/or provide training.

- **Although perceptions of child care providers have improved, they are still not highly valued outside the child care and development field.**

Child care providers today are not viewed much better by the general public and need the skills required to do a quality job for children (Vivian Weinstein).

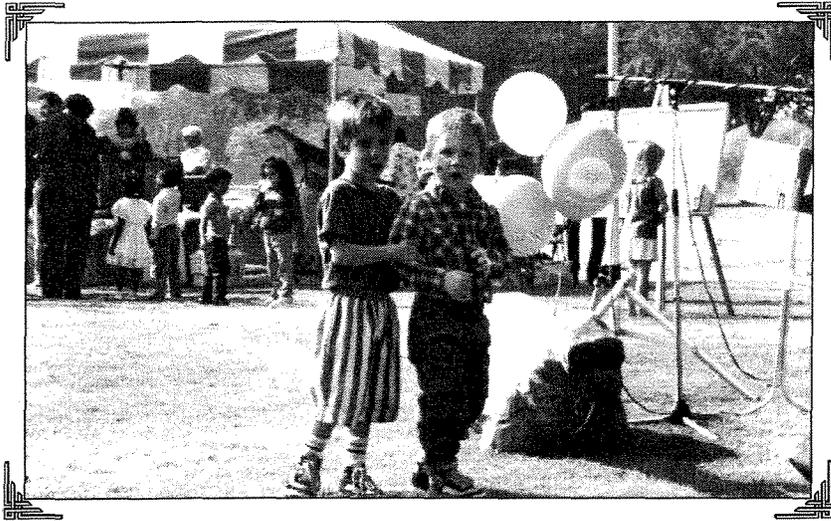
We are not treated with a lot of respect (June Solnit Sale).

It is still viewed a little like baby-sitting (Betsy Hiteshew).

People in the child care field value and respect one another, but for the most part, the public does not recognize and value the contribution child care providers make (Docia Zavitkovsky).

We have come a long way and we need to respect workers at all levels. Many years ago, anybody who was warm and loving and had children of her own was considered qualified to take care of a child or be on a policy board. I do not think that is enough. I certainly support the CDF advocacy and making people aware of the need for child care (Betty Brady).

The origins of the field were interdisciplinary. There was a sense that educators, psychologists, mental health, health professionals were all developing this new field. At some point that interdisciplinary quality got left behind. There's a schizophrenic attitude on the part of many professions about child care. More and more people are realizing how important it is, but there isn't a whole heck of a lot of respect for it. Because society as the whole doesn't respect it...there is not enough cross fertilization. We tend to congregate with other early childhood professions, but even within the field there are subsets. One of the subsets is teacher education, infant care. Head Start is very segregated - partly because of self-segregation and partly racial issues related to its diversity (Betsy Hiteshew).



# Addenda

## **Addendum A: Role of the Community in Los Angeles' Historical Child Care Centers**

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### **Long Beach Day Nursery**

There is a strong partnership between the Long Beach Day Nursery and the community. Historically, this relationship was extremely valued and that foundation currently supports both child care and the community.

Community professional partnerships are probably innate in the founding board members. Florence Bixby was the first president and Avis Bixby was the vice president. We still have a strong involvement with the Bixby family. The Bixby family reputation in this community is one of high generosity, loyal and an integral part of the community. That sets the tone. The board always operated with the basic question, "Well, what is best for the nursery?" Personal agendas are set aside, we haven't had the kind of discord that sometimes plague non-profits. The people who come onto this board are chosen carefully and ready to embrace the whole way in which the nursery has set itself out in the community. Because we are conducting a capital campaign to build an addition on our East branch, the granddaughter of Avis Bixby is our campaign capital chair. Her sister Barbara and Avis are both honorary chairs of the fiesta at the Rancho Los Cerritos in

September to raise money for the construction project. There are wonderful ties with the founding board and the Bixby family in establishing the nursery. That doesn't account for all of the other people who were involved. There are a couple of other community groups that have helped us survive over the years. The Rotary Club was instrumental in getting our first permanent building built. It is in their charter that the Long Beach Day Nursery is their service project. The Nursery was established in 1912 and the Rotary club in 1917, and as their service project they helped purchase the property and have a committee named the Long Beach Day Nursery Committee. Every year, they continue to support the Nursery through a toy replacement program to purchase new toys and they are ready to contribute to the building fund or whatever current project we are working on. It has been a consistent funding source, but it is a shrinking percent of the donation dollar. The first president of the Rotary, Joe Montell, celebrated his birthday by having a party for the children and that is a tradition that also continues. We call him our sponsor of our holiday parties. The Kiwanas have also supported us in special building projects, but their long-standing contribution is the annual donation that covers the cost of a male teacher during the summer months. This started in the 1960's, and when it was recognized that many children from mostly single mother homes lacked a male role model in their lives and so we have since that time been a leader in recruiting male teachers. Sometimes we hire them as aides in the summer if we can find a qualified teacher and sometimes we employ them as a regular staff member. We are always very much aware of having a male teacher as part of balancing the staff. In the summer there is one at each branch for at least the nine-week session. Kiwanas funds only one, but we do have another benefactor so that we are able to hire an aide or teacher. If we need a teacher anyway then they become part of the staff. We just recently had a young man who stayed with us over two years who is leaving to go back to school.

## **Addendum B: Pasadena Day Nursery**

This nursery opened on December 18, 1910, through private donations and cared for two children. By January, there were six children. The Pasadena Day Nursery was incorporated as a non-profit day nursery in April 1911, and cared for approximately 14 children per day. The program broadened in World War II. From 1946 to about 1963, it was a public agency supported by the Board of Education which paid two-thirds of the child care costs while parents paid the other third. The nursery closed as a State nursery in 1963, because the Board felt they could do more with its funds as a private center. In 1965, United Way funded the Pasadena Day Nursery. However, according to Brenda Yonemura, funding sources have changed.

In the past, we received substantial amounts from United Way, but that has diminished probably by about 50 percent during the last three years. We also were supported by the Pasadena Day Nursery Guild, an organization that has been with us since the conception of Pasadena Day Nursery. That organization raised about 25 percent of our annual budget. One of the Guild's goals was to serve children of exceptional needs. Because what they were bringing in was not a substantial enough of a donation to cover costs of services, tuition to serve those children only covered about 50 percent of the costs. So, what they were able to provide and the goals that they had became very different. In the last year, the Guild formed a separate entity called the Pasadena Children's Guild, which will provide support for an array of centers rather than being attached to just Pasadena Day Nursery. We have to have this fundraising and donations because parents in our community

cannot afford to pay what it actually costs to run the program -- about \$1,000 per month per child. For those families, we provide tuition assistance through United Way or private donations. United Way has recently been withdrawing funds and this is a trend happening elsewhere.

The goals of the nursery evolved over the years:

Its goal was to reach out into communities to support families, the main support being child care. There was also a period in our history where we cared for children with exceptional needs, but there has been some shift in that in the last four-to-five years in the development of State-funded programs to serve exceptional needs. We are more involved on a day to day level with parents in trying to raise the quality of the care. I consider it high quality, but you can always improve even more. We are a support system for parents and are also trying to get them involved through a PTA to develop funds, facility improvement, and marketing. I would love to get strong in that area and then have the parents be able to reach beyond the walls of the Nursery. Even though we are supportive of the relationship between child care and the community, our program is in jeopardy because of the reduction in funds (Brenda Yonemura).

## **Addendum C: Summary of the Wilson Riles Commission Recommendations**

These recommendations are included in this report because they helped foster subsequent legislation and are relevant to the current child care and development delivery system. They are based on the premise that all families should have access to child care and development services that meet their needs.

### **The Five Year Plan:**

- Phase in new and expand existing child care and development services;
- Expand infant and toddler programs, before and after-school care, RQR services, services to isolated geographic areas, programs and services to migrants;
- Facilitate funding for disabled children;
- Maintain and expand programs for State Preschool, general child development, campus centers, alternative child care, school age parenting and infant development, children with exceptional needs and part-day needs;
- Provide programs for sick children (offering nonstandard hours);
- Develop emergency and respite care;
- Programs should reflect multicultural and diverse linguistic backgrounds, and
- Develop appropriate youth services for ages 14-18.

### **Quality Child Care And Development:**

All children and their families should have access to quality child care and development services.

They identified seven major components:

1. Safe physical environment that is age appropriate;
2. Age appropriate program activities;
3. Involvement and contribution of families,

communities and providers;

4. Support services: RQR, provider training, health services, transportation, nutrition and social services;
5. Efficient and effective program administration;
6. Funding that is timely to carry out all components, and
7. Appropriate preparation of people providing care.

**Licensed facilities:** licensing should have parent and provider input, address the seven components of quality and include age appropriate standards for staffing, staff qualifications and activities.

**Funding:** to expand direct service programs, vendor-voucher programs, and the income-disregard system provided that they allow for quality programs, diversity of child care needs, parental choice, socioeconomic mix of children and accountability for cost and quality. To promote easy access to funding information; expand capital outlay funds and reimbursements for special needs; develop methods to reduce parent fees; fund campus child development programs; increase funding for salaries and benefits; prevent cash flow problems; no further buy-out of federal funds.<sup>[92]</sup>

### **Statewide Delivery System:**

- The Office of Child Development should be a major organizational unit and administer all child care and development programs funded by the State Department of Education;
- An external review committee should be formed to assess the coordination and future administrative structure, and
- RQR services should provide information to help parents choose appropriate care, offer support services and technical assistance to providers of care, and assist in the coordination of community resources.

## **Addendum D: Local Child Care Policies**

Los Angeles County, as well as many of the incorporated cities within its boundaries, have adopted comprehensive child care policies to address the ongoing and diverse issues related to this industry.

For more information on individual policies, contact the following agencies:

Kathleen Malaske-Samu  
Child Care Coordinator  
Los Angeles County  
c/o Child Care Advisory Board  
500 W. Temple Street, Room 588  
Los Angeles, CA 90012  
(213) 974-2440  
Policy adopted on March 20, 1990

Terry Ogawa  
Child Care Coordinator  
City of Los Angeles  
200 East Temple Street, Room 510  
Los Angeles, CA 90012  
(213) 485-9738  
Policy adopted on February 24, 1987

Julie Taren  
Child Care Coordinator  
Human Services Division  
1685 Main Street, Room 212  
Santa Monica, CA 90401  
(310) 458-8701  
Policy adopted on June 18, 1991

Child Care Coordinator  
City of Pasadena  
234 East Colorado Blvd., #205  
Pasadena, CA 91101  
(626) 683-6939  
Policy adopted on January 17, 1989

Daphne Dennis  
Child Care Coordinator  
City of West Hollywood  
8300 Santa Monica Blvd.  
West Hollywood, CA 90069  
(213) 848-6478  
Policy adopted on January 4, 1988

# Notes

1. Three representatives at the State level were interviewed (Sue Brock, Pat Dorman and Jack Hailey); the majority of interviewees had experience with policies at the State as well as local level. See the section, "Profiles of the Contributors," at the beginning of this report for more information.
2. Based on personal communication with June Solnit Sale, Vivian Weinstein and Kathy Malaske-Samu, 1996.
3. Interview with Brenda Yonemura, 1996 [Historical Highlights, Pasadena Day Nursery](#).
4. For more information, see the [Long Beach Story](#) by Barbara Newton, June 1985.
5. Widow pensions was one proposed policy to help alleviate the need for widows to work (Steinfels, 1973).
6. Founded in 1898.
7. Elizabeth DeCola, June Solnit Sale, Vivian Weinstein and Docia Zavitkovsky started their careers in cooperative child care programs.
8. Information provided by Docia Zavitkovsky.
9. The California Child Care Directors and Supervisors Association assisted in the development of this publication.
10. Bulletin of the California State Department of Education, California Program for the Care of Children of Working Parents, Vol. XII, No. 6, August, 1943.
11. Legislation quoted in the Bulletin of the California State Department of Education, California Program for the Care of Children of Working Parents, Vol. XII, No. 6, August, 1943.
12. [The California Campus of Pacific Oaks College and Children's School—A History](#). February, 1983.
13. Ibid.
14. Although the newspaper reported his title as supervisor of child welfare centers, he was actually the Supervisor of California Child Care Centers.
15. Bothman, A. [Reflections of the Pioneers on the Early History of Santa Monica's Children's Centers](#). Unpublished Masters Thesis, California State University, Northridge, 1976.
16. According to interviews with June Solnit Sale, Vivian Weinstein and Docia Zavitkovsky (1996), child care was always needed, but federal support for such services did not begin until the need was perceived as a crisis.
17. Based on interviews with Anabelle Godwin, June Solnit Sale, Vivian Weinstein and Docia Zavitkovsky, 1996.
18. In the 1960's, monthly employment data was being collected (Laosa, 1984).
19. Quote provided by Docia Zavitkovsky.
20. Head Start, A Child Development Program, U.S. Department of Health and Human Services, Office of Human Development Services Administrations for Children, Youth and Families Head Start Bureau (1990).
21. Chapter 1248, 1965.
22. Personal communication, 1996.
23. Head Start, A Child Development Program, U.S. Department of Health and Human Services, Office of Human Development Services Administrations for Children, Youth and Families Head Start Bureau (1990).
24. Based on personal communication with Kathy Malaske-Samu, 1996. She was involved with child care at the national level during this time.
25. Based on personal communication with June Solnit Sale, 1996.
26. Based on interviews with June Solnit Sale and Marge Wyatt, 1996.
27. [The California Campus of Pacific Oaks College and Children's School—A History](#). February, 1983.
28. This committee was established in 1965 by Assemblyman Jesse Unruh (AB 1331).
29. What we learned from Head Start in 1965. Department of Elementary, Kindergarten and Nursery Education. National Education Association (NEA). NEA invited six educators who worked with Head Start in various parts of the country to write briefly on what they learned. Docia Zavitkovsky was the representative from Santa Monica, California.
30. Ibid.
31. Ibid.
32. AB 282, Chapter 1177.
33. Los Angeles County was an exception because it had a separate funding stream for its own County health department (interview with Kathy Lester, 1996).
34. Kathy Lester was the supervisor, manager for the State Department of Social Services Licensing Division in Los Angeles County for 26 years beginning in 1974.
35. This is based on a personal interview with Elizabeth

DeCola and Hubner's 1980 report.

36. Personal conversation with June Solnit Sale, 1996.

37. Crystal Stairs derived its name from Mother to Son, by Langston Hughes: "Well son, I'll tell you: Life for me ain't been no crystal stair. It's had tacks in it, and splinters, and boards torn up, and places with no carpet on the floor-bare. But all the time I'se been a climbin' on, and reachin, landin's and turnin' corners, and sometimes goin' in the dark where there ain't been no light. So boy, don't you turn back. Don't you set down on the steps 'cause you finds it's kinder hard. Don't you fall now—for I'se still goin' honey, I'se still climbin' and life for me ain't been no crystal stair."

38. In addition, it was initially thought that AP programs would be a more cost-effective way to deliver subsidized child care; however this may no longer be the case.

39. This is a more recent issue. It was not a concern for the Seiryty Bill or with the funding appropriated to AP, in the Latchkey legislation.

40. Tom Puckett, consultant, CDE, CDD.

41. History of the Children's Lobby (1986).

42. Ibid.

43. Alphabet Soup, Children's Glossary of Terms, the Governor's Advisory Committee.

44. The Wilson Riles Commission specifically recommended that there be no more State buy-out of Title XX funds.

45. Based on interview with Jack Hailey, 1996.

46. Sue Brock, Vivian Weinstein and Docia Zavitkovsky were other members of the Wilson Riles Commission and were also interviewed for this report.

47. Child Care and Development Services: Report of the Commission to Formulate a State Plan for Child Care and Development Services in California, 1978.

48. Executive Director, GAC at this time.

49. (Jack Hailey, 1996).

50. In 1985, the School-age Latchkey Community Child Care Program allocated \$16 million annually for the development of before and after school care for children in grades K-9 (SB 1139, Chapter 676).

51. The Federal Child Care and Development Block Grant was passed in 1990 (Omnibus Budget Reconciliation Act of 1990, P.L. 101-508). California received \$76 million the first year (On the Capitol Doorstep, 1995).

52. Solnit Sale, June & Torres, Yolanda, I'm Not Just a

Babysitter: A Descriptive Report of the Community Family Day Care Project, prepared for the Children's Bureau Office of Child Development, U.S. Health Education and Welfare, 1971.

Solnit Sale, June; Torres, Yolanda; Davis, Maxine; Staples, Lee; Nicholie, James & Pepys, Mary, Final Report: Community Family Day Care Project, prepared for the Children's Bureau Office of Child Development, U.S. Health Education and Welfare, 1973.

53. See Emlen, Arthur & Watson, Eunice, Matchmaking in Neighborhood Day Care: A Descriptive Study of the Day Care Neighbor Service, Portland Oregon: Tri-County Community Council, 1970.

54. Based on interview with Vivian Weinstein, 1996.

55. Information provided by Joan Wagner, director, Kathy Kredel Nursery School.

56. Based on personal interview with Dr. Sandy Burud.

57. The Women's Law Center is a non-profit organization that assists family day care homes through foundations, private donors and the State Bar IOATA fund. They also find pro bono attorneys through their newsletter, outreach efforts, presentations and trainings.

58. Information included in this section was provided by Kathy Malaske-Samu.

59. Ibid.

60. This was quoted from a transcript of Docia Zavitkovsky's presentation, "Grounding Policy in Children's Needs: A Practitioner's Perspective" at the Symposium: Public Policy for Children and Families: Who Shall Decide?, San Francisco, 1977.

61. Tom Puckett, consultant, CDE, CDD.

62. Title XX of 1975, was the federal legislation that expanded eligibility of child care services to include low income families not receiving AFDC. States had the discretion to spend these funds for a variety of social services. In 1976, when California received an additional \$24 million, they did not spend any of it on child care (On the Capitol Doorstep, 1995).

63. AB 99, Chapter 670

64. NAEYC, May 31, 1996.

65. NAFCC, 1996.

66. Based on several interviews including: Kathy Lester, June Solnit Sale, Vivian Weinstein, Docia Zavitkovsky, and Jack Hailey.

67. Based on interview with Kathy Lester.

68. Ibid.
69. Omnibus Budget Reconciliation Act of 1990, P.L. 101-508.
70. Fact Sheet on the Child Care Planning Committee of the Los Angeles County Child Care Advisory Board, 1993.
71. Los Angeles County Equity and Resource Allocation, 1994.
72. Presentation by Richard Ferlauto, Co-director, Center for Policy Alternatives to CDPAC September 19, 1996.
73. Ibid.
74. Tom Puckett, Consultant, CDE, CDD.
75. Ibid.
76. Presentation by Richard Ferlauto, Co-director, Center for Policy Alternatives, to CDPAC, September 19, 1996.
77. Ibid.
78. Ibid.
79. Ibid.
80. Quoted from a transcript of Docia Zavitkovsky's presentation, "Grounding Policy in Children's Needs: A Practitioner's Perspective," at the Symposium: Public Policy for Children and Families: Who Shall Decide?, San Francisco, 1977.
81. Based on comparisons from the 1986 and 1996 market rates compiled by the California Child Care Resource and Referral Network.
82. City Involvement in Child Care Services, 1995.
83. Ibid.
84. Profile of the Child Care Center Work Force in Los Angeles County, 1996.
85. Quoted from a transcript of Docia Zavitkovsky's presentation, "Grounding Policy in Children's Needs: A Practitioner's Perspective," at the Symposium: Public Policy for Children and Families: Who Shall Decide?, San Francisco, 1977.
86. The Future of Children, Long Term Outcomes of Early Childhood Programs, Winter 1995. Vol. 5, No. 3.
87. The Future of Children, Long Term Outcomes of Early Childhood Programs, Winter 1995. Vol. 5, No. 3. p.21.
88. Early Childhood Programs and the Public Schools: Between Promise and Practice - A study funded by the Ford Foundation and the Carnegie Corporation of New York to Bank Street College and the Wellesley College Center for Research on Women.
89. Smith, Fairchild, Groginsky. Early Childhood Care and Education: An Investment That Works. National Conference of State Legislators, 1995 p.2. In The Future of Children, Long Term Outcomes of Early Childhood Programs, Winter 1995. Vol. 5, No. 3.
90. For example, in 1984, child care licensing was separated out from other community care licensing (SB 1754, Chapter 676). In addition, a conference to bring all levels together: education, welfare, State and County licensing, providers. A report came out of the conference, but more importantly, it opened talks (based on interview with Kathy Lester, 1996).
91. Howes, Carolee et. al. Cost, Quality and Child Outcomes in Child Care Centers. University of Colorado, Denver, January 1995. p.9.
92. The initial State buy-out of federal, Title XX funds in 1976, allowed the State to regulate some of its child care programs under Title 5 regulations, which were more lenient than FIDCR (On the Capitol Doorstep, 1995).

# Glossary

**Aid to Families with Dependent Children (AFDC)** - was a federally mandated program that guaranteed cash assistance to families with needy children and operated from 1935 to 1996. The federal government required states to provide assistance to all eligible families, while states defined income eligibility and set benefit levels.

**Adolescent Family Life Programs (AFLP)** - provide counseling, support and case management services to pregnant and parenting teens. These agencies also provide case management services for pregnant and parenting teens who are receiving welfare benefits and are participating in the Cal-Learn program.

**AFDC-Linked Child Care** - includes seven federally-funded child care programs designed to serve families who are or have recently received AFDC.

**Child Care and Development Block Grant (CCDBG)** - was enacted by Congress in 1990 for the purpose of improving the quality, affordability and accessibility of child care for low income families. With the adoption of the Personal Responsibility and Work Opportunity Act in 1996, funding for the CCDBG was folded into the Child Care Development Fund.

**Child Care Development Fund (CCDF)** - was created with the adoption of the Personal Responsibility and Work Opportunity Act in August 1996. This federal law consolidates all federal child care funds into a single Child Care Development Fund.

**Child Care Licensing** - is required by the California Health and Safety Code when non-medical supervision is provided for children for less than 24 hours per day. The California Department of Social Services, Community Care Licensing Division, is responsible for licensing both family child care homes and child care centers.

**Department of Children and Family Services (DCFS)** - establishes, manages and advocates a system of services, in partnership with parents, relatives, foster parents, and community organizations which ensures that children are safe from abuse, neglect and exploitation; provides services to children and families.

**Department of Public Social Services (DPSS)** - provides public assistance and social services programs mandated by the County, State and federal governments, including AFDC, GAIN, Cal-Learn and many others.

**License Exempt Child Care** - is provided by a person who is legally exempt from State licensing requirements, including a child's relative, guardian, an adult who cares for the children of only one other family in addition to his or her own children, religious organizations, or schools registered with the California Department of Education.

**Local Child Care Planning Councils** - were created in each county with the adoption of AB2141 in 1991. Planning councils were charged to define local priorities for funding for the Federal Child Care and Development Block Grant to assess child care needs and resources. Funding was first made available to Local Child Care Planning Councils during the 1994-95 program years. The California Department of Education has continued to fund these efforts. AB 1542, adopted in August 1997, expanded the role of the councils.

**Los Angeles County Child Care Advisory Board** - includes 19 members, appointed by the Board of Supervisors. This Advisory Board is charged with planning, promoting and facilitating the expansion of quality child care services which are affordable and accessible to families who work and/or live in Los Angeles County.

**Regional Market Rates** - are determined by the results of an annual survey compiled by the California Child Care Resource and Referral Network. The survey information is the basis for child care rate ceilings used by GAIN, non-GAIN Education and Training and California Department of Education child care and development programs. Survey results are reported by county.

**Regional Occupational Program (ROP)** - was established in 1974 by the Los Angeles County Board of Education and the County Office of Education. The ROP works to determine and meet the career objectives of students and the labor market needs in Los Angeles County. The organization plans, develops and maintains work preparation training programs.

**Resource and Referral Programs (R&R)** - are funded by the California Department of Education to provide information to parents about the full range of child care options, assist potential and operating child care providers with licensing issues, provide training and coordinate community resources.

**Temporary Assistance to Needy Families (TANF)** - was signed into law on August 22, 1996. Also referred to as the Personal Responsibility and Work Opportunity Act, this law revamps several major public assistance programs, including the child care programs linked to the former Aid to Families.

**Trustline** - is a process by which the background of exempt child care providers is checked for disqualifying criminal convictions and child abuse records using the resources of the California Department of Justice (DOJ). The Trustline registry is required for all licensed-exempt child care providers (except aunts, uncles and grandparents) paid by Alternative Payment Program contractors with State general funds or Federal Block Grant funds. Child care payment may not be made to an exempt provider until the provider has applied for Trustline registration.

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