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Mother's Work and Child Care

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*Julia B. Isaacs**

This chapter discusses the availability of data to address policymakers' questions about child care for low-income families. Specifically, I will attempt to answer the question, How can existing surveys, studies, and other data be used to measure the availability and quality of child care for low-income families? I will discuss several sources of data, briefly describing what each source tells us and outlining its strengths and weaknesses. Included in this review are national population-based survey data; federal and state administrative data; state survey data, specifically from studies of families leaving welfare "leaver studies;" and, very briefly, special child care studies.

National Surveys

This chapter emphasizes the national survey data because they are the data with which I am most familiar. It is common for child care policymakers to complain about the lack of good data on child care. As bad as the situation may be, it was worse before the arrival of the Survey of Income and Program Participation (SIPP), which has added considerably to our knowledge of child care. Much of what we know about child care utilization patterns and costs come from SIPP data. The SIPP will continue to be an important source of information on child care in the future, along with the related Survey of Program Dynamics, which follows a subset of SIPP families for a longer period to study welfare reform longitudinally and which includes questions about child care arrangements.

Another important national population-based survey for the study of child care is the Current Population Survey (CPS). The CPS does not actually provide any direct information about child care arrangements. It does, however, provide considerable information on the labor-force participation and income of parents. Those data are important for answering questions about the number of children with working parents and the income of those parents, providing some indication of the potential need for child care and for child care subsidies.

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A third useful national survey, the National Household Education Survey (NHES), may not be as well-known among welfare reform researchers. Conducted annually by the Department of Education, the NHES includes an Early Childhood Program Participation component in certain years. For example, the 1995 NHES provides useful information about child care arrangements for children in third grade or below, including details about the language of the provider, care for sick children, and the distance between the care and the home and job—data not found in the other national surveys. Moreover, the 1995 NHES covers all child care, not just the arrangements of working mothers. (The 1993 SIPP child care information is limited to child care for employed mothers; more recent versions of the SIPP ask questions about child care for all children). One drawback of NHES for studying child care for low-income children is that NHES does not collect detailed income information. The survey does, however, try to collect enough income information to determine who is above or below the poverty line.

Other national surveys with relevance for child care policymakers include the National Survey of American Families (NSAF) and the child development supplement to the Panel Study of Income Dynamics. Both studies collected data on child care arrangements in 1997 and the NSAF also collected data on arrangements in 1999. Finally, I should at least mention the 1990 National Child Care Survey and the related Profile of Child Care Settings as good household and provider surveys, respectively, although the data from those surveys are now quite dated.

To answer the question of what the national survey data tell us, I will briefly highlight three sets of findings: the financial burden of child care costs, particularly for low-income families; the importance of both informal and formal child care arrangements; and the magnitude of the need for child care and child care subsidies.

In terms of child care costs, it turns out that child care expenses often are the second- or third-largest item in the budget of a low-income working family. In 1993, for example, child care expenses averaged 18 percent of family income, or \$215 per month, for poor working families paying for the care of one or more preschool children. For families with income of less than \$14,400 (\$1,200 per month), the average share of income devoted to child care was even higher: 25 percent, or one-fourth of family income, according to SIPP data.

One way in which poor families save on child care costs is by using more informal arrangements—more relative care, less care in centers—than other families. This pattern is shown in the SIPP data, which tell us, for example, that only 21 percent of child care arrangements for poor preschool children were in centers, compared with 33 percent of such arrangements for preschool children living in families with incomes above the poverty line. Parents and relatives provided 60 percent of child care arrangements for poor preschoolers in 1993, but only 46 percent of arrangements for nonpoor children.

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Finally, a recent report by the U.S. Department of Health and Human Services is a good example of what the national surveys tell us about child care for low-income families.¹ The report used the Urban Institute's TRIM3 microsimulation model and three years of CPS data to estimate the number of children eligible for child care assistance under the Child Care and Development Fund (CCDF). According to the report, 30 million children live in families with either a single parent working or both parents working, at all income levels. Ten million of those children live in families that are below the eligibility limit for child care subsidies, based on current state policies. The estimate of eligible children would be 15 million if the states raised their eligibility limits—the federal maximum eligibility limit is for family income to be below 85 percent of state median income, and a number of states use lower eligibility levels. Thus, between 10 million and 15 million children are eligible for child care subsidies, depending on whether you use the existing state income eligibility limits or the higher federal maximum eligibility limits.

An obvious strength of the national population-based surveys is that they provide nationally representative data. An associated weakness, however, is their inability to provide information that is reliable at the state or local level. We were able to provide state-by-state estimates in the recent HHS report, but only by combining three years of CPS data; even then, some state-level data were based on small sample sizes. Another strength of the national data sets is that they often are quite rich in data, providing information about child care arrangements, family income, participation in welfare, and so forth. Some of the surveys, however, have better data on child care arrangements, and some have better information on who is poor, who is on welfare, and how long they have been on welfare. It is hard to find a survey that collects good data on both domains; only SIPP and NSAF do so. A final frustration with national survey data is that time lags often occur in the processing of the data and its release for analysis. The fact that the SIPP data on costs is from 1993 is a testament to this particular problem.

Federal and State Subsidy Data

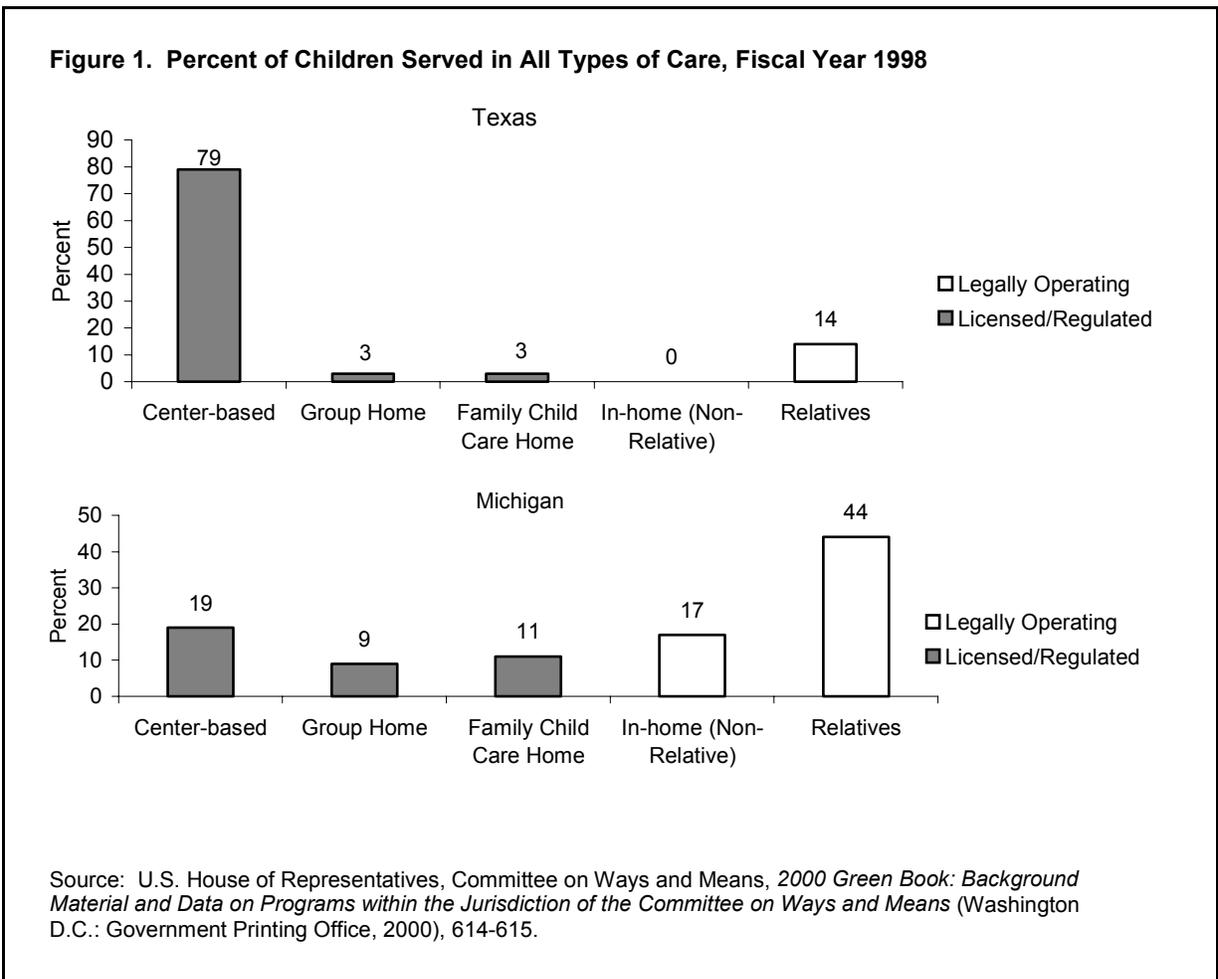
Primary among other sources of data are the data on child care subsidies provided through the CCDF. Under the federal child care legislation, states are required to submit various data to the federal government. Using ACF Form 800, the states report aggregate numbers of children getting subsidies as well as some characteristics of those subsidies, such as the type of provider and age of the child. Using Form 801, the states submit disaggregated, or micro-level, data on children in care, providing more detailed information that includes ages of children, family income level, whether the family receives Temporary Assistance for Needy Families (TANF), and so forth. In addition, each state has its own administrative data system, which often has an even richer set of information than what is sent to Washington, D.C.

¹U.S. Department of Health and Human Services, *Access to Child Care for Low-Income Working Families* (Washington, D.C.: U.S. Department of Health and Human Services, 1999).

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The administrative data are useful for telling us about the children who are receiving federally subsidized child care. The federal subsidy data, for example, tell us that an average of 1.5 million children received subsidies in an average month in 1998. Combining this fact with the estimate of 10 million to 15 million children who are eligible in an average month, it is possible to calculate that at its current funding level, the CCDF program is providing subsidies to 10 to 15 percent of those who are eligible.

Most federal administrative data offer few other findings because the 1998 data submitted by the states were of variable quality. Still, I can share data from a few states to illustrate the type of data that are available. Specifically, figure 1 show the types of arrangements



that are subsidized through CCDF funding in Texas and Michigan, two states with quite different patterns of child care use.

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In Texas, 80 percent of the child care settings that are subsidized are centers, and about 10 percent are relatives (as figure 1 shows). In contrast, in Michigan, fewer than 20 percent of the subsidized arrangements are in centers, and relative care is the setting for 45 percent of the arrangements subsidized through CCDF funds. These are the two extremes among the five states for which data were available at the time of my analysis. Patterns in Florida look similar to those in Texas. In Utah and Delaware, the other two states for which data were available, about 50 percent of the subsidized arrangements were in centers, 30 percent were in family day care homes, and 10 percent were with relatives.

Note that the graph distinguishes between settings that are licensed/regulated and those settings that are legally operating. Although most centers are licensed/regulated and most relative care is not, some states do provide subsidies to license-exempt centers, such as centers in churches and schools in certain states.

Administrative data have the advantage of providing information on the entire population of children receiving subsidies, not just a sample. This characteristic allows results to be reported by state or locality, without encountering the sample size problems of survey data. Another strength is that administrative data are collected longitudinally. A weakness of the federal administrative data sets, however, is that they are limited to subsidies funded under the CCDF. They therefore do not capture other forms of subsidized care, including some state programs that are not federally funded. Another limitation of administrative data is that they only provide information about the child care arrangements that are subsidized, telling us nothing about the vast number of unsubsidized child care arrangements. Furthermore, administrative data are not very rich in detail. We know whether children are in a center or in a family day care home, but we do not know anything about the quality of the settings. In addition, administrative data are sometimes incomplete or of uncertain reliability, particularly with regard to data elements that are not critical to the administration of the program. Finally, both the states and the federal government are still working on implementing the new data-reporting requirements enacted as part of the 1996 legislation. As is common with new data systems, the first few years of data may be less complete, less reliable, and reported on a less timely basis than should be the case once the system is up and running.

State Surveys of Families Leaving Welfare

A third data source is the information on child care arrangements for families leaving welfare. The Office of the Assistant Secretary for Planning and Evaluation (ASPE), HHS, awarded \$2.9 million in grants to fourteen states and large counties in September 1998 to study families leaving welfare. Although each state study is slightly different, the families are generally surveyed about six to twelve months after leaving welfare and are asked a variety of questions about their employment status, household income, use of government programs, child care arrangements, experiences of material hardship, and general child and family well-being. In addition, the states track welfare "leavers" through various administrative data sets. About half

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the states link TANF data sets to child care subsidy data sets to see how many TANF leavers use subsidized child care.

Although survey findings are not available as of December 1999, I can report on our recent review of twelve ASPE-funded leaver-study questionnaires to provide a sense of the type of data on child care that will be available in the next year or so. Of the twelve questionnaires in our review, all asked about child care arrangements, including the type of child care provider, if any, used after the family left welfare. Ten of the twelve asked about use of subsidies; five also asked about the respondents' awareness of subsidies. Eight asked about the number of hours in care, six asked about costs of care, six asked about whether lack of child care was a barrier to employment, and five asked about parental satisfaction with or parental perceptions of quality. It is hard to ask a parent about quality, particularly in these surveys, which were generally twenty-to forty-minute phone interviews with relatively little time devoted to child care arrangements.

In a review of some of the earlier state-funded leavers studies Rachel Schumacher and Mark Greenberg of the Center on Law and Social Policy (CLASP) report that roughly 10 to 35 percent of leavers who have earnings are using the subsidies, at least according to the data available to date.² Although many analysts view 10 to 35 percent as a low child care utilization rate for a population of low-income working women, it is higher than the 10 to 15 percent participation rate found in the HHS report. Note, however, that given the finite resources available for child care subsidies, many states give preference for subsidies to families connected with welfare and are more likely to put other working poor families on waiting lists. Thus, the child care subsidy "participation" or "utilization" rates are not like participation measures in entitlement programs such as food stamps; instead, they measure utilization rates that are strongly affected by funding restraints and waiting lists, particularly for working poor families.

A second finding from the CLASP review of state-funded leaver studies is that many leavers are using informal child care, such as friends and relatives. The preliminary findings also suggest that leavers who receive subsidies are more likely to use center child care. Finally, with regard to employment barriers, a number of leavers reported that lack of child care was indeed a barrier to employment, but it was not the most commonly reported barrier.

It will be interesting to follow the findings from the leaver studies as they emerge. The studies address child care issues for a low-income population of strong policy interest, and they are being conducted on a rapid time frame. It is important to recognize their limitations, however. Most surveys of families leaving welfare spend only a few minutes on child care, so they can ask only a few simple questions. Moreover, it is difficult to compare findings across states because of both methodological and policy differences. Finally, some leaver-study surveys

²Rachel Schumaker and Mark Greenberg, *Child Care after Leaving Welfare: Early Evidence from Leavers Studies* (Washington, D.C.: Center for Law and Social Policy, 1999). Schumaker and Greenberg emphasize the preliminary nature of the findings and the methodological issues affecting the studies.

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suffer from a low response rate because of the difficulty of locating families for the follow-up surveys.

Special Child Care Studies

The national and state survey data discussed thus far have been general surveys that include child care questions as only one of many topics. A number of child care studies that focus entirely on child care bear mentioning, particularly the Child Care Bureau's Child Care Research Partnerships, various early child development studies, and the National Study of Low-Income Child Care.

The Child Care Bureau is funding five child care research partnerships, which are multiyear efforts to pull together various partnerships of universities and states to study child care issues. The partnerships are using a variety of data sources. Several are using state administrative data sets, often linked to TANF or wage record administrative data. In Chicago, however, the researchers are collecting data directly from in-person visits to child care providers in local neighborhoods. The research partnerships also are addressing a diverse set of policy-relevant questions. One study is looking at how TANF recipients choose care. Another is looking at subsidy data over time to determine the length of time for which people get subsidies and continuity of care, which is an important element of quality. Another is conducting research on parental measures of quality and examining the correlation between parental perceptions of quality and observations by researchers.

The Child Care Research Partnerships have much to offer to the study of child care among low-income families. They involve multiple projects across multiple states and are using a variety of rich data sets to address a number of policy-relevant research questions. The partnerships already have produced some interesting findings, such as how parental choice is influenced by quality and flexibility and how child care subsidies affect employment rates among welfare recipients. One drawback of the partnerships is that they do not provide a nationally representative examination of child care across the country.

One cannot talk about data on child care without acknowledging the large body of literature that examines how child care affects child development. It is, of course, impossible to summarize this literature in the brief space of this chapter. However, if I had to summarize the most policy-relevant finding in one sentence, it would be: Quality matters. The research shows that higher quality child care settings lead to better child outcomes. Quality can be measured through such measures as provider-child interactions and relationships, group size, child-to-staff ratios, training, and basic health and safety conditions. Moreover, quality varies: One can find child care centers and family day care homes of both good and poor quality. When children are in higher quality settings, as defined by those measures, their outcomes improve, including cognitive outcomes (that is, language, math, and reading skills) and social and emotional outcomes. Some studies have observed positive outcomes up to the second grade, although other

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studies have suggested that long-term effects may not last over time if the quality of schools is poor.

The early child development studies supply more information on quality than do the other survey and administrative data sources reviewed here. Their major strength is that they combine detailed observations of settings with direct assessment of child outcomes. Their major limitation, however, is that they are not nationally representative. In particular, many of the studies are not representative of the low-income population. Furthermore, many studies do not examine family child care settings. Finally, some of their results are viewed with skepticism by those that feel that “experts” and parents do not share the same views of quality.

One final data source is the National Study of Low-Income Child Care. This ongoing five-year study is being conducted by Abt Associates under the direction of the Office of Research, Planning and Evaluation of the Administration for Children and Families and is scheduled for completion in 2002. It will examine low-income child care markets, looking at twenty-five communities in seventeen states. A substudy will look at family child care markets in five neighborhoods. The study is intended to examine the impact of subsidies on the type, amount, and quality of child care in local markets. The project is still underway, and no results are available as of December 1999.

Conclusion

If asked whether we have good child care data, I do not know whether to answer that the glass is half-full or half-empty. We have better child care data than we used to, but we still have many unanswered questions. The complexity and multiplicity of child care arrangements makes it hard to get a comprehensive sense of how children spend their time when they are in nonparental care. Studying the more informal arrangements, which are less visible to the researchers, is particularly challenging. We have a better sense of the various types of child care providers that low-income families use, but we still lack good data on the important question of the quality of these settings. Although advances have been made in measuring quality, measurement challenges still exist. Even for the basic data on child care arrangements, we experience some frustrating time lags in getting the data cleaned up and ready for analysis by researchers. Finally, a tension exists between the need for better national data and the need for data that is representative at the state and local levels, where many policy decisions are made.

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Comments

*Ron Haskins**

We have two policy goals. One is that many people believe that early childhood programs produce profound effects that last even into adulthood. They want to fund more "quality" early childhood development programs that would probably cost at least \$10,000 per child per year, either by expanding Head Start or by creating new programs.

The second policy goal is that we want poor mothers to work because we think it is bad for them, their children, and society if they do not work. However, they cannot work unless someone takes care of their children, and thus cost, to both parents and the government, becomes an issue. Fortunately, many mothers with preschool children do not pay for child care, but leave them with relatives or, perhaps, the child's father. Others have their children in inexpensive child care arrangements. In these cases, which now constitute well over half the families leaving TANF for work, child care is free or inexpensive and both mothers and the state TANF and child care programs have more money. Thus, even though some low-income families pay what most people think is too high a percentage of their income for child care, it does not appear that, on average, the burden is excessive for most families leaving welfare for work. Of course, it is unclear what will happen if more mothers continue to enter the labor force.

These two policy goals conflict. Expanding expensive child care programs makes funding the welfare-to-work objective very costly, but promoting the labor force expansion of mothers means that a given amount of money will have to be spread across more families. Thus, the policy dilemma is which effort to fund.

Until now, the solution has come in two major parts plus a bunch of little things. With respect to child care quality, there has been bipartisan support for Head Start, a program perceived as providing quality child care. Head Start grows every year, and that is the political answer to the call for more quality child care. By contrast, policymakers have refrained from imposing burdensome federal regulations on regular, market-based child care, leaving room for the development of a less expensive informal child care market. The decision to limit federal oversight to very broad areas, such as health and safety, was made in the 1988 negotiations leading to the Family Support Act and was reinforced in the major day care legislation passed in

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1990 (which also required every state to have a voucher program) and again in the 1996 welfare reform bill.

If supporters of the "quality" position want to crack the current policy situation, they will need to produce data to show that such programs boost child development and produce long-term impacts on school achievement and other important outcomes such as delinquency. To be persuasive, these results must be based on sound scientific criteria: (1) measures of outcomes that are reliable and valid, such as improved school achievement, higher IQ scores, and lower crime rates; (2) big, representative samples with low attrition; (3) random assignment to establish causal relationships; (4) documentation of the intervention; (5) long-term effects, not just contemporaneous to the program; (6) benefit-cost calculations; and, (7) above all, replication of these effects, the hallmark of social science.

On the basis of these criteria, what do we actually know? Selected studies of some small-scale demonstrations—like the Abecedarian project and the Perry Preschool project—have met many of these criteria and show immediate effects on important variables like school achievement, welfare receipt, and crime or delinquency. They also appear to have produced significant results that last over time. However, we can not take the impressive results from small demonstration projects and generalize them to the country as a whole. We want to know what happens when we try to implement such programs on a large scale nationally.

Thus, we should carefully study what we know about Head Start because it is a national program. Most of the studies on Head Start lack the rigor of a randomized experiment and do not have national samples. Moreover, while many find immediate effects, most of the long-term effects disappear, with some exceptions for health. One of the few studies of Head Start using a large, national data set, the National Longitudinal Survey of Youth (NLSY), found, using matched siblings, virtually no effects for black children, but some significant effects for white children on intellectual performance, as measured by the Peabody Picture Vocabulary Test.¹ In this, the biggest study of all, black children—who were the initial and continuing focus of the Head Start program—showed no evidence of long-term effects.

Another group of studies has examined "quality" issues. For example, studies from the National Institute of Child Health and Human Development (NICHD) claimed to find some effects, but they were small, especially in relation to family characteristics. Moreover, the studies are fraught with problems, such as attrition and selection bias. We do not have strong evidence in these quality studies that the things we can regulate—such as teacher preparation, ratios, and class size—have long-term effects on children's development. Thus, we have little scientific basis for spending additional money by strengthening child care regulations.

¹Janet Currie and Duncan Thomas, "Does Head Start Make a Difference?" *The American Economic Review* 85 (June 1995): 341.

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The bottom line is this: We should stick with the current policy and invest in research. The biggest problem now is equity. We have many people who are similarly situated, some of whom have child care supported with federal money and some of whom do not. That is simply not fair. We have to achieve greater equity, and for this we will need additional funds. Whether the federal, state, or local government or the private sector—or some combination of the four—will produce such funds is the most important child care policy issue now facing the nation.

Reference:

Currie, Janet, and Duncan Thomas. 1995. "Does Head Start Make a Difference?" *The American Economic Review*. 85(3) (June).

Comments

*Clarice Walker**

I am one of those who would advocate for child care centers blanketing the country and federal standards for child care. That is a great need. Some issues that underlie the research are not necessarily apparent. One has to do with the availability of money for providing child care through federal funds and other funding sources: Only 10 to 15 percent of eligible children are receiving those funds. I recently heard a story from someone who just came back from a meeting in the South; she talked about the fact that just 4 percent of the eligible children in Mississippi are receiving child care. Parents face barriers to accessing child care funding. In Mississippi, for example, I was told that a parent from Hattiesburg has to go to Biloxi and present herself in person to get access to the funding for child care.

We have to look at why only 10 to 15 percent of the children who are eligible for child care are receiving it, particularly when our early research is telling us how important early education is in terms of future development. We clearly do not know what the issues are around accessibility to care. We know that in many of our cities across the country, the waiting list for child care is unbelievably long. Do we know why? I do not think we have the research or the evidence to answer that question.

A second issue has to do with quality of child care, which needs to be emphasized. I could not disagree with Ron more, in terms of the need to emphasize quality child care. Although we certainly have had debates about the quality of Head Start, the debates will continue, just as our debates are continuing about the quality of education. It does not mean that we should stop focusing on quality issues.

Research speaks to this issue. The National Institute of Child Health and Human Development is coming out with some encouraging results showing that quality does matter in terms of achievement. But is it lasting? We have gone over that issue in many of the Head Start studies that were done when we began to look at follow-through. The argument is always there. We do not have enough evidence to say that quality does not matter.

The other issue we need to examine has to do with short- and long-term effects on working low-income parents. We know about the effects of work on parents and about issues of

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competence, the development of confidence, and the development of self-esteem. We are in an era in which we can expect that every adult will be working, although perhaps not staying in the labor force 100 percent of the time.

We have studies suggesting that work is not a problem in terms of its effect on children, but those studies have been primarily with middle-class and professional parents and their children. We do not know much about the short- and long-term effects of work on low-income families with regard to stress, the health status of the parents and their children, self-esteem, and competency. We also do not know much about the effects of multiple child care placements.

We have heard about the informal child care arrangements and about parents using their own resources. But increasingly, as more people are expected to work, those informal resources will no longer be available, particularly for low-income families and children of color.

At this time, about 15 percent of the children in this country are children of color, and we know that is a growing population. We also know that a population is disproportionately affected by poverty. As reported in the Casey Foundation's *Kids Count*—money, work, time, and role models are in short supply, so we must look at the vulnerability of children in that population.

We also need more research on the sustainability of gains, both for parents, in terms of their employment, and for children, in terms of their child care arrangements. We have abundant evidence that the experiences in early life affect lifelong development.

We clearly need much more research on the relatively new phenomenon of mothers working without adequate support systems as well as without adequate resources. The income of people moving from welfare to work tends to be in the range of poverty or near poverty. Working, in and of itself, is not moving families out of poverty. Again, I would encourage more research on the issues of accessibility, quality of care, and sustainability.

Discussion

Comparability of Data

Douglas J. Besharov: Julia Isaacs's graphs on the settings funded by the Child Care and Development Fund don't square with overall patterns of child care use. Is there something about the data that we should know? For example, are the numbers being driven by age effects? Would more four-year-olds be in center care in Texas, as opposed to in Delaware, where there would be younger children whose parents, we predict, would purchase a different kind of care? Or is there something about how Texas-funded care before, so that they are using a different funding stream for centers versus family day care homes and so forth?

Julia B. Isaacs: Those are all plausible hypotheses. I would add that the National Survey of America's Families, which looks not only at subsidized care but at the patterns in all arrangements, also finds big state-to-state differences. Some of it is that the underlying population is different. A lot of it has to do with state policy. Does it discourage relative use? Does it encourage it? Does it encourage centers? A lot is going on. I haven't looked into it and age could be a factor. I'm not quite sure why the age of children would be different in the different states.

Douglas J. Besharov: Well, they could be hitting them at different ages for welfare reform.

Ann Segal: For about twenty years, Texas has had one of the highest uses of infant center placement in the country. It has a historical pattern of placing very young children, when other states wouldn't even allow young children in centers.

Howard Rolston: Texas, however, has been later in lowering the age at which parents are required to participate in work activities. For a long time, it had the jobs exemptions, and it only recently has begun to lower the age.

Ann Segal: But that works in the direction of the results, because the older the children, the more likely they are to be in a center.

Julia B. Isaacs: We'll have the age data soon. We should be able to look at this.

Douglas J. Besharov: We, as consumers, are waiting desperately for that information.

The Quality of Child Care

Isabel V. Sawhill: The issue of unpaid care is key. Ron Haskins started out by saying that about half of child care is unpaid, and that varies a lot by income level. The proportion of unpaid care for lower-income families is much higher than for better-off families.

My suspicion about unpaid care is that the variation in its quality is even greater than whatever the variation is for paid care, in which considerable variability exists. But when we talk about unpaid care, we are talking about everything from the wonderfully loving grandmother, who is a fabulous substitute caretaker who loves the child, to basically leaving a child totally alone or with a drug-addicted friend or relative.

I have never been somebody on the ramparts about regulation. Conversely, it seems to me that one of the benefits of getting more children into paid care would be some shrinking of that variation. How does one do that without monetizing a lot of unpaid care that is perfectly good, reasonable care? I think that is a real dilemma for policymakers.

Ron mentioned that the Currie and Thomas study, which was in the *American Economic Review*, used the National Longitudinal Survey of Youth. The findings were positive for white children but not for black children in terms of long-term outcomes. Janet Currie, a member of the Brookings Roundtable on Children, is writing a paper on the subject. She believes that the reason long-term outcomes for black children are not more positive is because after their Head Start experience, they go into lousy schools. The white children, because of where they live and so forth, are able to sustain whatever cumulative impact Head Start has had. It would be good to get some better data on her hypothesis about that.

One problem with assuming that Head Start is available to fill in where the child care block grant isn't serving everyone is that it's just a part-day, part-year program. One of the constraints is that we don't have the money, despite the Republican support in Congress, to expand it either to full-day or full-year. Nor can we expand it to serve the 50 to 60 percent of poor children who aren't getting it now, much less to extend it a little bit above the poverty line.

We do need a random-assignment evaluation of Head Start. It probably doesn't begin to have the positive effects that some of these small-scale programs do. We ought to learn more about that, and we ought to try to improve it.

My colleague, Diane Ravitch, argues that Head Start needs a stronger educational curriculum. I'm not sure whether she's right or not, but I did read a study recently about the Georgia pre-K program, which is a universal program now. One of the things they had to work out politically in the State of Georgia was how the universal pre-K program, funded by the state, was going to work with the Head Start people, who have a direct line to the federal government. That's always been a political issue in this world.

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They finally worked it out to some extent, but evidently a real difference exists between pre-K programs and the Head Start programs. The way it is characterized in a report I read is that the Head Start program is much more oriented toward providing social services, whereas the pre-K program is much more oriented toward providing early education and fewer social services.

Ron is right that the welfare reform law says everyone leaving welfare should have access to child care. But much of welfare reform is about people who are not coming onto the rolls, not just those who are leaving. The caseload is dropping for both reasons. The people who are not coming onto the rolls because the rules have changed in various ways don't have that guarantee.

Most of us don't want to give preference to people coming off of welfare over those who are equally poor but employed. It would be nice to be able to expand the availability of child care to all, at least to low-income parents. We probably don't have enough right now to do that.

I'm not sure how much quality should be built in. That is still up for debate. My reading of the National Institute of Child Health and Development study and some of these other studies is that the effects of quality are relatively modest. They are certainly small relative to the effects of the family. However, something that we as a society can do is to try to improve the lives of children, especially disadvantaged children.

Kristin Moore: A comment on research: The Currie and Thomas article has some problems, including the respondents' recollection of whether the child was in a Head Start program, which is a type of information that's hard to get in survey data. Also, it's a fixed-effect model. It's a sibling model, and the sample size gets tiny. It is not a definitive study.

This is an important issue, and a place where we ought to put some money into random-assignment studies. Quality is expensive. Some programs do have positive, long-term effects on children. To figure out what is it that we should spend money on, given that the mother is going to work, we need some planned, high-quality, random-assignment variation studies that might give us a more definitive conversation.

Irv Garfinkel: I don't think we can take Head Start as an indication of what it would be to go nationwide with Perry Preschool, Abecedarian, or any of the high-quality programs. Head Start is a half-day program, about \$4,000 per year. The other programs are, conservatively, \$10,000 to \$12,000 per year. It is just not comparable. To say that is a test of going nationwide with this kind of care is a little sloppy.

Douglas J. Besharov: Just a point of clarification. Head Start's a lot more expensive than \$4,000 a year. That figure is just the appropriations divided by the number of children enrolled; it does not include other funds or resources devoted to children in Head Start. It doesn't count the child care food program costs, the costs of Medicaid, or the services delivered through Medicaid to

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those children. A lot of other resources are directed to Head Start. It doesn't count state monies, for example. So it's more. When all those resources are included, Head Start is probably somewhere between \$7,000 and \$10,000 per child, on a part-time, part-year basis, not the \$4,000 figure based on that sort of gross calculation.

Ann Segal: I do believe that quality matters; otherwise we, as parents—and grandparents—wouldn't care about where our children were put every day when we went to work. I sure care about it, and I think probably everybody in this room cares about it. So at some level, we all believe it, whether or not we believe everything in the studies. Something is driving us—common sense, if nothing else—to know that the children have to be somewhere that's pretty good.

The other thing is that virtually none of the studies look at lousy child care. The NICHD study is quite at fault here—it's partly the way the sample was drawn. Those children are not the ones who are sitting in the worst care in this country. And we don't know the effects of bad care on children, either. That is a bigger concern to many of us who are worried about where the children are, because we don't know where they are. We can assume that many of them are in bad situations, and we were hoping to get something better.

I don't think any of us would put our children in something that we didn't consider quality, and your background certainly wouldn't lead you to do that. That is why we have to continue to fight for some level of quality. I'm not sure that I can define what I mean by quality that is "up there," but I sure would like a minimum floor of acceptable care for these children.

Part-Time Work

Douglas J. Besharov: Many American mothers choose part-time work. We have another option, which is not usually on the table in these discussions. About a third, maybe more, of the mothers who have a choice, choose not to work. Half of the mothers who work choose to work only part time. And there they balance the strengths and weaknesses of child care with the strengths and weaknesses of family care. In our discussions about welfare here and in general, we don't reflect that third option as a matter of policy in the way we could.

Isabel V. Sawhill: Although I didn't publish the results yet, I may. They are directly relevant to the comment you just made. One of the options I looked at is what happened if single parents were required to work only half time. If they're going to live on half the salary, you're going to have to provide some kind of subsidy for them to live, even just at the poverty line. The costs of that approach are much, much higher than requiring them to work part time and providing high-quality care for their children for the simple reason of economies of scale in child care, including high-quality child care.

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Douglas J. Besharov: That is an option that many of us would consider, especially if we start spending more money on the earned income tax credit. I'm glad you thought about it. Sorry you didn't publish it.

Availability of Subsidies

Wade Horn: Julie, of the 10 to 15 million women who are income eligible for child care subsidies, how many of those children are in families in which the mother is working full time versus part time, and how many of those are in families in which the child is in first grade or older? Subtract out the part-timers—between 19 and 22 percent of preschoolers a year, according to the Census Bureau, are being cared for by their fathers because the mothers are working part time, shift work, weekends, or whatever. And then take out the elementary school children whose mothers are working part time during the day, when the children are in school. I think the numbers start to get fairly small. Without those qualifiers, the numbers stay as big as possible so as to signal that there's a huge child care crisis in America.

It is the same thing with Head Start numbers. I just sat through six months of debate about how to evaluate Head Start, and the biggest problem with doing randomization was that no more children are eligible for Head Start who aren't already being served. That is what the Head Start people said. We can't do random assignment because all those communities are saturated. Why? Because among the children who aren't in Head Start, their parents don't want them in Head Start, they are in a different program that's state-run, or they are in some other kind of child care arrangement.

So where is the big child care crisis? The best study on the subject is the supply-and-demand child care study, which suggests that a huge child care crisis in America does not exist. We have to qualify the numbers to be more honest if we want to influence policymakers in a way that makes sense, as opposed to using the numbers to indicate a big crisis so that we get a big solution that some advocates would like.

Julia B. Isaacs: Fewer part-time people are in that 15 million estimate than one would think. I do have some of those numbers. Most, 84 percent, of the children are in families where both parents are working more than twenty hours per week. But we also are working with the Urban Institute to refine the model, to see what would happen if we just looked at women working more than thirty hours and things like that. Your point is well taken that 100 percent is not right, but I don't think that 15 percent is anywhere near saturation. So we've got to see where between 15 and 100 we should be.

Jason Turner: In New York City, the Administration for Children's Services has a list of about 60,000 people waiting for child care, but the list is a phantom list. It doesn't exist. There's nobody in New York City who needs child care in order to go to work. All the welfare population gets child care as an addition to their welfare check if they make their own selections.

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It turns out that the list is made up of people in one kind of child care setting who want to get into another kind, people who are on the list multiple times, and people who put their name on the list at some time in the past and are no longer there.

We went through a sample of the list, one by one, to determine how many people we should budget for, anticipating full engagement of the welfare population. It turns out that the need wasn't there. And this is in New York City. So I would imagine the same may be true in many municipalities throughout the country.

Ann Segal: It occurs to me that this is a little bit like our earlier discussion about who the people living on zero incomes are. Who are the single parents who now have to work who don't have any child care? They'd have to tell the interviewer that they left their children all alone, or they would indeed be doing that, or else they have to have some kind of child care if they are working. They are either doing that or they have zero income or they are working less than full time—you see where I am going.

Isabel V. Sawhill: The 15 percent figure is a crude number, and the gap is probably not nearly as big as that number suggests. But I think we need to get a handle on this, given how important an issue it is.