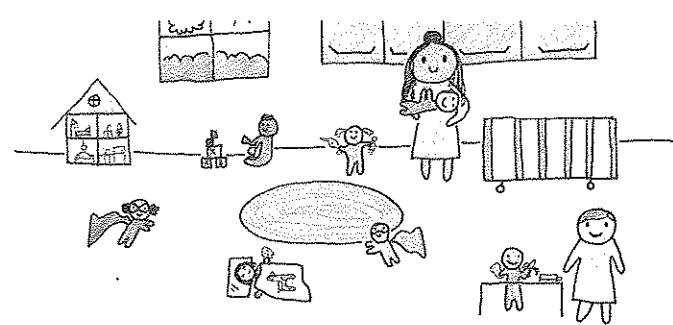




CHAPTER 4

Early Learning and Child Care: Infancy Through School Age

WHY THIS TOPIC MATTERS

Affordable, accessible, and quality early learning and child care in the United States has become an increasingly important issue for families and communities. Consider that in 2015, 69.9% of mothers with children under age 18 were in the workforce (US Census, 2016). So, knowing the hallmarks of quality care is key to developing a complete understanding of the many facets of the field of early childhood education. A number of parents may turn to you for advice about locating good care for their young children, whether for a few hours, the full day, or the hours surrounding the school day. You may even find yourself teaching at or directing a child-care center at some point in your career. This chapter will help you develop greater knowledge about the issues related to child care.

LEARNING OUTCOMES

After reading this chapter, you will be able to do the following:

- Connect how events of the last century have resulted in a greater need for child care.
- Explain the issues that define child care and early learning in the United States today.
- Define the following child-care arrangements: **in-home care**, family child care, **center-based care**, and before- and after-school care.
- Describe the features and effects of quality child care.
- Explain why collaboration among parents, schools, communities, and caregivers is needed to develop social policies to enhance the accessibility, affordability, and quality of child care.

Renata and her partner, Gregg, anticipate the birth of their third child in about three weeks. They are excited about the prospect of having another child, and have been preparing for the new arrival. Yet, they are feeling anxious too, because they wonder how they will cope with the additional financial burden. Renata works as an office manager for a legal firm. When she is working, her 18-month-old daughter, Evelyn, is cared for by a grandmotherly neighbor, Mrs. Carlson, at a cost of \$175 per week. Her 4-year-old son, Josh, attends a nearby church-affiliated child-care center at a cost of \$200 per week. Neither arrangement is fancy, but both are in the neighborhood and supervised by people Renata and Gregg have grown to trust.

Renata and Gregg have carefully considered their options. "If we have to pay out another \$175 a week for child care," says Renata, "it'll hardly be worth my while to keep my job. I'm not sure Mrs. Carlson will want to take both the new baby and Evelyn, and, you know, the center at church won't take Evelyn until she's potty trained."

"Yeah, but we need the extra money, and you really like what you do," replies Gregg. Renata is unsure, though. She ponders for a while and thinks to herself, "What with paying out over \$500 a week for child care, we're going to have only a little bit left over. I may as well stay at home and look after the children myself." Finally, she muses aloud, "Boy, we really do have some tough decisions to make."

Renata and Gregg are part of the growing and changing child-care dilemma that many American families are facing. Recent research reveals that in most families in the United States, both parents work or go to school, and child-care costs account for more than 10% of a family's total income. Clearly, the need for child care is a concern not only for families like Gregg's and Renata's, but for many others as well. Affordable and accessible child care is increasingly seen as an issue not just for families, but for society as a whole. Without child care, parents cannot work, and without quality care, children will not succeed.

Child care in America includes a wide array of arrangements that reflect the age of the child, the setting where care is provided, and the purpose for care, such as infant-toddler centers, family child-care homes, and before- and after-school care. In this chapter, we will focus on the various child-care arrangements made by parents who are working, in training, or have different schedules and rely on other professionals to support their children's growth and development.

Increasingly, as parents become more aware of the importance of early learning, they are seeking care arrangements that offer appropriate cognitive stimulation and socialization experiences. For this reason, there are more overlaps among the various programs. For example, preschools have begun to offer extended-day options, and child-care centers continue to refine their instructional philosophies. Infant care centers, Head Start, Early Head Start and pre-kindergarten programs are more common than ever. It is difficult to divide these arrangements into neat categories, but the term *early care and education* is increasingly used to describe child-care programs.

In this chapter, we trace the history of child care in the United States and provide an overview of the current state of affairs. A description of each type of child-care arrangement, as well as factors to consider when assessing the quality of particular programs, is also included to help you advise parents on choosing care. We pay particular attention to the costs of care and how this relates to staff quality and turnover. Finally, we address the effects of child care on children's development and the well-being of families, concluding with some of the policy issues that relate to raising the quantity, affordability, and quality of child-care services.

HISTORY OF CHILD CARE

At one time in the United States, **extended family** tended to live with the nuclear family or nearby. So, when a mother found it necessary to work outside the home or a father lost his wife, the child was usually cared for by a female relative. Because most of these

caregivers were assumed to have some commitment to the well-being of their relative's child, quality of care was rarely a concern.

Industrialization, which started in the early 19th century, changed these informal family arrangements. As increasing numbers of families moved from rural areas to the cities and as immigrants entered the country, women found work in factories to help support their families. Child-care centers were opened in Boston, New York, and Philadelphia to provide care for children during the hours their parents worked. Most of these centers provided custodial care to meet the basic needs for food, shelter, rest, and supervision, but some also provided instruction for both children and families. The care was provided in large part for reasons of social support, to help needy families in those urban areas.

During World War II, larger changes came about as huge numbers of women, many with children, went to work in factories to support the war effort. Under the 1944 Lanham Act, the country intensified its mobilization on behalf of the defense industry and increased many services. Under provisions of the Act, many communities were able to build excellent child-care centers to serve the children whose mothers were working. When the war ended and men returned to the factories, however, many women lost their jobs, and eventually most of the 1940s-era child-care centers closed. The economic prosperity and sharp increase in the number of births during the postwar years led to an arrangement in most families whereby the father worked outside the home and the mother cared for the children.

The economic boom of the 1950s, however, increased consumer demands for goods and services, and in turn provided new opportunities for women to work. Gradually, more women became employed outside the home. As changing attitudes concerning the roles of women that began in the 1960s continued, women increasingly combined motherhood with working, whether from need or preference. Divorce became more common during this era, and single mothers often needed to provide much of their family's income. During the 1960s and 1970s, as more families sought care for their children, there was little support from either the government or the private sector to increase the availability of child care. Concerns about the quality of the child-care centers that did exist began to develop. The concerns focused on health and safety standards, plus the lack of training and low wages that led to high staff turnover.

In the 1980s, additional concerns were raised regarding the consequences of child care for children's development. Today, high-quality programs exist, but are often too expensive for many families to access.

After-school programs began in the United States in the 19th century. In addition, programs such as those of YMCAs and YWCAs, Scouts, 4-H, and other youth organizations emerged from programs initially started in storefronts, settlement houses, and churches. These were all designed to offer places where young people could safely gather to have fun and learn useful skills. Some, like the Y, have gone on to become major providers of care for school-age children during the hours before and after school.



Working mothers are now the norm, so affordable child care is an issue in many American families.



Check Your Understanding 4.1

Click here to gauge your understanding of the concepts in this section.

CHILD-CARE ISSUES IN THE UNITED STATES TODAY

"In today's economy, when having both parents in the workforce is an economic necessity for many families, we need affordable, high-quality child care more than ever. It's not a nice-to-have—it's a must-have. It's time we stop treating child care as a side issue, or a women's issue, and treat it like the national economic priority that it is for all of us."
President Barack Obama, 2015 State of the Union Address

Some kind of informal, shared child care has always been practiced in the United States. The increased isolation and fragmentation of families, however, together with other changes in family structure and social expectations, have increased the need for more formal arrangements in recent decades. Today, nearly 21 million children need care while their parents are at work. Often, this need begins very early in a baby's life, because although many private companies offer paid maternal leave, only 12 weeks is guaranteed by law. In many families, both parents work outside the home to maintain or increase their standard of living. Other families are headed by a single parent. In addition, many women who have trained for a career choose to combine work and motherhood. One of the most dramatic changes in US society over the past 40 years has been the great increase in the number of working mothers. Consequently, the need for affordable, quality child care is a fact of life for many American families.

Availability of Child Care

For middle-class families, the emergence of a market-based system of child-care services in the 1980s increased the visibility and availability of options for working families who could afford to pay for them. **Resource and referral programs** made it easier to locate child care, which became more visible as centers sprang up in public places and family child-care homes became more formally organized as small businesses.

The trend over the past 40 years toward center-based care has been significant. In 1965, only 6% of US preschool children were cared for in centers. By 2011, nearly 24% of children under age 5 were enrolled in child-care centers, and a total of 61% of children under age 5 had a regular child-care arrangement. Figure 4-1 shows the distribution of primary care arrangements in 2011. Another interesting trend is that 25% of children under age 5 are in multiple child-care arrangements over the course of the week. Research is inconclusive at this point on the effects of multiple caregivers, but it might be a result of too few high-quality child-care programs and the economic difficulty of paying for such care.

Like their preschool counterparts, many school-age children are also in multiple child-care arrangements before and/or after the regular school day. Those in a single arrangement usually are in center- or school-based child-care programs, relative care, non-relative care, or self-care. Parents often make the arrangements for their children by choice or by default due to costs, transportation, work schedules, or availability. The accuracy of the data on school-age child care can also be difficult to assess, because some parents may not want to admit that their children are in self-care. The Afterschool Alliance (2014) has estimated that approximately 20% of children are on their own after school. Parents cite many barriers to securing care surrounding the school day, including cost, availability, and

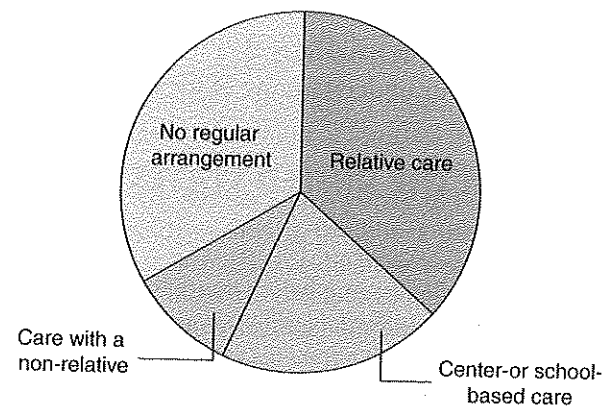


FIGURE 4-1 Primary Child-Care Arrangements for Children Under Age 5 in 2011

Source: Based on US Bureau of the Census. *Who's Minding the Kids? Child Care Arrangements, Spring 2011: Detailed Tables*. Table 1. Retrieved April 3, 2017, from <http://www.census.gov/prod/2013pubs/p70-135.pdf>

transportation. In a poll conducted by the Afterschool Alliance in 2000, 60% of voters felt it was difficult to find after-school programs in their communities, and 30% of families not enrolled in an after-school program said they would do so if one were available.

Low-income and rural families face additional issues when finding child care, and rely increasingly on juggling informal arrangements with relatives and babysitters. The number of **subsidized child-care** slots is not adequate for the demands, and lengthy waiting lists exist in many communities. Higher-income families and those that reside in more developed communities often have more choice about the kinds of child-care arrangements they make, so they tend to use centers. Also consider that current research from the US Department of Labor (2011) shows that increasing numbers of Americans have to work in the evenings and on weekends. Only a small percentage of child-care centers offer 24-hour care; parents who work nights and weekends must piece together care, often with detrimental effects to young children (Morsy & Rothstein, 2015).

Financing Child Care

Most of the cost for out-of-home care is borne by individual families, and this cost can be prohibitive for many parents. Low-income families often must allocate up to 52% of their monthly incomes on out-of-home care, whereas higher-income families spend only 10% (US Census Bureau, 2010). Therefore, cost in relation to family income is a major factor influencing many families' child-care arrangements. In the past, families on or transitioning off welfare could receive subsidies for child care. But as regulations have changed, these families may no longer receive assistance at the level or for the length of time needed.

The child-care situation for low-income families varies greatly from state to state. Low-income families can have their child-care expenses subsidized by municipal funds. In 2014, President Obama signed the Child Care Development Block Grant into law, reauthorizing the federal government to make funds available to states, territories, and tribes to support low-income families' access to child care through 2018 (US Department of Health and Human Services, 2014). The availability of subsidies and the accessibility of programs that accept subsidized children can greatly limit a family's choices. Although Renata and Gregg are not living at the poverty line, their dual income is still not enough to pay for the rising cost of child care. They are ineligible for any government subsidy or assistance, and are similar to many families among the **working poor** who patch together informal child-care arrangements with relatives, friends, or neighbors.

PERSPECTIVES ON DIVERSITY

Research confirms that high-quality early childhood development programs have the potential to counteract the negative effects of poverty and therefore protect the most vulnerable children in the United States. However, due to limited funding, only 25% of low-income children under the age of 5 can access funds by the Child Care and Development Block Fund (Children's Defense Fund, 2016). Be aware that many elementary age students may have attended under-resourced early care programs.

In the following vignette, Carla provides an example of the benefits that subsidized care can offer low-income families. But you will see that she also faces difficult choices.

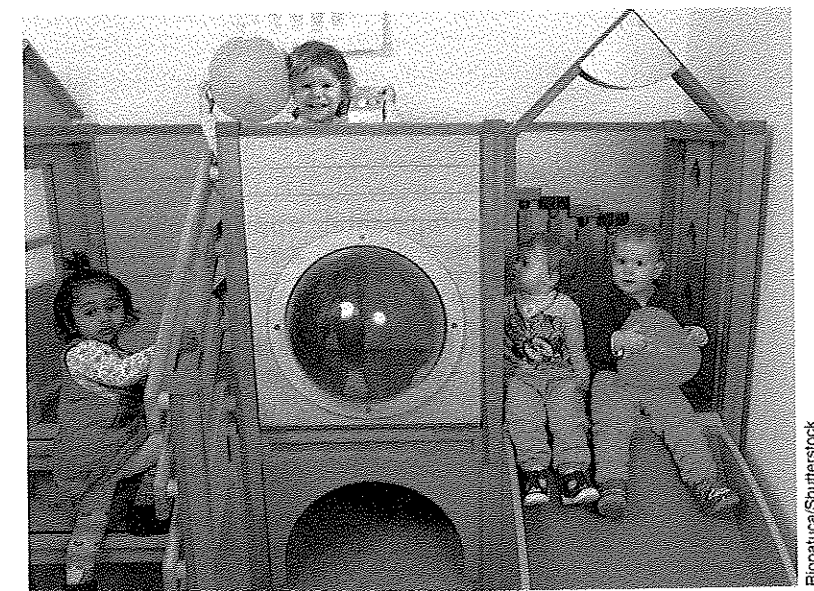
Carla's sons, Tommy and Cody, both attended Head Start, and Carla became an active program participant in the job training offered. She gained skills and confidence in herself. As a result, she was able to take a part-time job. With her salary added to her husband's wages, the family moved off welfare and was able to purchase medical insurance.

Suddenly, things changed. Carla's husband left this year, and he provides no financial support. Her employer is urging her to get more training so she can qualify to become a full-time employee, as part-time positions are being outsourced in the near future. To continue her training, though, Carla must find evening child care for her boys. Such care is expensive and hard to find.

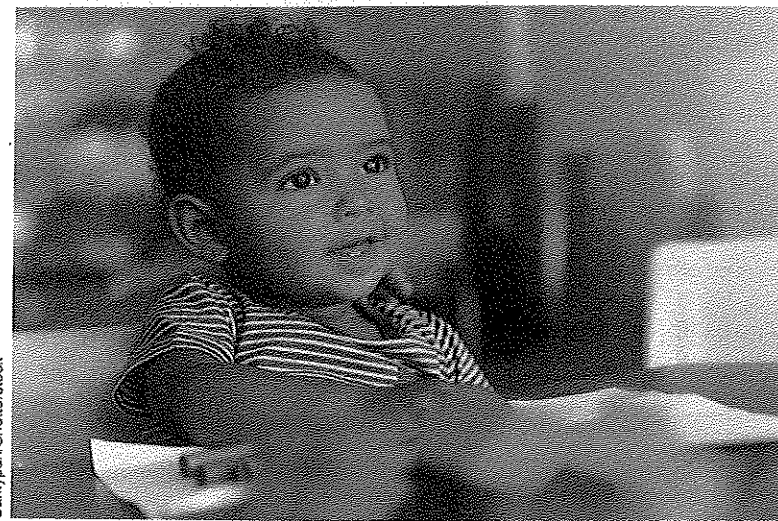
Carla is eligible for child-care supplements, but when she applies, she is told that all new applicants are placed on a waiting list. Her job, career training, and future employment all are in jeopardy. Carla is seriously considering going back on welfare until both children are a little older. But she's afraid that by then, the skills she has gained will be obsolete.

You can see that families whose income hovers slightly above poverty guidelines are less likely to be able to afford center-based care, as is the case with Carla in the preceding vignette. In short, these families have fewer options when it comes to selecting appropriate out-of-home care.

The federal government does offer a tax credit to help families pay for child care. The Child and Dependent Care [Tax] Credit reduces the income tax liability of families at all income levels with work-related care expenses. Because the credit is nonrefundable, however, its value to low-income families is limited, as the credit amount cannot exceed a family's tax liability. As of 2017, the maximum credit is \$3,000 a year for one qualifying dependant or \$6,000 a year for two or more qualifying dependants. This credit can help offset some of the cost of child care, but more often, it falls short.



Many families have few options when selecting child care.



Santayan/Shutterstock

Federal legislation has brought about services and programs for infants, toddlers, and their families.

Concerns About Quality

Advocates for children are increasingly concerned about the outcomes for low-income children. An article in *The New Republic* (April 13, 2013; Cohn, 2013), "The Hell of American Day Care," describes a system of care that is poorly regulated and potentially dangerous to low-income children. Substandard care, accidental injury or neglect, and an inadequate developmental environment can have devastating effects on children whose families lack adequate funds for quality child care. Even for families who can afford child care, concerns remain about the quality of these facilities for young children. Child Care Aware of America (2015) states, "In every state, child care can be hard to find, difficult to afford, and is likely to be of

mediocre quality. State licensing standards vary greatly, with few states meeting the most basic standards to ensure that children are safe and learning while in child care."

But a national study of family child-care programs reported that more than a third of the programs were rated as inadequate. This, of course, raises concerns about children's safety as well as the harm to children's development. Most studies conclude that children in poor-quality care are at risk when they do not receive the attention, nurturing, and educational enrichment that will help them succeed. Yet, we find considerable variation in the quality of both centers and family child-care homes. Both anecdotal and formal research reveals that access to high-quality child care has positive long-term effects (Vandell et al., 2010).

Table 4-1 provides a description of the served age groups needing child care, along with the recommended group sizes and staff-to-child ratios. A discussion of the effects of child care on children's development and the policy issues that will help ensure available, affordable, high-quality care will conclude this chapter.

TABLE 4-1 Age Group Categories for Child-Care Programs and Recommended Maximum Group Sizes and Staff-to-Child Ratios

Developmental Stage	Approximate Age	Developmental Level	Maximum Group Size	Ratios for Maximum Group
Infant	0–15 months	Birth to mobility	8	1:4
Toddler	12–28 months	Mobility to accomplishment of self-care routines such as feeding self	8	1:4
2- and 3-year-old	21–36 months	Continuing development of self-care routines such as toileting	12	1:6
Preschooler	36–50 months	Achievement of self-care and entry into elementary school	20	1:10

Video Example 4.1

Watch the video of a teacher interacting with five infants and toddlers in a child-care center. While you are watching, think about the quality of care that is possible with the teacher-to-child ratio shown in this short clip.



Check Your Understanding 4.2

Click here to gauge your understanding of the concepts in this section.

CHILD-CARE ARRANGEMENTS

When Issam and his daughter Tina enter Tina's child-care center, they are surprised not to see Mrs. Holden, the director, in her office. The assistant smiles and says that Mrs. Holden is with the infants because an extra lap was needed. On the way to the 3-year-olds' room, Tina urges her father to stop and watch the fish in the tank. A mother watching the fish exclaims, "We've been stopping here lately too. Just watching seems to help Janda relax before starting the day. Mrs. Holden was so sure this tank would help the kids, and I can see it."

On entering the classroom, Tina notices that Billy is upset. Miss Martha, one of the teachers, is comforting him as they walk to the classroom's telephone. Tina goes over to Billy, pats him, and says kindly, "It's okay!" She then puts her coat in her cubby and hurries over to her friend Claire at the water table. Soon, Billy's mother is on the phone, and her voice appears to be quieting Billy. As Issam waits to talk with the teacher, he smiles at his neighbor Felicity, who is seated on the floor with two other children reading. Miss Martha turns to Issam, who asks if everything is okay. "Oh, yes. Billy does take change hard. His dad brought him today for the first time, and now he seems uncertain about his mama. I got her on the phone, and she's reassuring him."

"Oh, that's good," replies Issam. "Well, I just need to remind someone that Tina's grandmother will pick her up this afternoon. Tina knows this, and I put a reminder on her chart."

"Okay. Just remember to let them know at the office on your way out."

Issam kisses Tina goodbye, saying, "Remember, Grandma will pick you up this afternoon, 'cause Mommy has to work late."

As Issam leaves the building, he greets the toddlers' teacher, who is starting her first outing of the day. Five toddlers are happily seated in their cart for an excursion along the sidewalk to look in the shop windows. Issam thinks, "I remember how Tina enjoyed those cart rides. Boy, we were lucky to find such a great center so near home."

Quality child care makes a difference for families, especially in light of the changes taking place within American families. Tina's parents are both professionals. They represent the **postmodern family**, in which most parenting for very young children is provided by the mother, increasingly with a co-parent's support, and by other caregivers. Since Tina's arrival at this center, Tina's family has been pleased with the program. Although the cost of care is high, the center has provided a consistent staff of caregivers and a safe environment. Many families use the center even into the school years, because it has extended-day programs.

Parents like Tina's seeking child care are faced with many issues in determining the appropriate arrangement for their children. Aside from issues of affordability, location, and availability, families want to ensure that their children are in a safe, healthy environment where they will receive nurturing care. Figure 4-2 lists indicators of safe, healthy child-care arrangements. Later in this chapter, we will discuss indicators of quality that go beyond the minimal standards of health and safety.

Resource and referral agencies have been established in many communities to support parents in locating child-care centers and family child-care homes; other agencies assist in locating nannies and *au pairs*. These various options for child care are described in the following sections.

FIGURE 4-2 Indicators of a Safe and Healthy Child-Care Arrangement

- **Supervision:** Children should be supervised at all times, even when sleeping.
- **Discipline:** Children should be guided positively, clearly, consistently, and fairly.
- **Sanitation:** Children and teachers should wash hands frequently. Diapering areas, restrooms, and places where children eat should be cleaned and disinfected regularly.
- **Director qualifications:** Directors should hold at least a bachelor's degree in a related field and have two or more years of experience with children.
- **Teacher qualifications:** Teachers should hold a degree in a related field, and assistants should have ongoing training about child development and appropriate activities.
- **Child-staff ratio and group size:** The younger the children's age, the smaller the group size and the lower the child-staff ratio should be.
- **Safety:** Toxic substances and medications should be kept out of reach of children, and poison control information should be posted. Programs should have an emergency plan, first-aid kits, fire drills, and other safety measures in place. Staff should be trained in first aid and know how to administer medications.
- **Child abuse:** All staff should have been subject to a background check, and should know how to recognize and report signs of suspected abuse.

In-Home Child Care

Care that takes place in the child's home is an unregulated arrangement. In the case of a babysitter, the family determines the necessary qualifications, screens applicants, and makes an agreement with the individual of its choice. The advantage of this type of care for parents with long workdays or erratic schedules is its flexibility. The caregiver, who may even live in the child's home, becomes an employee of the family, which then assumes certain financial responsibilities in terms of taxes and Social Security deductions. (Some decide not to report the payments.)

Families can also hire a nanny to provide in-home care. Generally, nannies are registered with an agency and have had some training in the care of young children. Another option is an *au pair*, a young person from another country who performs child care and light housework in exchange for room and board and a small salary. The *au pair* system is organized by the US Information Agency as a cultural exchange program to allow young and usually well-educated participants to take courses and enjoy living and traveling in the United States. Generally, though, the *au pair* has minimal training and experience in child care. Other families make arrangements with a babysitter to provide care in the sitter's own home. This is also unregulated care that, like the options for in-home care, can have considerable variation in quality, depending on the individual caregiver.

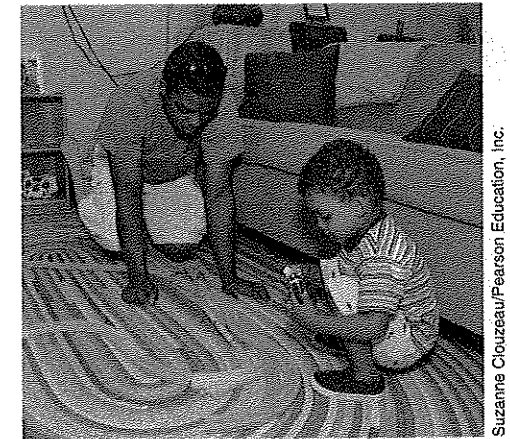
Family Child Care

In this arrangement, children are cared for in the home of the provider. A small-family child-care home generally includes one provider and a small number of children, whereas a large- or group-family child-care home includes the provider and a few assistants caring for a larger number of children. Individual state licensing regulations determine the number of children permitted in each type of family child-care setting. Care is generally offered all day, five days a week, year round, and can meet a family's need for flexibility more easily than a center-based program with fixed hours of operation.

Many providers begin this work initially as an extension of caring for their own children, but some continue it as a career choice and may even become part of the movement to professionalize this type of care (National Association for Family Child Care, 2017). More and more, family child care can provide licensed care for children in an environment organized to support healthy development. Family child care is generally a more affordable option. Although some caregivers will only accept particular age groups, others care for the same children year after year as they grow older. A family child-care home can mirror a family, serving children from infancy through school age. Many families prefer this type of arrangement, particularly for children under age 2, because of its convenience, individualized relationships, and homelike environment.

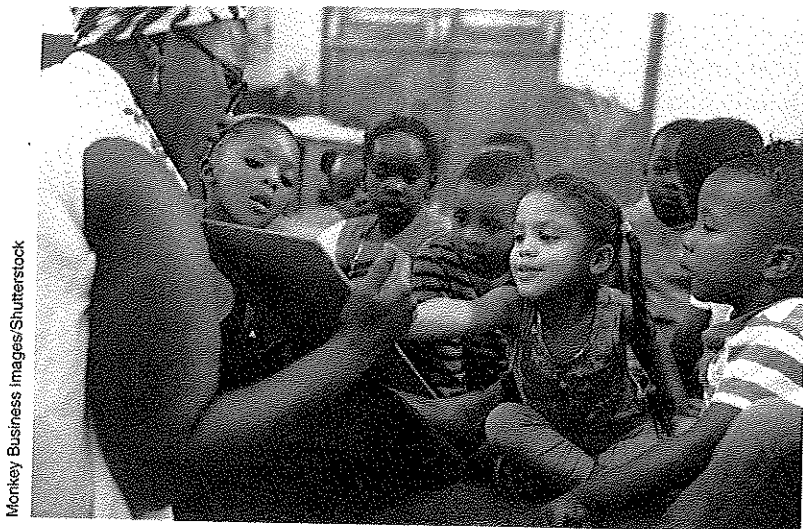
Child-Care Centers

Center-based child care can serve children from infancy through school age, although some programs limit themselves to a particular age group, such as preschoolers. Infant



For many families, in-home child-care works well.

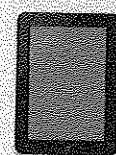
Suzanne Clouzeau/Pearson Education, Inc.



Quality child care is important for young children's development as well as for their safety and well-being.

garten through age 12. Child-care centers have long hours of operation and can serve children of various ages, which makes them a particularly convenient and appealing choice for families.

MEDIA MATTERS



The American Academy of Pediatrics (AAP) (2016) recommends no television or computer exposure for children under 18 months, and limited supervised exposure for children ages 3 to 5. But preliminary findings in a study of television watching in child-care centers (Copeland, 2011) indicate that 60% of child-care centers surveyed ignored the above recommendations regarding screen time. Children in child-care centers were often shown television programs and movies, and were encouraged to spend time playing computer games. AAP's statement contends that research supports the fact that healthy brain growth depends on direct interaction (having conversations, exposure to rich language during play) with caregivers. TV shows and other applications often claim to be "educational," and it seems some child-care centers may be tempted to use these media. The AAP, however, states that no study has confirmed a benefit of media exposure for infants, and that language delays can result from overexposure to media at a young age.

As noted before, the number of child-care centers increased dramatically in the past 50 years, with the largest growth area in for-profit programs. For-profit centers include independent programs or those that are part of local or national chains. Child-care centers may also be run as nonprofit operations sponsored by organizations such as the YMCA, local churches and colleges, social service agencies, or state and federal government agencies. **Employer-sponsored child-care** centers also have opened in recent decades. The US Military Child Development Program's extensive system of child-care centers is an example of large-scale, employer-sponsored child care.

and toddler care in centers is often harder to find due to the specialized training and facilities needed. Furthermore, infant and toddler care is often a costly enterprise due to the labor-intensive nature of caring for such young children. A high teacher-to-child ratio, such as one caregiver for two or three babies, is recommended.

Typically, child-care centers, like the one Issam's family selected in the vignette, are open all day, five days per week, year round, and close only for major holidays and extreme weather conditions. Many centers provide multiple programs, including half-day nursery classes for 3-, 4-, and even 5-year-olds, and many offer extended-day programs for children in kinder-

Child-care centers are housed in a variety of locations, including community centers, church basements, former school buildings, storefronts, industrial parks, and spaces built specifically for the center. Usually, a center will have multiple classrooms, each arranged for a particular age range to provide an educational curriculum appropriate for each age group. Although the regulations vary drastically from state to state (Schmit, Matthews, Smith, & Robbins, 2013), there are generally some educational requirements for staff and an expectation that staff will participate in continued training activities.

INFANT-TODDLER PROGRAMS The partnership between parents and caregivers is one of the most important aspects of out-of-home care for infants and toddlers. Daily communication about the baby is essential to ensure continuity of care, health, and well-being. Many programs have a care book or a specialized app that the caregiver and parent use to record important information to share with each other on a daily basis. Caregivers may also provide families with information describing what the child ate, diaper changing times, and reporting about activities, social interactions, and emotional states or behaviors.

Center-based child care for infants requires certain materials, equipment, and room arrangements (Zero to Three, 2010). Many centers provide rooms designed for small groups of caregivers and infants in spaces comfortable for both. Rocking chairs, carpeting, mats, and duplicates of popular toys are basics. Ideally, a separate sleeping area with a designated crib for each child is available. A good infant-toddler room should look more like a home than a school.

Center care for infants and toddlers, like care for this age group in other settings, should be as individualized as much as possible. Infants and toddlers need much interaction with their primary caregivers, as well as opportunities to explore and learn in a more open-ended way than older children require. Much of their learning will occur in the context of basic care activities such as eating, diapering, preparing for sleep, and nurturance. Much of the curriculum for infants and toddlers is based on the interplay between a secure attachment to trusted caregivers and a rich environment for the infants to explore. Both planned and spontaneous experiences in the context of routine care and play are recognized as essential for optimal growth. As our knowledge of early brain development has increased, infant-toddler programs are recognized as having great responsibility to contribute to the cognitive and social-emotional growth of the children in their care.

PRESCHOOL PROGRAMS Center-based care for 3- to 5-year-old children is the most popular option for American families. Young children who receive care in centers can be there for up to 50 hours a week, so many of their basic needs must be met during that time. Centers make provisions for children to eat up to two meals and two snacks each day. Children also need opportunities to rest, play outdoors and inside, and interact consistently with caring adults.

Providing for children's physical safety and basic needs, however, is only the beginning of what a preschool child-care program should offer young children. Children need opportunities to participate in a program that enriches them emotionally, socially, and intellectually. There are a number of approaches to early education programs for this age group, but it is widely accepted that young children need to make choices and initiate their own activities for large blocks of time. Although

teacher-directed activities—such as stories, songs, and arts and crafts projects—should be part of the daily routine, play and child-initiated experiences should predominate (Copple & Bredekamp, 2010). Table 4-2 illustrates an appropriate schedule for preschool child care.

SCHOOL-AGE CHILD CARE Although some centers offer care for school-age children in addition to services for younger children, other programs limit themselves to the latter age group. In some cases, centers rent space in public schools, but school districts are increasingly offering direct care as well. No matter how they are administered, however, school-age child-care programs provide a number of options for families who need care for the hours before and after school. In many programs, care is also available during weather emergencies, school holidays, and summer vacation.

School-age programs often provide breakfast for children who attend before school, and offer a snack as children arrive at the end of the school day. Outdoor play is usually one of the first options for children as they transition from their academic program to the more relaxed setting of child care. Although before- and after-school care is offered mainly in elementary schools, some middle schools also have begun to offer such care as an option. Middle school programs tend to be child-directed so the youngsters can help design a program that is very different from that for younger children. Both programs offer time and support for children to do homework, and many help facilitate children's involvement in extracurricular school options such as scouting, sports, and other activities. Table 4-3 is a sample schedule for before- and after-school child care for elementary school children.

TABLE 4-2 Sample Schedule for a Preschool Day

6:30–8:00 A.M.	Arrival/breakfast/quiet free-choice play/transition to center
8:00–8:20 A.M.	Opening circle: stories/music/planning for the day
8:20–9:20 A.M.	Free-choice play in learning centers
9:20–9:40 A.M.	Cleanup time
9:40–10:00 A.M.	Toileting/hand washing/snack
10:00–10:20 A.M.	Small-group activities: art/science/literacy, etc.
10:20–11:30 A.M.	Outdoor play
11:30–11:50 A.M.	Circle: stories/music/movement/games/conversation
11:50–12:30 P.M.	Toileting/hand washing/lunch
12:30–3:00 P.M.	Rest and provisions for quiet play starting around 1:15 for nonsleepers
3:00–3:15 P.M.	Transition from rest/toileting/hand washing/snack
3:15–4:00 P.M.	Outdoor play
4:00–4:15 P.M.	Story and songs
4:15–6:00 P.M.	Free play in center/special activities/classroom cleanup/transition to families

TABLE 4-3 Sample Schedule for Before- and After-School Child Care

6:30–7:30 A.M.	Arrival/breakfast/quiet free-choice play/transition from home
7:30–8:00 A.M.	Special activities (art, crafts, cooking)
8:00–9:00 A.M.	Clubs/group games/gym/outdoor play
9:00–9:15 A.M.	Conversation/quick games/transition to school
3:15–4:00 P.M.	Transition from school/outside games and free play
4:00–4:20 P.M.	Conversation/snack/announcements
4:20–5:00 P.M.	Homework/quiet free-choice play when homework completed
5:00–6:30 P.M.	Choice time: clubs/sports/special events/outside games/gym/transition to home

Child Care for Children with Disabilities

Federal laws prohibit both private and public child-care programs from discriminating against children with disabilities. Consequently, children with special needs are increasingly participating in child-care programs alongside their typically developing peers. Fortunately, many providers are also discovering that including children with disabilities in their programs has advantages for all children. Typically developing children learn to understand and accept differences and serve as role models of age-appropriate communication and social behaviors. Children with disabilities enjoy the activities and materials provided, and form friendships with their peers. Some adaptations and modifications may be needed to allow children at all physical, emotional, and academic ability levels to take part in the same learning environment. In the next chapter, you will find a fuller treatment of the laws and issues concerning the inclusion of children with special needs.

IDEAS FOR YOUR CLASSROOM

As increasing numbers of children are placed in multiple settings during the course of their parents' work days, you will find that communication can be challenging among the adults charged with caring for and educating children.

As a teacher, consider the following ideas to help you organize and communicate with parents and caregivers:

1. Create a data sheet for individual children with their weekly schedule of before and after-school placements. Include the e-mail addresses, telephone numbers, and physical addresses of all caregivers, including the parents. Provide a copy of this information for all involved persons, and keep your copy updated.
2. Gather photos of all caregivers and make a "family and important people" bulletin board display a focal point of the classroom.
3. Provide time for children to share some of their out-of-school activities with each other. Children who are engaged in sports, arts, and other activities after school can share their accomplishments and upcoming events with their classmates, creating a stronger community bond.
4. Be vigilant at dismissal time. Be certain you can guarantee how each child was dismissed each day. Young children need you to care about their transition from school. Safety and supervision are paramount when working with children.



Check Your Understanding 4.3

Click here to gauge your understanding of the concepts in this section.

FEATURES OF QUALITY CHILD CARE

You can see that we have great diversity in child-care arrangements and wide variations in state regulations governing center-based and family child-care homes. But there is much agreement among professionals on the characteristics of quality child care needed to provide the safe, healthy, and nurturing environments that parents want and children deserve. High-quality care is the result of a combination of structural elements such as a healthy and safe environment, and process elements such as educational and social stimulation appropriate to the age and development of the children being served.

Structural Elements

The structural elements of a child-care environment establish the foundation for optimal process conditions. Characteristics of the child-care space, for example, are structural elements. The square footage required for each child; the amount and kind of outdoor space; the requirements for furniture, sinks, toilets, windows, flooring material, and myriad other details related to the classroom, kitchen facilities, bathrooms, and diaper-changing areas are included in this category. The adult-child ratio and the amount of initial and continuing staff training required—plus the salaries, benefits, and working requirements for staff—are also structural elements of child care.

The individual licensing requirements of each state set minimum expectations for many of the structural elements, so a center or family child-care home can get licensed by meeting these requirements. Unfortunately, these minimum standards do not necessarily lead to a quality program. Therefore, professional organizations and some individuals have designed and promoted structural elements that can have a large impact on program quality. For example, although the state may require only one adult for every eight

2-year-old children and may have no limit on the total number of children in the group, the National Association for the Education of Young Children (2013) recommends a ratio of four children to one adult, with a maximum group size of ten. High adult-child ratios are considered one of the strongest structural elements in supporting the intellectual and social development of children in child care, and are important indicators of quality. Organizations such as NAEYC also offer **accreditation** to verify the quality of a program.

In addition, quality programs set up inviting environments with an abundance of appropriate resources, often in numbers far above the minimum requirements (Bullard, 2013).



Outdoor space is an important part of any child-care program.

The requirements for staff education and continued training also are above minimum requirements in quality centers.

Process Elements

Process quality refers to the experiences children have in child care, and includes such factors as adult-child interactions, children's exposure to and involvement with learning materials, and parent-caregiver relationships. These are critical components that directly affect children's behavior and learning experiences in the child-care setting.

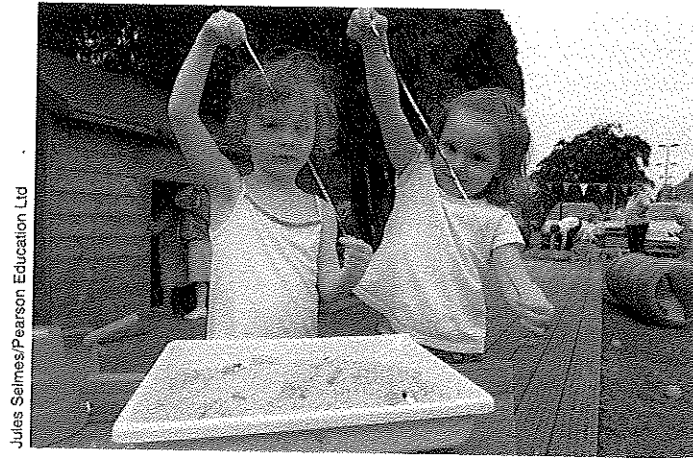
TEACHER QUALITIES The most important process element in quality child care is the human relationships between the teaching staff and children and their families. Teachers who interact with children in a nurturing manner help create attachments between themselves and the children—the foundation for further social development. As they engage children in conversation, ask questions, and respond to them when they speak, they help children acquire cognitive and language skills. Not only do teachers need to be knowledgeable about the developmental characteristics of the children they serve, understand how to provide enriching experiences for them, and be able to communicate effectively with the children's parents about shared concerns, they must also be warm and nurturing people.

Ideally, those who care for young children consider themselves professionals, and have an educational background in child development and devising curricula. Continuing professional education by attending conferences, participating in workshops, reading professional literature, and sharing ideas and information with colleagues are all indicators of professional behavior. Partaking in activities like these builds commitment to the field, satisfaction with the work, and greater sensitivity to the needs of children.

Unfortunately, the low wages for working with children in child-care settings are a significant barrier to the quality of care (US Department of Health and Human Services and US Department of Education, 2016). Salaries for entry-level personnel are rarely higher than the minimum wage, particularly at national for-profit chains. The median salary for child-care workers was \$22,930 in 2016 (US Department of Labor, Bureau of Labor Statistics, 2016), with an average hourly wage of \$11.02. The more education a person has, the higher the salary. Still, starting salaries for child-care center teachers with college degrees are often less than half of what many entry-level public school teachers receive. Low wages have kept the educational level of caregivers from rising, and contribute to high job turnover in the child-care field. Programs that manage to retain their caregivers are generally of higher quality than those that have a high turnover rate. The Center for the Child Care Workforce is an organization dedicated to improving the quality of early care and education by promoting policies and research that ensure that those who work in child-care settings receive higher compensation and a stronger voice in their workplace.

CURRICULUM Although the relationship between caregiver and child is the most important process element, another mark of a quality program is the curriculum. Curricula in child care is generally understood as an approach to learning that includes both planned and spontaneous experiences that occur within the daily routine. Many child-care programs have faced the pressure of including direct academic instruction, and that leaves little time for child-initiated learning. Organizations such as NAEYC are committed to advocating for a play-based curriculum as the most appropriate for young children. Given the importance of the early years for children's physical, social, emotional, and cognitive development, the curriculum should reflect all of these domains.

In high-quality child-care programs, ample time is designated for outdoor and indoor play. Through their exploration and creative engagement with materials, children



In high-quality before- and after-school programs, the curriculum tends to be more informal and designed to meet the interests of the children enrolled.

Patrick, and Briley (2012) summarized the behaviors of effective teachers for this age group based on the theories of Magda Gerber and Dr. Emmi Pikler. Caregivers of infants and toddlers should focus on the following skills:

- Interacting during feeding, diapering, and sleep routines
- Observing and concentrating on the baby's behavior
- Reading the baby's unique set of signals and cues
- Responding to the baby with warm verbalizations and body language
- Waiting for the baby to respond

Video Example 4.2

Watch the video of a caregiver using the routine of diapering to build a warm and nurturing relationship. How does the caregiver's intentional use of language engage the child and transform this care routine?



develop the skills they will need for later school success. The teaching staff facilitates children's play by providing an environment with materials that encourage learning and engaging with children responsively. Large-group gatherings are used for stories, music, movement, and more, as well as for routines such as eating, toileting, and resting. Small groups provide for brief teacher-initiated experiences with science, cooking, and other opportunities to learn about the world. A well-planned curriculum will meet the needs of the children enrolled by considering their age, developmental levels, interests, special needs, and cultural backgrounds.

A quality curriculum in a program serving infants and toddlers requires that teachers be especially responsive to the rapid growth and change occurring during these years. Kovach,

Play and routine caregiving activities are the fundamentals of the curriculum for this young age group. A quality caregiver follows the lead of the children in determining when they sleep, eat, and need to be changed. Between these times, they interact with the infants and toddlers in an environment that has been set up to enhance the children's physical, cognitive, social, and emotional development. Children's cultures and families are also represented in various ways, highlighting child care as an extension of the home.

As children reach age 2 and move into the preschool years, the curriculum changes to meet their developing needs. The daily schedule includes opportunities for children to work individually and in small groups for most of the time, with some short periods of whole-group gatherings for stories and music. The room is arranged in activity areas, such as blocks, dramatic play, art, science, math, computer, language, and others. Each area is well stocked with interesting materials, which allows the children to make choices about what to do when they are there.

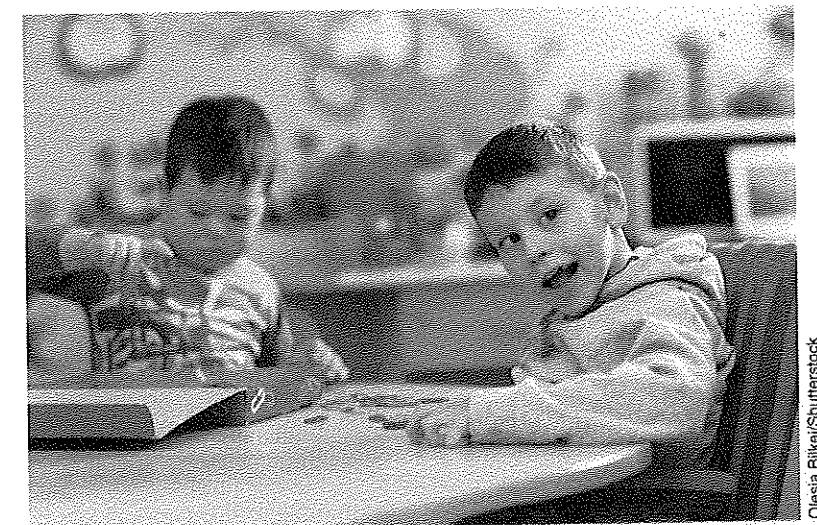
We will find that indoor and outdoor play are respected as the best way for children to learn. And you will find that teachers facilitate the children's play to enhance the social, physical, and cognitive benefits for development. See Table 4-2 for a sample of a preschool schedule that incorporates these aspects of a quality program for young children.

The curriculum of a high-quality, school-age before- and after-school program tends to be more informal than that for younger children, and will vary greatly depending on the needs and interests of the group. Centers or family child-care homes of high quality provide many toys and materials appropriate to the children's ages and interests, as well as lots of free time for children to participate in self-directed activities. In a center, the room is divided into activity areas, with space set aside for computer use and homework, and other areas devoted to construction, games, music, art, and other interests. The best programs for this age group are seen by the children as "clubs" where individual interests can be pursued.

Generally, the time before school is low-key, including breakfast and time for older children to participate in individual and small-group projects. After-school programs usually begin with a period of vigorous outdoor play followed by snacks, time for homework, and individually chosen activities. Allowing children as much choice as possible and providing many opportunities for socializing and pursuing interests are hallmarks of the most successful programs for school-age children. Table 4-3, which you viewed earlier, provides a sample school-age child-care schedule that incorporates these aspects of a quality program.

Full days in school-age care that occur during inclement weather, school holidays, and summers are often characterized by a camplike atmosphere. School-age children are developing many interests, and the more the program can support their choices, the more eagerly the children participate. In the highest-quality programs, child-care staff and the children's schoolteachers confer regularly and communicate on issues of mutual concern.

Although quality child-care programs may have somewhat different philosophical orientations, all will offer a curriculum that extends the cognitive and socialization processes that have begun in the children's families. For many children, child care is where they first learn to interact with people outside their families, and this marks the beginning of community socialization.



Play is a vital element in all children's learning. Child-care workers facilitate this play by providing a rich environment with a variety of well-planned choices.

FAMILY INVOLVEMENT Quality child-care programs recognize the importance of parental involvement and the strong need that families feel to be fully informed about their child's progress. In a quality program, parents are asked to share detailed information about their children as they come into care so that teachers can provide continuity with the home. A meeting between parents and teaching staff before the beginning of the program can help build rapport among the child's caregivers, which is essential to the success of the child-care experience. Continuing collaboration facilitates the continuity of experiences for the child and enhances the potential for meeting the child's needs.

Collaboration relies on communication, and it is the teacher's responsibility to establish many ways to keep families informed about their children. Because most parents bring in and pick up their child at the child-care setting, every day presents an opportunity to establish a relationship between the parent and the teaching staff. Once such a relationship is established, information about what is going on with the child can be regularly shared. In infant-toddler programs, parents and teachers often record information about the child in a book that is passed back and forth between the child-care setting and the home. There are also scheduled formal conferences for family members throughout the year in quality programs.

Parents will often welcome opportunities to become involved in the child-care program in ways that don't interfere with their work schedules. Making phone calls to other parents, donating recyclables, repairing toys, or washing the sheets used at nap time are all tasks parents may be willing to do. By becoming involved in these ways, families feel more connected to the program and more committed to supporting it. Potluck dinners, family breakfasts, workshops on parenting, and other events also can build family involvement.

EXAMINE YOUR BELIEFS AND PRACTICES

Think about experiences you have had with child care as a professional or parent. What feelings and thoughts do you associate with child care? How can you, as a professional, contribute positively to a quality child-care program you have observed?



Jules Selmes/Pearson Education Ltd

High-quality child care has a positive effect on children's emotional, social, and cognitive development.

Check Your Understanding 4.4

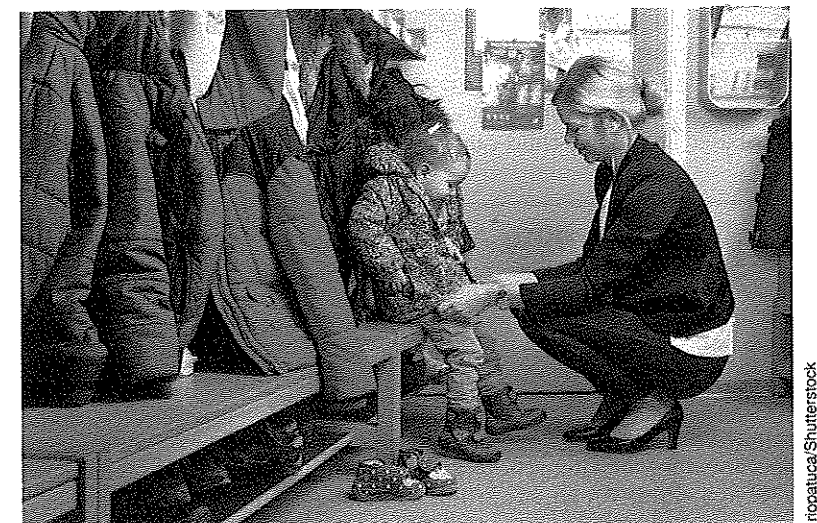
Click here to gauge your understanding of the concepts in this section.

MEETING THE CHALLENGES THROUGH COLLABORATION

In 21st-century America, it is no longer unusual for child care to be provided outside the home. The greatest concern for parents today is not that this type of care is inherently inferior, but that the quality of care their children receive might be substandard. Fortunately, numerous groups are working to resolve what has become a real crisis for many American parents—finding affordable quality care for their children so they can work. The National Association of Child Care Resource and Referral Agencies works with communities to improve the supply and quality of child care through its research, ongoing professional development opportunities, parent education component, and support of **accreditation**. Many other national groups, such as the NAEYC, the Children's Defense Fund, NAFCC, the National AfterSchool Association, and the National Child Care Information Center, are committed to improving the quality of child care.

Experts generally agree that quality child care is directly related to the adults providing the care. As noted earlier, however, the child-care workforce, which is 98% female and one-third women of color, is inadequately compensated (Gould, 2015). The average center-based teacher earns about \$10 per hour, and many teachers receive only minimum wage. Family child-care providers are even more poorly paid, and only 15% of all child-care staff has health benefits. Many providers must also contend with poor working conditions. Consequently, approximately one-third of those who work in child care leave the field each year. The shortage of early childhood teachers in public schools—because of reductions in class size and increases in prekindergarten programs in elementary schools—has increased the job opportunities for well-trained early childhood teachers. Therefore, many are leaving the child-care field to pursue better-paid positions in the public schools. The mission of the Center for the Child Care Workforce, which merged with the American Federation of Teachers' Educational Foundation, has been to improve the quality of child-care services by upgrading the wages, benefits, training opportunities, and working conditions for child-care teachers and family child-care providers.

School-age child care is receiving increased attention, and creative collaborations are developing to cultivate interesting and worthwhile programs for elementary and middle school children. Community-based organizations, schools, museums, universities, and other groups are also coming together to share resources and ideas for school-age care. The Children's Initiative of San Diego County, California, is a good example of a public-private partnership that has helped develop effective policies, programs, and services that support the health and well-being of children. By assuming leadership in the area of after-school programs, the Children's Initiative has helped San Diego develop the highest quality and capacity of school-age care in California.



riopataca/Shutterstock

Good child care must be available for all working families irrespective of their income.

Early education programs for 3- to 6-year-olds in the United States lag behind those of most other modern industrialized countries (GLYN, 2012). Changes in federal policies in the United States, most specifically funding for the CCDBG, are occurring, however, as the importance of early childhood care and education is being recognized. There are also some indications that businesses are beginning to recognize the importance of supporting the family life of their workers. The number of employer-sponsored child-care centers is very small, but a growing number of organizations are providing child-care assistance through referral services, partnerships with local child-care programs, and **backup care** for the children of employees. Changes in benefit packages, including flexible spending accounts that allow employees to pay for child care in pretax dollars, offer some financial support as well. The reality of quality care is that providing the service cannot be based solely on what parents can afford to pay. Families and programs need additional community and government support to make quality care available to every child.



Check Your Understanding 4.5

Click here to gauge your understanding of the concepts in this section.

Summary and Review

Child care is essential to family life. National surveys confirm that an increasing number of children are being cared for outside the home so that parents can work. Increasingly, as families recognize the importance of early experiences to children's later development, they are seeking care that goes beyond custodial to care that has an educational component as well.

Child-care arrangements include care that may be offered by a nanny, babysitter, or *au pair* in the child's home. Family child care occurs in the home of the provider and is offered for small groups of children, often of various ages. Center-based child care can serve children from infancy through school age, generally in classrooms designed for children of a particular age range.

Considerable variation exists in the quality of child-care services. All states have regulations to govern center-based and family child-care programs, but very little

oversight is provided for families who use in-home care. However, state regulations provide only minimum guidelines, and being licensed does not guarantee that a program is of high quality. Nationally accredited centers and family child-care homes, although still a small percentage of the total, serve as models of quality programs. Quality of care includes both process and structural components in the child-care setting.

The most important indicator of quality is the caregiver. The 30% annual turnover rate among child-care workers—a result of inadequate compensation, lack of benefits, and poor working conditions—is a serious issue facing child care. Improvement of the quality, affordability, and accessibility of child care is one of the biggest challenges facing families, schools, and communities, but increased awareness at the national level signals exciting opportunities for improvement in child-care options for the future.

How Does Learning About this Topic Help You Become a Better Teacher?

Why is it important for you to be aware of current issues surrounding child care? Early education is a field of study that includes both care and educational settings. Families, schools, and communities increasingly rely on child care settings to meet the needs of our youngest citizens. As a teacher, you may find yourself helping families who are struggling to locate before- or after-school care for their elementary school-age child. As an education professional, inform yourself about the various child-care options in your community. The National Association of Child Care Resource

and Referral Agencies (NACCRA) is an excellent starting point to help families locate child care. In Figure 4-2, we present some guidelines to help you advise parents on how to assess the quality of this care as well.

It is also important to remember that finding and affording child care is a family stressor. Make sure that you know about subsidized care and can help families find local community agencies that will help them apply for such aid if they qualify.

Suggested Activities and Questions

1. Perform an image search on the internet about Jane Addams' Hull House child-care facility and the Nobel Prize winner's revolutionary work in Chicago in the 1890s. Create a presentation that compares and contrasts the first US child-care centers to those used today. Use this guiding question: "How does providing child care improve the quality of life in communities?"
2. Research paid maternal leave policies in different countries. How does the United States compare? How does this issue affect families' child-care decisions?
3. What advantages does each type of child care offer families in high- and low-income groups? What are the disadvantages to each type of care?
4. Visit a child-care center and arrange to observe several classes. What elements of a quality curriculum can you see? What changes might you make?
5. Watch Art Rolnick's talk, "Economic Case for Early Childhood Development." How does his speech describe the positive effects of collaboration?

Resources and Websites

National AfterSchool Association

National Association for Family Child Care

National Child Care Association

Child Care Aware

The Afterschool Alliance provides information for establishing school-age programs and disseminates research to support after-school care.

The Center for the Child Care Workforce is committed to quality early care and education for all children by promoting policies and research and by organizing to improve the wages, benefits, training opportunities, and working conditions for those who work in child-care settings.

Child Care Exchange offers support to child-care directors and others interested in promoting quality child care through its journal, website, and international conferences.

The National Resource Center for Health and Safety in Child Care and Early Education promotes health and safety in child-care settings, and promotes standards guidelines for out-of-home care.

ExtendedED Notes produces a monthly newsletter, offers on-site training, and provides a selection of resources related to school-age programs.