HARD CHOICES: WORK AND CHILD CARE IN WESTERN MAINE

A STUDY OF FAMILY DAY CARE IN RURAL COMMUNITIES

By

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EXECUTIVE SUMMARY

INTRODUCTION

Child care is a major economic and social issue in the United States. Changes in the labor force, in the makeup of nuclear families and in the response to growing welfare caseloads have placed child care in the center of the public policy arena. Women

with small children are working outside the home in record numbers. Half of all marriages now end in divorce forcing many single parents out into the work place. State and federal welfare policy has shifted from an emphasis on income maintenance to recipient job training and education. For all

Women have a desperate need [for child care] and women have to work. They haven't given us a choice anymore really -- a working mother in Dixfield, Maine

these reasons, child care has become an essential service for increasing numbers of American families. Despite the attention that child care is receiving, little is known about the needs and challenges facing families living in rural areas.

Coastal Enterprises, Inc. (CEI), a community development corporation in Wiscasset, Maine, became interested in the problem of rural child care while implementing its Child Care Development Project (CCDP), a two-year demonstration to stimulate the development of affordable, quality child care for Maine families through loans and technical assistance. To be eligible for CEI services, child care centers and family day care homes had to be licensed. Yet CEI suspected that most of the family day care in Maine was unregulated. While the CCDP was demonstrating that financing and technical assistance could increase the amount and quality of child care, without a better understanding of the extent and dynamics of unregulated care it would be difficult to have an impact on the majority of caregivers in the state.

Little was known about unregulated child care and even less about care in rural communities. Within Maine, knowledge about rural child care was fragmented and anecdotal. What little evidence there was indicated that the problems afflicting child care delivery in general -- under-funding; a licensing system that some perceived as too intrusive and others saw as not going far enough to protect children; limited support to providers to upgrade their services; and the inability of low-income families to find and pay for adequate care -- was particularly acute in rural areas.

A review of Maine Department of Human Services child care licensing records indicated that families in rural counties had less access to any type of regulated care -- child care centers,

licensed homes or registered homes 1 -- then did families in urban counties. It was estimated that Cumberland, Maine's most urban county, had sufficient slots to serve 65 percent of the children of working mothers. Aroostook, Maine's most northern and remote county, had regulated slots for only 23 percent of the children needing care. In addition, urban counties had more centers and licensed day care homes and fewer registered homes relative to the population of working mothers than did rural counties.

To better understand the preferences and needs of rural working families and to develop policy recommendations that would strengthen rural child care, CEI decided to investigate the following questions:

- 1. What are the characteristics of child care service delivery in rural Maine - both "formal," i.e., state-regulated, care and the "informal" care being provided by relatives, neighbors and friends?
- 2. What are parents looking for in child care? How is it accessed in rural areas? What are the advantages and disadvantages of each kind of care?
- 3. What is the impact of state child care licensing and registration requirements on child care programming and on bringing informal care into the formal sector?
- 4. Who currently pays for the care and what effect does this have on the kind of care being provided?
- 5. What are the incentives and supports available to child care providers? How well do they meet the needs of rural providers?

The Research Design

To answer these questions, CEI incorporated both a

¹ In Maine, providers caring for more than two unrelated children in their homes must either be licensed as a family day care home or registered as a babysitting service. Both types of regulation require annual fire inspection and water testing. Neither provider may care for more than 12 children (a licensed provider can care for up to 10 children depending on their ages before she needs an assistant; a registered provider needs a second caregiver whenever there are more than five preschool children present). Both primary caregivers must be at least 18 years of age. In addition, licensed providers must undergo a physical examination. Licensed homes are inspected at least once a year by the Department of Human Services to ensure that basic health and safety standards are being met. The registered provider must sign a statement that she is in compliance with the law. The Department visits registered homes as time permits. If it receives a complaint about a registered home, it will investigate.

quantitative and qualitative component into its research design. Resources did not permit surveying all of rural Maine. Therefore a telephone survey was conducted of a representative sample of households with children under the age of 13 in four rural counties in the northwestern part of the state: Franklin, Oxford, Somerset and Piscataquis. These four counties were selected because they were among the most rural in a very rural state and they shared many geographic and economic features. Two hundred twenty-four adults who were knowledgeable about the child care decisions in their households were asked a series of questions about their use of child care. Because the sample was drawn from just four of Maine's 16 counties, the results cannot be applied to the state as a whole. However, the portrait of child care that emerged from the telephone survey is representative of these four rural counties.

While the telephone survey of families with children was able to answer general questions about the size of the unregulated child care sector, the amount and costs of care, and its availability and impact on work, it could not efficiently identify providers nor could it answer satisfactorily the more subtle but equally important questions concerning parental preferences. A second component of the research -- in depth, face-to-face interviews with both parents and providers -- was designed to answer these questions.

By analyzing the most current available demographic, economic and social data on the 41 towns in the four counties that had at least one regulated child care facility and comparing the results to the region as a whole, the community of Dixfield in northern Oxford County emerged as the most "typical" town and was selected as the site for in-depth interviews.

All regulated providers in Dixfield were identified through Department of Human Services' records and were interviewed. They were asked for the names of families they served and the names of other people they knew who babysat. This "snowball" sampling technique resulted in interviews with 21 providers (16 current and five former providers) and 20 working parents who were using child care. The advantage of this approach was that it identified unregulated providers -- it is notoriously difficult to locate individuals operating in the underground economy since they do not report their activities to public agencies. However, this approach did not necessarily produce samples of parents and providers that are representatives of their populations.

When the two groups of households -- the four-county random sample and the Dixfield area non-scientifically selected sample -- were compared on average household size, and household income, they were not statistically different. This finding increases confidence that the Dixfield area working parents are not greatly dissimilar from their counterparts in the rest of the region.

While Dixfield has characteristics that are similar to the region as a whole, the specific findings cannot be applied to all communities in the four counties much less to all rural communities in Maine. However, the great majority of women doing child care in and around Dixfield were interviewed. The consistent findings from these interviews increase confidence that the study recommendations will prove applicable to rural child care in general.

For the purposes of this study, the "Dixfield area" includes Dixfield and the surrounding towns of West Peru, Canton and Carthage. These are the communities from which Dixfield providers drew their clients. Contacts in these towns also produced additional providers.

Many of the parents and providers interviewed for the study were not immune from the ills that afflict so many families today -- unemployment, teen pregnancy, alcoholism, child abuse and domestic violence. Yet the community portrait that emerged is of families supported by extended family members, by their child care providers, and their employers. Child care in this rural community was predominantly familial and personal. Families frequently relied on other family members to provide primary or backup care. Often women started doing child care as a favor to a friend. Child care may have begun as a business arrangement but often developed

into a social relationship. Parents and providers in this rural community cared deeply for the children they were raising. In the interviews they repeatedly expressed their desire to improve the lives of children in their care.

Much of the reality of work and child care is expressed in the words of the providers and parents interviewed in the full report. It is hoped that The feeling that I'm doing something very worthwhile. That I'm getting to love these kids and see them grow and enjoy them. Knowing that I'm doing it right. That they are going to have happy memories of being here...and those feelings will last forever -- what a provider liked about doing child care

through their voices a picture will emerge of the values that strengthen these families and communities and the challenges they face in caring for children.

Western Maine

Child care does not exist in a vacuum. The form it takes, its availability and its cost depend on the social values and economic conditions of the community in which it operates. Western Maine is one of the most rural areas of a very rural state; it has one-third the people per square mile as the state as a whole. With its abundant forests and rivers, it historically has supported leather, textile and wood products manufacturing. Today, only the wood products industry remains a significant source of jobs for area

residents. With manufacturing providing nearly half the employment in the region, 57 percent of the jobs are in wood products, 16 percent in leather, and 10 percent in textiles. The paper mills pay the highest wages and hire mostly men. Cutting trees and selling the timber to the mills is another male dominated Women continue to fill the dwindling jobs in the occupation. textile and shoe factories, often earning just above minimum wage.

Western Maine lags behind the rest of the state on most socioeconomic measures: it has a higher unemployment rate, lower per capita income, a higher percentage of households on public assistance, a slower rate of population growth, and a lower percentage of adult residents with college degrees.

Families in Western Maine are struggling to make ends meet. Increasingly mothers work outside the home. Women with young children in the region work outside the home in greater proportions than do women living elsewhere in Maine. Yet regulated child care

is less available. A final complication is that low wages when coupled with child care and transportation costs can leave the family financially no better

off.

Finally, the area lacks educational, social service, and job training resources. the exception of one community action agency, home offices for these services are located outside the region. These agencies, all of which understaffed and underfunded, tend to focus their resources on the urban populations in their catchment areas and not on the

Some days I think I would love to have a full time job where I could earn full time pay...I could very well see that it would cost us \$75 a week for a sitter, so I couldn't take a job that paid \$5.00 or \$5.50 an hour. I'd have to have a good paying job but living in this area you'd probably have to travel a good 20 miles if you're a woman. A man would probably get a job at Jay [ten miles away] that paid enough

-- a Dixfield provider with children at home

people living in the small towns and on the back roads of Western Maine.

The Dixfield Area

Dixfield, a community of 2500 people, is located on the Androscoggin River, five miles downstream from Rumford, a paper mill town with a population of 7300. Rumford is the regional retail and employment center.

Dixfield's largest employer is a forest products business which provides 250 jobs in its lumber mill and wood harvesting operations. The school system is the next largest employer with over 100 employees. The third major business is a nursing home which employs over 70 people most of whom are women of whom half

work part time. Of the three major employers, only the nursing home offers child care benefits to employees. It operates a child care program in its basement and subsidizes one-third of employee costs. In addition to these large employers, Dixfield supports over 50 small service and retail businesses.

Most of the residents are employed outside of Dixfield either in Rumford at the Boise Cascade paper mill, its suppliers, or other wood products plants; or in the Lewiston-Auburn metropolitan area 40 miles to the south. Boise is the employer of choice in the Rumford area, paying the highest wages and providing excellent benefits. However, it is difficult to get into the plant because of limited job openings and fierce competition. Finally the future looks bleak because jobs will continue to be lost through the introduction of labor-saving technologies.

Boise and its suppliers create a two-tier labor market for area workers. Jobs at Boise start at \$11 an hour; the construction companies that service the mill pay as much as \$18 an hour for skilled labor. These wages are in sharp contrast to the irregular income generated by woods workers or the \$5-6 an hour being earned by nursing home employees. Residents who work in the small businesses that line Main and Weld Streets are earning even lower wages. Housing prices and rents are being forced up by Boise wages rates putting decent housing out of the reach of low and moderate income families.

Recent plant closings have reduced employment forcing the town's young people to leave the area in search of work. Seven factories have closed in the last six years in the Rumford area with the loss of over 1,000 jobs. For example, a wood products manufacturing company located just across the river in West Peru, closed in 1989. Over 200 jobs were lost when the plant moved to Mexico. Half of the employees -- 70 percent of whom were women and many of them single parents -- lived in Dixfield.

The regional job training agency has been retraining laid-off workers. Given the changing economy, most of these trainees have not returned to manufacturing jobs but have been hired in such service occupations as Certified Nurses Aides (CNAs) and commercial cleaning. Most of the trainees found jobs with wages and hours inferior to those that they had lost.

The resources in the regional publicly funded job training (JTPA) and job placement (Job Service) agencies are extremely limited relative to the demands being placed on them by the local economy. Both agencies have lost staff due to cuts in federal funding. In November, 1990, the Rumford labor market recorded an unemployment rate of 11 percent -- nearly twice the state rate -- yet there were only 42 slots in a state-funded retraining program for county unemployed workers. The training program for welfare recipients was unable to enroll new clients because the demand for

services has been so great and funds for child care and transportation were exhausted.

The unemployment and underemployment resulting from a changing economy, the decrease in public services, and the obstacles inherent in rural living have had a marked impact on working families and child care in western Maine. A description of child care arrangements in general and the nature of this impact in particular is summarized below.

CHILD CARE CHARACTERISTICS

In the four counties making up Western Maine, 44 percent of families with children under the age of 13 reported using child care because they were working, another three percent while they attended school, 38 percent to run errands and socialize, and 15 percent reported they never used care. Not surprisingly, working parents are the heaviest users of care: over half (53 percent) used child care daily.

Types of Care: Family day care was the predominate form of care, followed by relative care. Nearly half (46 percent) of the families in the four-county survey were using non-relative care outside the home (family day care). One-third of the families were using relatives to care for their children. Twelve percent were using non-relatives in their homes (frequently teen-agers) and only four percent were using child care centers.

Among the Dixfield area families, 66 percent were using family day care at least part of the time. Nearly half used relative care either solely or in combination with non-relative care. In addition, family members were frequently used for backup care. While mothers were working, fathers cared for the children on weekends, afternoons and evenings or during periods when they were laid off (a regular occurrence in an area where woods and mill work predominate). No families used child care centers because none exists in the Dixfield area. The Dixfield nursing home operates a child care program in its basement, but with slots for only 12 children, it is licensed as a family day care home.

Most families were using unregulated care. Close to threequarters (72 percent) of the parents in the telephone survey reported that their providers were unregulated. Only 58 percent of Dixfield area families were using unregulated care but this difference could be the result of the snowball sampling technique, i.e., people may have been less likely to identify unregulated relatives as baby sitters.

From the provider perspective, caring for relatives' children is still common in this rural community. Slightly more than half of the Dixfield area providers were caring for at least one related

child. Unregulated providers were slightly more likely than regulated providers to be caring for relatives.

Only 39 percent of the four-county sample were using full-time care (defined as 30 or more hours a week). Many Dixfield parents were using part-time care -- not because they were working part time -- but because they chose to work different schedules to reduce their need for paid care. Often children would be in paid care for relatively short periods of time. Given the seasonal nature of woods work, fathers would become the primary caregivers when they were laid off.

Types of Providers: Child care experts recognize the rich variety of family day care providers and have categorized them along the following continuum: The first type of provider cares for relatives' children, does not think of what she is doing as a job and has no interest in caring for non-relatives' children. second group comprise women who have never worked outside the home and take care of other people's children as a natural extension of their own parenting role. The third group is made up of women who have worked outside the home but, once they have children of their own, want to stay home to raise them. The fourth group of providers is characterized as "entrepreneurial." These providers see themselves as running a business and seek to increase their income by enrolling the maximum number of children, participating in public subsidy programs like Title XX and the Child Care Food Program, and making use of home-based business tax write-offs. The final classification is of professionally trained providers who run structured programs focusing on learning activities.

Dixfield area providers were distributed along this continuum in the following way:

Relatives	2
Continuing maternal role	2
Raising own children	11
Entrepreneurs	5
Professionals	0

Child Care Tenure: Turnover among regulated family day care providers is reported to be as high as 30 to 50 percent a year and most providers stay in business between two and five years. Dixfield area providers had been doing child care for an average of 4.1 years. Their experience ranged from one month to eleven years. However, five providers, including the two with the longest tenure, said they had done child care sporadically.

Prior Child Care Training and Experience: Two providers were professionally trained, one in early childhood education and the second in elementary education. In addition, one provider had a college degree in community health and worked during the school year as a teacher's aide in special education. Another four

providers had planned careers working with children or infants but either had not begun or not completed the training. Thirteen providers had neither aspired to nor received any kind of formal training. Six mentioned teen baby-sitting as experience that prepared them for child care and another five pointed to the experience they had gained as parents.

Prior Work Experience: The harshest critics of women who "just baby-sit" suggest that they do this work not because they have an interest in or aptitude for child care but because they need to earn income and cannot get jobs doing anything else. This characterization did not apply to Dixfield area providers. Only two women had never worked outside the home. The remaining providers had a variety of work experiences similar to that of the mothers they were serving.

Reasons for Starting Child Care: Over half of the women said that their reason for doing child care was so that they could stay home with their own children. Three of these women also mentioned the problems they had experienced in finding and arranging care for their own children when they were working. Several providers got started doing child care unintentionally. Three women had made the decision to stay at home with their own children without planning to do child care. Once people learned that they were no longer working outside the home, they were asked to baby-sit. Five providers said they got started doing child care because they had been asked to by a relative or a friend.

Child care experts view such providers as the least professional and least committed to their work as providers. This was not the case among Dixfield providers. One woman who was asked by a relative to keep her new baby "until she could find somebody," is still caring for children ten years later, is registered, and considers what she does her job. Two women became providers because they simply wanted to care for children. Finally the woman with the degree in early childhood education became a family day care provider because that was what she was trained to do.

Plans for the Future: There is no question that provider turnover is a problem in the Dixfield area. Five women -- two of whom were regulated -- expressed ambivalence about continuing to do child care. The woman trained in early childhood education was discouraged because she could not earn enough money. Half of the women currently providing care estimated that they would stay in business another three to five years (typically until their youngest child was in school). There was no difference between regulated and unregulated providers in response to this question. The two women who had never worked outside the home said they intended to stay in business for the foreseeable future.

Three providers expressed interest in moving beyond the type of care they were currently giving. One provider who said she planned to do child care "forever," would like to expand her family

day care program and hire an assistant. Another who was on Aid to Families with Dependant Children (AFDC) and provided before and after school care for a niece would like to do full-time care as a way to get off welfare. A woman who was caring for two nieces would like to start a preschool program for children with special needs (she had two learning disabled sons). Two former providers had thought about expanding their programs. One of them who had stopped doing child care when she remarried and gained three stepchildren in addition to her own two, was thinking about going back into child care with her husband.

Provider Hours: A characteristic of family day care is the extraordinarily long hours providers work. Since they must accommodate the schedules of a number of working parents, providers often find themselves working 12 hours and more a day. On average, Dixfield area providers worked 11 hour days. Not only were the hours long but they are were without respite. Only the nursing home program was staffed with more than one worker at a time. Employment patterns in this rural community contributed to long and irregular hours. Shift work at the mills, working "shutdown" (seven days a week, twelve-hour shifts doing temporary maintenance work at area paper mills), and the time parents have to travel to their jobs all affected the length of time children needed care.

The Number of Children in Care: A primary reason family day care is regulated is to limit the number of children so that they can receive adequate attention. A fear often expressed about unregulated care is that children are being "warehoused." There was no evidence of this exploitation of children from either the telephone survey or the face-to-face interviews. While telephone survey responses reflect parent perceptions of the number of children in care rather than an actual census, no parent reported an unregulated provider caring for more than seven children. In the Dixfield interviews, no unregulated provider reported caring for more than nine children (including her own) at one time. In both samples, unregulated providers had, on average, fewer children than regulated providers. In the four-county telephone survey regulated providers were reported to have an average of 8.6 children and unregulated providers 2.2 children. In the Dixfield

area regulated providers were caring for an average of 7.7 children and unregulated providers 4.4 children.

This self-regulation is particularly impressive since providers feel pressure to accept more children both from parents often desperate for care and from their own need to earn income.

I want to do what's best for them, not what's best for me. That's why I have limited my number of kids because I don't believe it's fair to coop them up at my house. I probably could be making more but I don't feel it's fair to them.

Programming: Providers were asked to describe how they spent a typical day. Responses covered a range of child care styles. Some days consisted primarily of free play; others involved a more structured sequence of activities. The fixed events around which most days revolved were snacks, meals and nap time. Several providers mentioned that they were not running education programs, emphasizing socialization over academic preparation.

A major finding of the study is that neither formal training nor regulatory status were good predictors of the kind of child care Dixfield area providers were delivering. For example, the

provider trained in early childhood education had been doing child care for four years, was only registered for one, and ran an unstructured program. She stressed the importance of flexibility and free play. with the elementarv education degree was legally unlicensed, caring for only one day care child while educating her own school age son at home. At the same time, the five women who ran the most structured and varied programs were professionally trained and three of them were unregulated. These regularly scheduled reading, crafts, and school

We do names and numbers and shapes. Four year olds usually know that. Kids are smart. All these kids know how to do their names now. And numbers and songs and games. Then we get to color and cut and draw. Every season we got to make Halloween pumpkins and Santa Claus. Playing is really important, getting along and sharing. Some kids will bring their own toys and don't want them to touch them. So we have to get over that -- an unregulated provider

preparedness activities such as learning letters, numbers, shapes and colors.

Child Care as a Business: Advocates who want to increase the professionalism and improve the public image of family day care recommend that providers establish written program policies, enter into written contracts, and maximize their incomes by claimed business expenses on their tax returns. Few Dixfield area providers followed these practices. Only three providers had ever used written contracts and only one, the nursing home program, was doing so at the time of the interview. Most providers felt they did not need written agreements because of their familiarity with their clients. However, three providers were aware of the benefits of contracts and said they would consider using them with new families or if they were to do child care again. Only one provider volunteered that she was careful about keeping track of her business expenses. Most of these women felt uncomfortable even thinking about caring for children in business terms.

Rewards for Doing Child Care: The rewards Dixfield area providers obtained from their work were overwhelmingly child-centered. Nearly nine out of ten said the best thing about doing

child care was being with children or watching them grow. providers also found satisfaction in what they were able to give children: love. a nurturing home environment and Six mentioned the structure. advantages to their own children in having playmates. commented on the affection they

I think it's just the individual child. Every one of them is different and seeing them grow from the time they're like this till they grow up. I just get satisfaction in helping them grow everyday.

received in return from the day care children, an obviously important reward for these nurturing women.

Disadvantages of Doing Child Care: Notably, few women mentioned problems with the themselves. children commented on the length of their day, how stressful or demanding the work, or how tired they became. Another three mentioned tied down at Several providers reported that problems with parents was the hardest thing about doing child care. Three said their greatest concern was observing effects of what they considered the children's poor home lives. This was particularly difficult for women who had chosen to stay home to raise their own providers children. Two

After awhile it's very stressful. They need, need, need all the time, which is fine. They're children. Children need and someone's got to provide for that. The biggest thing is feeling like it's day after day after day. If I can get break, I'm much better -- a provider working alone

I think dealing with the parents was the most difficult. The kids were great. It was trying to tell the parents if I needed anything. I couldn't get across to them -- a former provider

mentioned their inability to communicate effectively with parents. Three providers mentioned the wear and tear on their homes and another two commented that they did not like to discipline their day care children. Two providers felt child care was taking time away from their own children. Only two providers mentioned limited income as a disadvantage. An assumption often made about family day care is that lack of interaction with other adults is a disadvantage. However, only one provider mentioned isolation from other adults as a problem while four other providers volunteered that lack of contact with adults was an advantage.

Family Support: Eight of the providers mentioned direct involvement of other family members in their child care programs. Very little conflict was reported. The most frequent was the jealousy experienced by a provider's very young child at having to share her with other children. However, it is also true that two women terminated their businesses due to family constraints, one because her own family size increased through remarriage and a second because she wanted to participate in her son's after school

activities.

What Providers Need to Make Child Care Easier: turnover in family day care, it is important to know what providers would like to make doing child care easier for them. providers had specific suggestions as to what would make doing child care better for them: Three providers thought that working with another adult would make a difference. However, one of them was concerned that two people could not earn enough money given the current rules governing adult/child ratios. She suggested that a third licensing category be created for facilities serving up to 15 to be staffed by two adults. Six women thought that having space in their homes solely for child care was the answer. However, they could not finance the expansion on their own. Five women mentioned that they could use more indoor and/or outdoor equipment. specifically mentioned swing sets. Two women also mentioned fencing in play areas in their yards. Finally one women suggested that if employers subsidized the cost of care, it would allow parents to purchase good care and help good providers stay in business.

Child Care Supply and Demand: The lack of adequate child care for working families in this country has been well documented. Rural western Maine is no exception. Seven out of ten working parents in the telephone survey reported that suitable, affordable child care was either very difficult or almost impossible to find, or was simply unavailable. Nearly a third (31 percent) of working and non-working parents said they would use more care if it were available. The difficulty in finding adequate care was reflected in the number of families who said they had left their children in situations with which they were not entirely comfortable. More than one out of four (28 percent) said this had happened to them and, of this group, more than half said it happened either occasionally or once in awhile.

Without exception, Dixfield area providers who had been in business for some time and had built up a reputation had no difficulty finding children. At the time of the interview, the nursing home program, which is only licensed for 12, had seven children on a waiting list.

I turned a lot away. Some of the women got really angry because they'd just get so frustrated at not being able to find child care. I don't know how many mothers with small babies called me. They couldn't find anyone for their babies.

Parents shared this perception that good care was hard to find. One parent looking for infant care spent three days on the phone calling 25 people. Another woman was having a problem finding appropriate summer care for her school age daughter. Arranging care was especially difficult for families new to the area who have not yet developed social networks. Evening care was

hard to find for a mother who worked as a waitress. Two mothers said they might have to quit their jobs if they lost their current providers. The problem has been exacerbated by a reduction in two traditional sources of child care: family members and teen-agers. Three mothers mentioned that relatives were no longer available because they had taken jobs outside the home. Another three mothers commented on the difficulty of finding teen-agers to care for children during the summer. A problem facing several families was the need to change providers when their children started kindergarten (if their current providers lived outside their school districts, school buses would not deliver the children to them).

PARENT CHARACTERISTICS

Parents indicated they preferred providers they knew and trusted. The importance parents placed on knowing their providers emerged from both the telephone survey and the face-to-face interviews. Four-county respondents were asked to rate a list of factors that enter into the decision to use a particular child care provider. Here is the list, ranked in order of importance to parents:

- knowing the provider before leaving the child
- sharing discipline ideas with the provider
- providing nutritious food
- the provider's location
- structured play and learning
- cost of care
- flexible hours
- set nap times
- state regulation
- the provider's religious affiliation or beliefs

These parents were looking for providers who shared their values (agreeing on discipline). Next in importance was the characteristics of the program (nutritious food, structure) and then factors that benefit the parents (location, cost, and flexible hours) With the exception of location, most parents care more about those things that affect their children rather than things that affect them. The least important factors were state regulation and religious affiliation.

Respondents were then asked which of the factors was most important to them in choosing care. Overwhelmingly, parents chose knowing the provider as their most important concern (71 percent). No other factor came close: sharing ideas on discipline and the provider's location each earned five percent, the cost of care and attention to children four percent each, and running a structured program, religious beliefs, and state regulation two percent.

Dixfield area parents were asked what was important to them in

how their children were cared The overwhelming concern was that their children receive adequate attention and affection the provider. parents wanted than more custodial care: five mentioned that they did not want providers using television to keep their children entertained. Fourteen of the 21 parents interviewed mentioned the importance of

I know those two people that babysat him. I've known them all my
life, so I kind of trust them.
There are other people that I'd
probably be scared to death the
whole time working because I
wouldn't know them. I try to leave
him with somebody I know.

having their children's physical and emotional needs met. This was one reason they valued family day care. Three parents volunteered the opinion that child care centers were too large and institutional (one was using the nursing home program which was the closest thing the area had to a center).

Six parents mentioned knowing their provider and sharing parenting styles. Ιt was important to providers as well that they share values child about rearing discipline. Some providers ensured a good match by not

You bring them up just the way their parents do, you want to go by their morals and your own and, hopefully, it's together.

taking children they did not know or rejecting children from incompatible families. Another provider used the parent interview to determine the degree of fit.

Five parents recognized the importance of showing children affection but wanted it balanced by the imposition of clear behavioral boundaries. Six parents said that constructive discipline was important to them (four parents specifically said they did not want their children spanked). Seven parents wanted their children to participate in a variety of activities including arts and crafts, school preparedness, outside play, and free (creative) play. Six parents valued cleanliness and nutritious food.

Parent Satisfaction: only were Dixfield area parents able to articulate what was important to them in child care, they also had a good deal to say about their current providers. All 20 parents currently using child care expressed some degree satisfaction with of their current arrangements. Again. most of the behavior that

She pointed out different things to them and showed them how to make things in the woods. They make cut outs and she teaches them how to do these things. She'll talk to them. She just doesn't tell them, "Go play." She does things with them.

pleased the parents was child-directed as opposed to behavior of

benefit to parents. One parent using the nursing home program was particularly pleased at the staff's willingness to confront problems in their early stages. Parents frequently used their children's reactions as a barometer of care — they were happy if their children were happy. Several spoke enthusiastically about the variety of activities their providers offered children. Some parents remarked on the positive personality characteristics of their providers. Six parents did mention factors that benefitted them directly: five mentioned their providers' convenient location and one the low cost of care.

Parent Dissatisfaction: Parents were also able to identify disadvantages of their current providers. One mentioned the distance she had to travel but said the care was worth it. Another parent who worked at the nursing home mentioned a disadvantage of on-site care: initially she found the children's activities distracting, especially when she heard them crying. Another found a disadvantage in the size of family day care. She indicated it was hard on her when her family day care provider -- not having an assistant -- was unable to care for children when her own child was sick. Another was having difficulty adjusting to a new provider who was more structured than the ones she had used in the past.

Evaluating and Changing Providers: In the four-county telephone survey, most parents knew their providers before using them for child care. Of those who did not, most visited the provider and obtained references before making a decision. Child care advocates worry that parents will continue using unsatisfactory care because of the difficulty of finding alternatives. This is not the norm in the Dixfield area. Of 19 changes in provider for which explanations were recorded, 11 were initiated by parents and, of those, six were the result of dissatisfaction with the provider.

Accessing Child Care: By far, the chief method of finding child care in the Dixfield area was word of mouth. Either parents asked someone they knew to care for their children, heard that someone in the community was doing child care, or asked friends for recommendations. Providers often served as referral sources. When they were full, they would refer callers to other providers. Because of its high visibility, the nursing home program served as an informal information and referral source.

When parents seeking care have not developed a social network, their options are few. A survey of the local weekly paper found only three advertisements for child care openings in the Dixfield area during the nine week interview period. Only one parent who was interviewed found her provider through the newspaper. A formal resource and referral agency, Finders Seekers, is located 40 miles away. Only one parent mentioned using the regional resource and referral program located 40 miles away. She was referred to the nursing home program only to be told it did not take infants.

Impact of Work on the Family and of the Family on Work:
For parents in a rural area, arranging child care can be a continuing challenge. Working mothers get up early, get their children up and ready, drive to the provider and then to work. Fathers are often involved in the transportation of children as well. In the Dixfield area, fathers in eight of the 21 families regularly transported children. Due to numerous plant closings in the Dixfield area, parents often have to travel considerable distances to work. Four-county respondents were asked how far they had to travel from home to provider and from provider to work. One-third travelled between 40 and 60 miles round trip each day and one out of five reported traveling over 60 miles.

There is no question that women feel caught between their need to work outside the home (14 of the 19 women who were working said that their earnings contributed to meeting their families' basic needs) and the burden it placed on themselves and their families. Several women expressed anxiety over leaving their children, although some could see benefits to child care as well.

My house is always a mess. We don't eat a nice meal every night like I'd really like. It was something I always used to do before I worked. Those days are gone. I'm on call. I work weekends. So things just don't get done around the house. Maybe if I could ignore it, but it drives me crazy.

One out of three (32 percent) of the four-county survey respondents reported having missed days from work because of child care problems in the previous year. On average they had lost 4.8 days. In the Dixfield interviews, 13 parents mentioned that they had lost days at work because a child was sick or a provider was not available. Seven mothers mentioned that fathers would take time off from work and three said other family members were available to care for sick children.

Nearly all Dixfield area parents reported having supportive supervisors. Only two mothers mentioned that their supervisors were unsympathetic to child care demands. Four parents thought their supervisors were understanding because they had children of their own. The parents who had flexible work schedules or had supervisors who allowed them flexibility were better able to handle child care problems.

Preference for Staying at Home: As difficult as it was for these working mothers to manage their dual responsibilities, many reported enjoying the work they did. Their work was an important part of their identity. Sixteen Dixfield area mothers worked out of economic necessity. They were asked if they had a choice would they prefer to stay at home. Of the 16, ten said they would prefer to work. Significantly, six of these women who work full time would prefer to work part time or part year.

PARENT AND PROVIDER INTERACTION

Communication between parents and provider is critical because they share child rearing responsibility. The importance of the provider's role cannot be overstated. Preschool children may spend more than half their waking hours in child care.

I really enjoy my job. It's challenging. I just wish I could afford to stay at home a little bit more with the kids. Not maybe the full 40 plus hours. I could work maybe three days a week but that doesn't fit in right now.

Sharing information about a child's behavior, health, and emotional needs is essential to continuity of care. Equally important is the willingness of both provider and parents to express their own, sometimes conflicting, needs. In family day care, many factors can mitigate against open communication: the parent's tight schedule, lack of provider or parent assertiveness, differences in parenting philosophy and style, and lack of understanding and respect for each other's role.

Communication Between Parents and Providers: For the most part, both parents and providers in the Dixfield area reported that they communicated regularly. Most parents wanted to know how the day had gone for their children. Most

I really think that one of the most important things is to always keep wide open communications with the parents.

providers regularly reported on the children's daily eating and sleeping patterns and whether they had been disciplined. Several providers showed sensitivity to parents by asking them in advance if they wanted to be told about infant and toddler milestones (first step, first word, etc.), by making sure they mentioned positive as well as negative behaviors, and by inquiring about how the parent's day had gone. Several parents showed a sensitivity to their providers in that they reported making a point of asking them about other things in their lives besides child care. A small number of providers and parents did not take the time to exchange information on a daily basis, however.

Showing Respect: Often family day care providers complain that parents do not respect their work. This attitude is evident when parents do not pay on time, are late picking up their children, bring children when they are sick, or do not provide the food and clothing the children need during the day. A few Dixfield area providers voiced these complaints but they were in the minority. Of the 21 providers interviewed, five mentioned that they had experienced one or more of these problems. The significance of these behaviors should not be minimized, however. Two providers left child care because of lack of cooperation from parents.

Role Conflicts: One of the ironies in family day care -and а potential source of tension between providers and parents -- is that women who believe strongly that mothers should be at home raising their own children are caring for the children of women who have "chosen" not to. At its extreme, this belief extends to a condemnation of working women as bad parents who place their own needs above those of their children. Several providers in the Dixfield area expressed variations on these beliefs. Two women who felt most strongly about their decision to stay at

All I want is a parent who respects my job...I just expect the children to be picked up by the time they say they're going to be, and I think it's only respect, if they're going to be late that the parent call. Because I don't mind if they say they have to get groceries or something, but what I don't like is when people show up an hour and a half late and you're wondering did they get into an accident and you start getting frustrated because you've had this child for more than 10 hours and you feel used.

home with their own children expressed ambivalence about caring for other people's children.

Handling Conflict: Providers and parents exhibited great variation in their ability and willingness to handle disagreements. One provider reported an incident that troubled her but her response was to do nothing. Another provider found it especially difficult to confront parents when she first started doing child care. The most revealing

It was when I was first starting baby-sitting, so I wasn't one that was real forceful about saying, "Will you pay me this money, I deserve it." And I'd let it go and let it go and eventually I'd tell them I got to get done [doing child care].

disagreement involved a clear conflict of interest. A provider wanted a three year old to take a nap. She needed the break during the day and believed the child needed the rest. The mother claimed that, if the child slept during the day, he would be awake much too late in the evening giving her no time for herself. Both provider and parent were understanding of the other's needs. They were able to approach each other about the conflict and work out a compromise.

When providers do not screen families for compatibility, the results can be traumatic for both parties. One provider who said she initially took every family who came along later was in the difficult position of having to tell parents that she could no longer care for their children because of behavioral problems and because they took up too much of her time. The decision still troubled her. She was not doing child care at the time of the interview but thought she would be more selective is she were to do it again.

CHILD CARE REGULATION

Regulation cannot guarantee quality care but it can protect the health and safety of children. The challenge is to create a family day care regulatory system that meets this objective without intruding unnecessarily into the private lives of families. A second issue facing family day care is enforcement capacity. Regulations will not protect children if the state does not have the resources to recruit and inspect family day care homes. As was reported above, nearly three out of four providers in rural western Maine are unregulated. A major purpose of this study was to examine the effects of the regulatory system on providers and what could be done to make regulation more attractive to parents and providers.

Parent Perspectives: Regulation, as it is understood by parents, is not valued highly. In the four-county survey, only one out of five working parents said it was a very important consideration in choosing care while nearly half (46 percent) said it was not at all important. The interviews with Dixfield area parents gave some insight into why reactions to regulation were so varied.

The 18 parents who were paying for child care fall into three categories: those who thought regulation was very important, those who thought regulation was important in some circumstances, and those who had no use for regulation. Three

I think it's very important... I know that somebody out there somewhere is doing something to look out for my children's best interests.

parents were in the first category. One said she would not have used her provider if she had not been licensed. Two of these parents liked the idea that their providers had to meet certain standards (although the second parent had used an unregulated provider in the past and was pleased with her). One did not know her provider before using her for child care; the other did not know her provider well. The third parent thought regulation was important because she wanted to use the child care tax credit.

Seven of the 18 parents thought it was not important for their current providers to be regulated (even though some of them were). Regulation was not an issue for five of these parents because they knew and trusted their providers. They did say that if they were using someone they did not know they might want her to be licensed. A sixth parent thought she might use a licensed provider if she lived in a big city (again because she was less likely to know the provider). And the seventh parent was not opposed to regulation in principle but was concerned that in practice it did not go far enough in insuring quality care.

Eight parents were in the last category. Regulation would never be important to them because they would always rely on their own judgments and the reactions of their children in choosing a provider. Three parents had used providers who had become regulated while their children were enrolled and they could not see that it had made any difference.

I'd rather have them in an environment where I know they're being loved than to have them in some place that's licensed and has 3 bathrooms and spic and span floors and someone who just ignores the children and takes my money -- a parent using an unregulated provider

Provider Perspectives: Ten of the 21 providers interviewed were or had been regulated. Half of these women had initiated the regulation process before starting child care and half had been in business for some period of time before becoming regulated. new to the community, became licensed because she thought it would help her attract business. (It is not clear that this is an effective strategy given the parents' opinions cited above; in fact, when this provider lost one of her two families, she had trouble finding a replacement and resorted to advertising in the Another woman became licensed as part of her local paper). business plan; she was the only family day care provider who advertised her business through a sign on her lawn. Two others were persuaded to become regulated, the first by a relative and the second by a friend, both of whom had been through the process and reported how easy and beneficial it was.

Of the providers who had been operating for some time before becoming regulated, one was reported to the state for not being regulated, another became licensed in order to get homeowners insurance, another became registered so a parent could claim the child care tax credit and the fourth was encouraged to attend child care classes and became registered as a result. The ninth provider had been licensed in one location and registered in another but could not remember what had prompted her initially. She chose registration when she moved because of the more favorable adult to child ratio.

Most of the providers who became regulated had to make relatively few changes to meet the health and safety requirements. However, one woman decided to stop doing child care, in part, because of requirements which she considered unnecessary and burdensome. After the initial apprehension over being "inspected," most of these providers found the visits tolerable and the licensing worker helpful.

The reactions of the 11 unregulated providers to becoming licensed or registered were significant. Only one adamantly refused to consider the possibility. She said she would reduce the number of children (to operate legally) or stop altogether

rather than be regulated. However, two others had already filled out application forms and three more said they had looked into it. Misinformation about the requirements had kept several providers from pursuing licensing. The most ambivalence was expressed by a provider who in all other respects was the most "professional" of the women interviewed both in terms of her philosophy of child care and the way she was running her program. She had filled out the licensing application and had gone to get her physical (a licensing requirement) shortly before the interview. Her doctor questioned her about why she needed to get a license to do something in her own home. This reaction stopped her in her tracks. At the time of the interview she was having difficulty finding reasons why she should be regulated. She was planning to report her income so families could get the child care tax credit, she was full, her parents were happy with her (and one to whom she had gone for advice had also discouraged her from applying), and she did not think the Child Care Food Program was enough of an incentive.

COSTS OF CHILD CARE

Child care providers earn very little money. Among child care workers, family day care providers are the lowest paid. The primary reason that providers earn so little money is that parents bear virtually the entire cost of care.

I set the rate [\$140 a week for 3 children] because I felt any more would be too much to ask from one family.

Providers are reluctant to charge more than what they think parents can afford. In the Dixfield area this concern translated into the providers' subsidizing the care by consistently charging less for the second (and third) child, not charging when children were absent, not charging when parents were late, and not charging parents for food. One exceptional provider did get paid when children were absent but could not bring herself to charge a low-income parent when the parent was on vacation and did not need child care.

Providers also found it difficult to negotiate fees with friends. The ambivalence over child care being a business arrangement was especially clear with regard to fees.

I debated so hard about raising my prices...That's where I'm not businesslike enough. Because they're all my good friends. If I didn't know these people then it would be easier for me to change them.

Provider Fees and Income: In the Dixfield area, two providers did not charge their relatives for care. The 14 providers who charged by the hour averaged \$1.34. One licensed provider charged \$1.00 an hour for infant care. The six providers who charged by the week were paid, on average, \$70 for two children. A provider's income depends not only on her rates but on the number and ages of the children and the time of year. The average gross income (before business expenses were deducted) was \$148 a week. Even women who were caring for five or more children only averaged \$192 a week. When divided by 55 hours (the average hours worked a week), these providers were grossing \$3.50 an hour -- less than Maine's minimum wage.

Even though providers earned very little, it was an essential contribution to the family budget for more than half of them. Many were quick to add, however, that they were not doing child care just for the money.

The money I take in helps pay the mortgage and it helps pay the bills. If I didn't have this income, we would really be hurting -- a provider

Parent Costs: Working parents in the four-county survey who were paying for care (13 percent reported receiving free child care) averaged \$1.47 an hour. In Dixfield, parents averaged \$1.57 an hour. There was no significant correlation between the ability to pay (family income) and child care costs. This point can be illustrated by comparing two Dixfield area families who were paying for full-time infant care. One mother brought home \$170 a week and paid \$70 (or 41 percent of her income) for child care. The second mother netted \$300 a week and paid \$45 (or 15 percent of her The first family's total annual income was income) for care. between \$20,000 and \$25,000. The second family's income was over \$50,000. The downward pressure on child care rates were as much the providers' reluctance to raise them as parents' reluctance to pay more. Two parents had to urge their providers to accept more money.

Subsidies: Parents bear almost the entire cost of child care in this country. Experts agree that one way to increase the number of family day care providers and the quality of programs is to pay providers more money. Given the income of most working families, the only way to achieve this objective is to increase child care subsidies. Maine parents, depending on their income, have access to five sources of subsidies: Title XX for low-income families; a state-funded voucher program for low-income families; a program for welfare mothers in training; employer benefits; and child care tax credits. Of the regulated slots in Maine, it is estimated that the government subsidizes only eight percent for low-income families and employers subsidize approximately four percent. Most of the subsidies are based on a sliding fee scale so parents contribute to the cost of care depending on their income.

Even though one out of five of the families interviewed was earning under \$20,000 a year, there was little evidence of child care subsidizes in the Dixfield area. At the time of the interview, only two Title XX slots had been assigned to the nursing home program. One of the parents interviewed was using one of these slots. No families were using vouchers, although the nursing home program had had one such family in the past. One single mother on AFDC expected to receive subsidized child care when she returned to school in the fall.

An unexpected finding in a community of 2,500 was the on-site, employer-supported child care program. The nursing home was subsidizing 35 percent of the operating costs of the program. In addition, it provided space, heat, electricity and laundry services. Fees were competitive with area family day care providers for families in the community: \$1.50 an hour for one child and \$.50 for each additional child. Employees of the nursing home were charged two-thirds of the cost, or \$1.00 an hour for one child. At the time of the interview, three of the eight families using the program were employees. One of the parents interviewed was benefiting from this subsidy.

The child care tax credit is the largest source of federal child care support for families. Yet only four Dixfield area respondents mentioned that they used it. While the child care tax credit benefits working families, it has the potential for penalizing providers. Many low-income providers are part of the underground economy and are reluctant to file income tax statements even though they may not earn enough money to pay taxes. Parents must include the provider's social security number when filing for the tax credit. This conflict may force parents to choose between a provider they like and the tax credit. In Dixfield, one parent had used the credit in the past but since her current provider was not reporting her income, was now foregoing the subsidy.

CHILD CARE SUPPORT SERVICES

There are four publicly funded support programs available to Maine's family day care providers: the USDA Child Care Food Program, the Title XX Child Care Program (although the great majority of slots are assigned to child care centers), Resource Development Centers (regional child care resource and referral agencies) and Child Development Services (regional screening and evaluation programs for handicapped preschoolers). Community Concepts, a community action agency, administers the first three programs in a three-county area which includes Dixfield. The fourth program is administered by Opportunities for Preschool Children, a county program.

Child care training is available for providers with Title XX slots, for Food Program participants and for providers listed with

Resource Development Centers. Providers must be regulated to receive these services. Title XX and Food Program monitors make home visits to participant providers. The Community Concepts monitor reported that her counseling and technical

The Food Program person was real nice. She gave me stacks and stacks of stuff to read. She was real helpful.

assistance to home-based providers went far beyond program requirements. The licensing worker and she were the only child care professionals most regulated family day care providers ever saw.

Dixfield area interviewees who used these programs were pleased with them. But the programs reached relatively few of them, due, in part, to limited resources. There was one Food Program and Title XX monitor for all of Oxford County and she served only a small proportion of the women doing child care in the county. Another factor limiting program impact was the reluctance of regulated providers to participate. Only four of the nine eligible providers had been part of the Food Program. Concerns ranged from the need to serve hot foods in the summer to the hassle of persuading children to eat the same food. Some providers found it simpler to have children bring their own snacks and lunches.

Community Concepts runs regular workshops for child care providers but they are delivered in larger communities an hour's drive from Dixfield. Scheduled for evenings and weekends, they are difficult for women to attend who work eleven hour days and have family commitments on weekends. The nursing home program staff and two regulated

I was so excited taking those classes because all these day care providers were getting their feelings out and telling how they had the same problems. I couldn't wait to go every time they had them and that helped me a lot.

family day care providers had taken advantage of Community Concepts sponsored training and/or the annual conference of the Maine Family Day Care Association. The participants found the training useful. Another regulated provider had taken a course in CPR for children at a nearby hospital before starting her child care program.

Finders Seekers is the area Resource Development Center that provides information to parents looking for care and to providers with slots to fill. Located 40 miles away, regulated providers can be listed with the center. Eligible Dixfield area providers were not active users of the service primarily because they were almost always full. Those who had vacancies did not find it a good source of referrals. Only one provider reported that a family had found her through Finders Seekers.

One of the services offered by Child Development Services'

Opportunities for Preschool Children is an evaluation of the developmental progress of all children in child care centers and family day care homes in Oxford County. Even though six of Dixfield area providers had attempted to care for children with serious physical and mental disabilities, none was aware of the program. Yet it was obvious that these providers -- with the best of intentions -- were unable to provide adequate care for these children without assistance.

summary, In support services were limited in this rural community. The interviews underscored that services can be counterproductive if they are not tailored to the needs of the local community and if there is strong provider support network. For example, the child care training which the two regulated providers received had the desired effect: each was empowered by the experience to

A lot of the ladies [who attended the training] lived in cities, and they were talking about how they didn't take certain children because they interviewed the parents, and if the children were spanked at home, they didn't take them. And the prices they got. I don't think there's enough children to be able to do that here.

change the way she was doing child care. However, both providers experienced negative reactions to these changes from parents. One provider decided she was going to require written contracts. She got parents to sign them -under protest -- but then could not bring herself to enforce them. The second provider decided to raise her rates after attending a training session. When two parents refused to agree to the increase, she quit doing child care altogether. In both cases, provider views of child care as a profession had been changed by their training but they were returning to a community that did not share their new perspectives. Apparently the training had not helped them work with parents to make the transition. The provider who left child care suggested that the best way to deliver training and technical assistance would be to visit provider homes on a regular basis. Yet this is very far from what existing programs are able to offer.

CONCLUSIONS

The worst fears of child care advocates were not substantiated in this study. While three-fourths of the child care in rural western Maine was unregulated, Dixfield area care was not merely custodial. It ranged from predominantly free play to organized group activities. The great majority of providers cared about children and were committed to their work. Parents also were concerned about the care their children received. They chose providers who shared their values, who gave their children attention and showed them affection. At the same time, the situation is far from ideal: child care was hard to find; an

alarming proportion of existing providers either had decided to stop working or were seriously thinking about it; and many parents earned too little money or worked too irregularly to pay providers a decent and stable wage.

Positive Findings: A consistent theme running throughout the parent and provider interviews and in the responses to the telephone survey is the extent to which rural families rely on social networks. Most of these families have lived in the area all their lives or have returned to raise their families. They know the other members of their communities and use them to provide child care.

The following findings are particularly encouraging: Children are not being warehoused in unregulated homes. For the most part, parents and providers communicated daily about the children's condition and progress. While regulation is not highly valued by parents (because in most cases they knew and trusted their providers), the women who were regulated did not find it a difficult or intrusive process. It is equally encouraging that most unregulated providers were not opposed to becoming regulated. Similarly, while few regulated providers participated in the Child Care Food Program and child care training, those that did were enthusiastic about these services.

A consistent message was that families who had some choice over their work and child care decisions were better able to balance the demands of work and family than were families with less control over their lives. Providers who could control their hours and enforce their fee structures were more satisfied with their work than providers who did not have this kind of control.

Finally, neither formal education of providers nor state regulation were associated with either more satisfied parents or more structured child care programs.

Negative Findings: The labor market in rural western Maine contributes to highly unstable businesses for child care providers. Many of the jobs are low paying and irregular. The higher pay mill jobs are scheduled for the convenience of corporate owners not working families or child care providers. Only 39 percent of the working families in the telephone survey used full-time care. Parents frequently relied on relatives to share child care responsibilities. Subsidized care was very limited. Knowing that families were hard-pressed, providers only charged half the fees of their urban peers. For all of these reasons, it was difficult for providers to generate a decent income. In the Dixfield area, women caring for five or more children grossed less than the minimum wage.

The economics of family day care are coupled with other problems facing providers. Their days are long and the work

demanding. Some have difficulty communicating with parents, dealing with discipline and handling conflict. As a consequence, provider turnover was high, contributing to a serious child care shortage. Families new to their communities who had not developed a social network had particular difficulty finding care.

While most providers were not opposed to regulation, there was very little pressure from parents on providers to become regulated. Additionally the support services associated with regulation were too limited to offer much incentive. Yet the new sources of federal funding for child care require providers to be regulated. While it is not yet clear how well these programs will satisfy the need for subsidized care, it is imperative that rural low-income families have access to them.

Regulatory issues surfaced in the study and must be addressed if more rural providers are to benefit from federal and state child care funding streams:

- cost of meeting licensing requirements
- misconceptions parents and providers have about licensing
- confusion over the differences between licensing and registration
- difference in the way licensing and registration define the adult/child ratio

RECOMMENDATIONS

Five recommendations emerge from this study that, if implemented, could reduce provider turnover, bring more providers into the regulated system, and improve the quality of care for Maine's rural children.

I. Create a comprehensive family day care support network.

This study has demonstrated the strengths of the existing providers in rural western Maine. Given these strengths, the supply of child care could be increased and provider turnover reduced by strengthening the existing child care support network. However, for providers to be receptive to support services, methods of delivery must be tailored to provider needs. The following steps should be taken to achieve this family day care support network:

A. Convene a roundtable of child care advocates and providers.

Coastal Enterprises, Inc. should convene a roundtable of child care advocates, service deliverers and providers to review the study findings and recommend service delivery models tailored to the needs of local providers and communities.

B. Conduct a family day care support service demonstration.

The Maine Department of Human Services should fund demonstration projects to test the effectiveness of delivering support services to family day care providers.

For example, in-home services could be delivered by an experienced family day care provider recruited from the community. She could provide support in areas requested by the provider. The study suggests that such subjects as child discipline, child development, communicating with parents, and assertiveness would be likely candidates. The peer helper could also provide information on other resources in the area. Her car could become a toy, book, and video lending library. Both children's and provider training videos could be available. The peer helper could also provide respite care so the family day care provider could take time off periodically. A final responsibility of the peer helper could be to become highly visible in the community and be available to educate both parents and providers about such subjects as the value of state regulation and their joint roles and responsibilities in raising children.

B. Strengthen the existing family day care advocacy group.

The Maine Department of Human Services should fund a full-time director for the Maine Family Day Care Association (MFDCA). Presently the MFDCA is made up of dedicated and professional family day care providers but its effectiveness is limited by its lack of staff. With proper staffing, it could become a major player representing family day care in state-level child care coalitions and could advocate more powerfully for increased financial support for family day care from public and private sources.

C. Support the establishment of regional child care coordinating councils.

Currently, the Department of Human Services has a Child Care Advisory Committee that reviews and comments on proposed state child care policy. To better reflect the diversity of Maine's communities, the Department should decentralize this critical review and recommendation function. This step is especially important in integrating and coordinating the new sources of federal child care funding. At a minimum, these regional groups should include representatives of parents, providers, public schools, Title XX and Food Program delivers, Resource Development Centers, Department of Human Services, Child Development Services, Child Abuse and Neglect Councils, the Cooperative Extension Services, and employers. Regional groups should be charged with assessing existing child care services and developing strategies improving service coordination. Such issues as school transportation and scheduling of half-day kindergarten should be addressed. Employers who hire large numbers of women should be

encouraged to offer child care benefits to their employees. Social and health service agencies should be encouraged to offer their services to family child care providers.

II. Provide child care subsidies for all low-income working families.

The only way for family day care providers to stop subsidizing care by working at below minimum wage is for all low-income working parents to receive child care subsidies. Interviews with providers suggest that they set their rates based on their perceptions of what their least well off families can afford to pay. If subsidies were available to low-income families, providers could increase their rates. Attendance of low-income children in family day care programs would stabilize. It is possible that middle and upper-income families would be willing to pay more if the community base rate were raised.

While this is an ambitious goal, it may not be that far out of reach. The value of pre-school for low-income children is now recognized by the business community as well as the human service community. The recent expansion of the Head Start program was achieved with bipartisan support of the Bush administration and Congress. Funding will be available for all eligible four year olds in the next seven years. The new sources of child care funding -- the Child Care and Development Block Grant and funding for families at risk of receiving AFDC -- are steps toward universal subsidies for low-income working families.

As a first step, the Department of Human Services should conduct a study to determined the size of the working parent population that is eligible for child care subsidies.

A second step would be for the Department to fund Resource Development Centers to be sources of information about eligibility for existing subsidy programs. Providing a single point of entry for low-income parents would go a long way toward maximizing utilization of existing sources of child care support.

III. Provide financial and technical assistance to upgrade family day care programs.

Through the Child Care Development Project, Coastal Enterprises Inc. has demonstrated that family day care providers are capable of operating their programs as businesses. Of the 22 family day care businesses CEI has financed, 19 (86 percent), are financially sound. Only one loan has been written off and two are in default. In order to make financing available to more family day care providers, CEI should train local organizations to provide the services that have proved successful in its Child Care

Development Project. These organizations could include the Resource Development Centers, Small Business Development Centers and local banks.

Frequently only modest investments are needed to upgrade homes to meet licensing requirements. However, many low-income families cannot afford to make these improvements on their own. The Department of Human Services should make small grants available to these families for this purpose.

Not all providers placed the same value on maximizing their income from family day care. However, even those providers for whom income was important knew very little about the basics of business management or the tax advantages of running a home-based business. This lack of knowledge was not limited to women who were operating under the table but included regulated providers. One way to make family day care more profitable is to make such information accessible to providers. The Small Business Administration supports a network of Small Business Development Centers throughout the state. CEI should train SBDC business counselors to work with interested family child care providers.

IV. Provide easily accessible basic education about child care regulation and child care issues to parents, existing providers and potential providers.

The following low-cost steps could be taken to provide information about child care in rural communities.

A. Enlist local providers as resource and referral sources.

Department of Human Services licensing workers and regional child care services staff should identify the most visible licensed family day care provider in each community and ask her to be a source of local child care information. She would need to be willing to maintain a supply of materials on licensing and registration and to answer questions about her child care experience. The study suggests that she could also function as a referral source to parents looking for child care.

B. Use local newspapers to educate parents and providers about child care issues and recruit providers.

Every rural community in Maine receives either a daily or weekly newspaper. Regional Resource Development Centers could be responsible for contributing materials for periodic columns on child care to demystify and explain the licensing process and the Child Care Food Program, and to cover such topics as discipline, child development, provider-parent communication, assertiveness, child abuse and neglect, children with special needs, etc. CEI's recently published Family Child Care Handbook could be used as a resource for these columns. Equally important, the column could be

used to educate parents about how they can help their providers better care for their children. It could also be a vehicle for disseminating information about the new child care subsidy programs. The names, addresses and phone numbers of the Department of Human Services Licensing Unit, the regional Resource Development Center, the regional Child Care Food Program sponsor and the local family day care provider described above would be included in the newspaper column.

V. Resolve the discrepancies between licensing and registration requirements.

It may not be politically possible or desirable to eliminate registration as a family day care option in Maine. While registration is a minimal regulatory process, it does bring providers into the formal sector whom otherwise might continue to operate underground. However, state requirements should not allow registered operators to make more money than licensed operators. A glaring discrepancy -- and the one that attracted Dixfield area providers to registration rather than to licensing -- is that registered providers do not have to count their own preschool children in determining the number of children they may legally care for; licensed providers must include their own children. This discrepancy allows registered providers to care for more children and, therefore, earn more money.

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CHAPTER ONE

INTRODUCTION

I hope you can really do something [about increasing support for rural child care]. I'm sure there are women who have a desperate need, and women have to work. They haven't given us a choice anymore really. (A Dixfield area working mother)

This study grew out of a concern that, despite the growing awareness of the critical role child care plays in our society, little attention has been paid to the needs and challenges facing rural families: families with two parents working outside the home; families headed by a single parent; and families whose income is supplemented through child care. The causes of the dramatic change in the way our young children are cared for have been well documented. The increase in the work force participation of mothers with young children in the work force has resulted from economic and social changes of the last thirty years. Today many two-parent families need a second income to make ends meet; the rise in the divorce rate has meant an increase in the numbers of single mothers working outside the home; and the growth in employment of women in all age groups means that fewer extended family members are available to provide child care. The shift in federal and state welfare policy from income maintenance to recipient job training and education -- and the demand for child care that this change has created -- has also contributed to the public debate.

Coastal Enterprises, Inc. (CEI), a community development corporation in Wiscasset, Maine, became interested in the connection between child care and economic development as it pursued its mission to support the development and expansion of small businesses and to create economic opportunities for the state's low-income residents. In its effort to target jobs created through its finance activities to recipients of Aid to Families with Dependent Children (AFDC) and other economically disadvantaged people, CEI found that low-income single parents were having difficulty staying employed because of the lack of accessible, affordable child care. CEI's initial foray into the child care world was its 1987 mail survey of state regulated child care providers. The survey revealed that child care was a \$40 million industry in Maine, employing nearly 5,000 people. Close to half of the child care providers responding to the survey expressed interest in obtaining financing to expand their businesses and a

¹ Fifty percent of all marriages end in divorce. Arlie Russell Hochschild, "The Woman with the Flying Hair," Swarthmore College Bulletin, February 1991, p. 7.

² It is estimated that 80 percent of the children in family day care are in the homes of strangers. Esther Wattenberg, "Characteristics of Family Day Care Providers: Implications for Training," Child Welfare, Vol. LVI, No. 4, April 1977, p. 211.

majority wanted training in small business management.

Building on these findings, CEI launched its innovative two-year Child Care Development Project (CCDP) in 1988. This \$740,000 public/private demonstration was designed to stimulate the development of affordable, quality child care for Maine families and to assist individuals seeking to become economically self-sufficient through running a child care business. The project has confirmed that many child care providers are eager to expand and enhance their businesses. Since its inception two and a half years ago, the project has had over 300 inquires about financial assistance, has received 112 written applications and has financed and provided technical assistance to 45 center and family-based child care providers. Individual loans and grants have ranged in size from \$569 to \$150,000 and have been used to build centers, renovate existing facilities, add rooms to homes, fence in play yards, purchase equipment and toys, repair and install heating and water systems.

A part of CEI's mission is to evaluate the results of its community development activity and to pursue further the questions raised through the evaluation process. The purpose of the resulting research activity is two-fold: to increase CEI's effectiveness as a deliverer of innovative community development programs and to inform the wider community on policy issues that emerge from the research.

This study of rural child care is an example of this kind of "practitioner research." It is the direct result of the early experiences implementing the CCDP. To receive CEI funding, child care programs had to be licensed. Yet CEI suspected that most child care in Maine is unregulated. The CCDP was demonstrating that financing and technical assistance could increase the amount and quality of care. However, without a better understanding of the extent and dynamics of unregulated care, it was difficult for the project to have a significant impact on the majority of caregivers in the state. A review of the literature revealed that little was known about unregulated care and even less about care in a rural setting. Research on the effects of out-of-home care on young children typically focused on licensed child care centers located in urban areas. When family day care has been the subject of research, it, too, has been treated as an urban phenomenon.

Within Maine, knowledge about rural child care was fragmented and anecdotal. However, what little evidence there was indicated that the problems

³ See the report of the National Child Care Staffing Study, Who Cares? Child Care Teachers and the Quality of Care in America. Coordinated by the Child Care Employee Project, this study examined child care in 227 centers in five metropolitan areas. The purpose of the study was to explore how employees and working conditions affect the quality of center-based child care.

⁴ The most comprehensive study of family day care was the 1976-1980 National Day Care Home Study commissioned by the U.S. Department of Health and Human Services. Regulated and unregulated family day care providers and working parents in Los Angeles, Philadelphia and San Antonio were interviewed.

afflicting child care service delivery across the state -- underfunding; a licensing system that some perceived as being too intrusive and that others saw as not going far enough to protect children; limited support to providers to upgrade their services; and the inability of low-income families to find and pay for adequate care -- were particularly acute in rural areas.

From the Maine Department of Human Services child care licensing records, it was clear that rural families had fewer choices than did their urban counterparts. Within the regulated sector, not all families had equal access to the three types of care available in Maine: licensed centers, licensed family day care homes, and registered baby-sitting services. For example, in 1990 Cumberland County (which includes Portland, Maine's largest city) had only 21 percent of the state's females of child bearing age but contained 40 percent (or nearly twice its share) of child care center slots. It had 27 percent of the licensed family day care home slots but only 12 percent of the registered baby sitting service slots. In contrast, rural Somerset County with four percent of women of child bearing age had only one percent of the center slots and 3 percent of the licensed home slots. However, it had almost twice its share (7 percent) of the registered slots. Rural families have less access to child care centers and to licensed family day care homes.

By comparing an estimate of the number of children under six with mothers in the work force with the number of regulated child care slots in a county, it was also possible to determine if the availability of any kind of regulated care varied from county to county. Again, a difference was found between urban and rural counties. Statewide, this rough calculation suggested that well over half (57 percent) of preschool children were in informal care. In Cumberland County, there were sufficient regulated slots to serve 65 percent of the children whereas in the remote Aroostook County there were regulated slots for only 23 percent of the children.

In spite of this abundance of unregulated care, attention in the Maine child care community has focused almost exclusively on expanding the licensing

⁵ Maine offers family day care providers two options if they care for more than two unrelated children: they must either be licensed or registered. Both options require annual fire inspection and water testing. Neither may care for more than 12 children (a licensed provider may care for up to ten children depending on their ages before she must have an assistant; a registered provider must have a second caregiver whenever there are more than five preschool children present). Both must be tested for tuberculosis; in addition licensed providers must undergo a physical examination. Both primary caregivers must be at least 18 years of age. Licensed homes are inspected at least once a year by the Department of Human Services to ensure that basic health and safety standards are The registered provider must sign a statement that she is in compliance with the law. The Department visits registered homes as time permits. If it receives a complaint about a registered home, it will investigate.

requirements for family day care homes to promote a higher standard of care. While this direction is primarily motivated by a genuine concern for the safety of children, it has two potentially negative consequences. First, providers who find the requirements too intrusive can choose the registration option or simply operate illegally. Second, this perceived professionalization and institutionalization may be contrary to parents' preferences. They are, after all, the child care decision-makers. If they are not convinced that licensed care benefits their children, they will not seek out licensed providers.

To better understand the preferences and needs of rural working families and to develop policy recommendations that will strengthen rural child care, CEI proposed to investigate the following five questions:

- 1. What are the characteristics of child care service delivery in rural Maine both "formal," i.e., state-regulated, care and the "informal" care being provided by relatives and friends?
- 2. What are parents looking for in child care? How is it accessed in rural areas? What are the advantages and disadvantages of each kind of care?
- 3. What is the impact of state child care licensing and registration requirements on child care programming and on bringing informal care into the formal sector?
- 4. Who currently pays for the care and what effect does this have on the kind of care being provided?
- 5. What are the incentives and supports available to Maine's child care providers? How well do they meet the needs of rural providers?

The Research Design

To answer these questions, CEI incorporated both a quantitative and a qualitative component into its research design. The quantitative component consisted of a telephone survey and the qualitative component face-to-face interviews. It is important to note that CEI did not intend, nor has it attempted, to define and measure objectively the quality of child care in rural western Maine. It was designed to learn directly from the residents in this part of the state about their experiences providing or using child care and to listen

⁶ The Maine Department of Human Services has recently revised its child care center, family day care home, and nursery school licensing requirements. A task force, representing a wide range of program operators, family day care providers, public officials, and children's advocates, drafted a set of minimum regulations to be applied to all three types of facilities. The former child care center regulations, which were the most comprehensive, served as a starting point for the core rules. The resulting revisions which apply to family day care homes as well as to the more institutionalized facilities reflect this reliance on center rules.

to their concerns, values and desires.

The Quantitative Component: Resources did not permit a survey of all of rural Maine. Therefore, a telephone survey was conducted of a representative sample of households with children under the age of 13 in four contiguous rural counties located in the northwestern part of the state: Franklin, Oxford, Somerset and Piscataquis. These four counties, comprising the Western Mountain Region, were chosen because they are among the most rural in a very rural state. In 1980, 75 percent of the population in these counties lived in rural areas or towns with fewer than 2,500 people compared to 53 percent statewide and 24 percent nationwide. Together they comprise a distinct geographic and economic region within the state. Chapter Two contains a detailed description of this area, called the Western Mountains Region.

In addition to standard demographic questions, 224 adults who were principally responsible for making decisions about child care in their household or knew a lot about such decisions were asked:

- how much care was being used by the family and for what purpose
- who provided the care, for how long and for how many children
- what was the provider's regulatory status
- what was the cost and the availability of care
- what were the significant factors in choosing care
- what was the impact of child care on work

Because the sample was drawn from just four of Maine's 16 counties, the results cannot be applied to the state as whole. However, the portrait of child care that emerges from the telephone survey is representative of these four counties. Appendix A contains a description of the sampling procedure and a copy of the questionnaire.

The Qualitative Component: While the telephone survey reached a random sample of households and was able to answer general questions about child care, it was not an efficient means of identifying child care providers nor could it answer satisfactorily the more subtle but equally interesting questions concerning parental preferences and choice that CEI wanted to answer. A second component of the research -- in-depth face-to-face interviews with both parents and providers -- was designed to answer these questions.

CEI chose to select one community in the Western Mountains Region in which to conduct face-to-face semi-structured interviews. By collecting the most current demographic, economic, and social data on the 41 towns in the region that had a least one regulated child care facility and comparing the results to the region as a whole, the community of Dixfield in northern Oxford County emerged as the most "typical" town. The variables included in the comparison consisted of:

⁷ U.S. Department of Commerce, Bureau of the Census, 1980 Census of Population, Volume 1 Characteristics of the Population, Chapter C General Social and Economic Characteristics, Part 21 Maine, PC80-1-21, June 1983.

- total population
- number of children under thirteen
- number of children under six
- percent women in labor force with children under six
- percent population change
- average household size
- per capita income
- percent per capita income change
- unemployment rate
- number of families receiving AFDC
- number of households receiving public assistance (AFDC and/or Food Stamps)
- percent of adults completing high school
- number of state regulated child care facilities
- number of state regulated child care slots
- number of children per child care slot

Identifying unregulated providers was a challenge. It is notoriously difficult to locate individuals operating in the underground economy because they do not report their activities to public agencies. Unlike the list of regulated providers maintained by the Department of Human Services' Child Care Licensing Unit, there is no way to find out who is caring for children informally other than by word of mouth, advertisements in local newspapers and notices on store bulletin boards. CEI began by contacting and interviewing the six regulated providers in Dixfield. At the end of each interview the provider was asked for the names of parents who were using her for child care and for the names of other baby sitters in the area. Knowledgeable community members, including the town librarian and staff at a local health center, were also asked for names. "snowball" sampling technique led to interviews with 21 current or former providers and 20 working parents living in the Dixfield area. One unanticipated finding enriched both data bases. Several women had worked outside the home and. at other times, had done child care. These women were asked both the questions designed for working parents and those for providers. All of the providers interviewed were female. One of the working parents interviewed was male. Both wife and husband participated in two parent interviews.

In the semi-structured interviews, which lasted from one-half to one and one-half hours, working parents were asked how they found their provider, why they chose her, how much they were paying for care, how they interacted with the provider, what was most important to them in how their children were cared for, the value, if any, of regulated care, the amount of support they received from their employer, and their preference for work outside the home. They were also asked about their jobs, their total family income and the importance of their earnings to the family.

Providers were asked how they got started doing child care, their plans for the future, the number of children they were caring for, what were the most important things they did for children, how much they earned, how important their income was to their family, why they were or were not regulated, and, if regulated, their experiences with regulatory and support agencies. A description of the methodology used to select Dixfield is contained in Appendix B and copies of the parent and provider interview questions are in Appendix C.

The snowball sampling technique was valuable because it identified unregulated providers. This approach did not necessarily produce samples of providers and parents that are representative of their populations as a whole. While Dixfield has characteristics that are similar to the region, the findings cannot be applied to all communities in the four counties much less to all rural communities in Maine. However, CEI is confident that it reached the great majority of women doing child care in and around Dixfield. All identified providers were contacted and all but two were interviewed. Because the major findings were so strong and consistent, CEI is also confident that the resulting recommendations to increase support to family day care providers are applicable to rural child care in general.

When the two groups of households -- the four-county random sample and the Dixfield area non-scientific sample -- are compared using three socioeconomic variables, they look very much alike. This finding increases confidence that the Dixfield area working families using child care are not greatly dissimilar from such families in the rest of the region. Table 1 compares the two groups of households by average size, income and number of preschool children.

Table 1
Working Parent Households Using Child Care
in Western Maine

	Four- County	Dixfield Area
Average household size	3.9	3,9
Household income \$20,000 or less \$20,001 to \$35,000 Over \$35,000	% 19 48 33	% 20 40 40
Number of children under six None One Two Three	33 52 14 1	15 55 30
Number of cases	99	20

The average household size was identical in both groups. The difference

⁸ Neither woman was currently providing child care. One failed to show up for the interview and the other's work schedule could not accommodate an interview.

in household income was not statistically significant. The Dixfield group tended to have more preschool children and this difference was significant.

The Strengths of Rural Families and Communities

Much of this report will document the economic, social and personal stresses felt by these rural families as they struggle to balance the demands of work and home life. The interviews revealed that they were not immune from the ills that afflict so many families today: unemployment and underemployment, teen pregnancy, divorce, alcoholism, child abuse and domestic violence. However the portrait that also emerges from this study is of families supported by extended family members, by friends, by child care providers and by employers. Half of the parents and nearly three-quarters of the providers interviewed had lived in the area all their lives. Of the 20 working families interviewed, 14 had family members in the immediate area. The parents of eight couples lived next door or in the same house. Five families had built homes or lived in mobile homes on their parents' land. Families were there in emergencies as well. In the course of one interview a low-income mother mentioned that she had had to stop work for medical reasons eight weeks before her son was born. Her husband was unemployed and they had no income. They were told they would have to wait 30 days for food stamps. "Luckily I have nice parents and they brought me care packages for the rest of the 30 days," she commented.

Child care in this rural community was familial and personal. Families relied heavily on other family members to provide primary or backup care. Women often started doing child care as a favor to a friend. Familiarity produced a comfort level in the child care arrangement that benefitted both providers and parents:

Most of the children that I have had, I know all the parents. I mean, they're living right here. I like to know the family. ...It's just like one big family and I enjoy it.

Working parents often helped each other manage the often complex task of transporting their children. One provider described how parents share the responsibility to get children to and from child care:

Sometimes the grandparents will pick up the children going to nursery school or one of the mothers take two little girls to dancing. She could get out of work early so she'd pick up the two girls. Then when she couldn't do it the grandfather would come and get them. Sometimes the other mother would do it if they were really stuck. Of course, these girls (the mothers) all know each other, too. Most of them went to school

⁹ See Chapter Two for a description of the area employment picture. Three women were divorced single parents; for another five couples it was a second marriage; one woman, now married, had been an unmarried mother. Five women had been in their teens when their first child was born. Five women volunteered there was alcoholism in their families. Two women mentioned that they had been sexually abused as children.

together.

She then went on to explain a difference between urban and small town child care:

This is different from city baby-sitting. I mean, you can't leave those children, you know. And you may not know whoever comes to pick them up whereas here I have family members, aunts, uncles, grandmothers.

Another provider responded to a question about communicating with parents:

This is a small town. We know everybody so I think it's just like talking to your sister or something.

Child care often begins as a social arrangement which is reinforced as the families become even better acquainted. This parent described her relationship with her provider:

We're friends. We've been good friends for awhile... If I've got a problem I go to her. If she's got a problem, she'll call me up.

Or child care may begin as a business arrangement and develop into a friendship.

We also socialize a little bit with our sitters. We still see Mary 10 (her first provider), go over in the evening, my husband and I and the kids to visit her and her husband. Ruth (her second provider) still has us up to her pool. We're still all friends. Mary called and took Liza (her daughter) for the day after Thanksgiving. We invite them all to our children's birthday parties and we get invited back. Wendy (her third provider) had a party, lawn games tournament, last weekend and we went, so we do socialize. We've wound up being friends.

For some providers the line between family members and day care children can actually become blurred. Here are two examples:

I really get emotionally involved with the children, they're sort of, they're part of my own family. So I want to open up the whole home up to them because they are just like my kids. [Two former day care children] were pretty well part of our family. I learned so much from them and they were so close to my children. They called me their second mom...I've had these children (current day care children) for almost a year. Honestly, when they're not here, it feels funny. If they're home sick or something, I call to see how they're doing...If you can't love the kids and have them all be part of your family, then you shouldn't be in the day care business anyway.

I've always wanted a boy. He's my nephew (the child for whom she is caring). I went with her (his mother) when she had him and he has just been my little boy ever since.

¹⁰ Respondents' names have been changed to protect their privacy.

Three providers took advantage of what their neighborhoods = and their families -- have to offer.

We've got a pool next door and we go swimming, because they all can swim good and we've got life jackets. That's in the summertime. We've got sheep next door. We go visit them. We take walks to town because there's a path here that goes right to the store here. It's a five minute walk so we walk to town.

Afternoons we'll go to the park and that's just up the street here a short ways and we'll stay there for an hour or so. The mother on call [at the hospital] lives on the way to the park so if she needs to I tell her to bring her daughter to the park.

A lot of the days we spend at my parents' home on the river swimming, playing ball. If something comes up, we go and do it.

Caring for Children: Its Value in a Rural Community

Repeatedly, both parents and providers expressed their desire to improve the lives of children. In an area of Maine offering few opportunities for advanced education, parents are determined to improve their career options and income potential. Two low-income mothers are currently enrolled in college programs. The first is attending night school while holding down a full-time job:

I decided to make more of a career for myself. I'm trying to get us ahead in life. I've got a decent mind. I told my husband when he was unemployed that I would try to get into a college because there are grants out there and you can get help. (She has a Pell Grant and a Guaranteed Student Loan.)

The second is a single AFDC mother with two daughters:

I worked at Ames Department Store for five years, and you can't do nothing on \$4 an hour, plain and simple. There was no way to support the kids and pay the rent and actually be able to afford food and car and that stuff, so I decided to go to school. From the time I was five years old I was either going to be a missionary or I was going to be a nurse. I don't want to be a CNA (Certified Nurses Aide, the occupation recommended by the job training agency where she is enrolled) because I don't want to be stuck with the crap jobs. I might just as well work at Ames for the rest of my life than to go to a nursing home and do that. I know with an RN I can support my family, I can support my kids. Hopefully we'll be able to have a little bit more than what we got now. I've got plans, it doesn't take much to make plans. (She has been taking pre-nursing courses at the University of Maine at Farmington on a part-time basis and is about to begin a two-year nursing program as a full-time student in Lewiston 30 miles away). It's going to be a rough two years but I'm ready for it. Hey, I'm willing to give it my best shot. I've got to be able to make

more as an RN than I am on the State.

Other mothers have aspirations but are ineligible for state-funded job training programs. They cannot afford to stop work to be trained for a more satisfying job. One low-income mother who works as a cook at a nursing home wants to further her career. She took a food science course at a technical college in South Portland, a 150 miles round trip, one night a week for a year. She didn't get home until 11:30 and had to be up the next morning at 5:00.

My goal is to be a dietician rather than the measly cook that I am. I have taken some night courses. But I can't afford to give up work to go to school. I wouldn't want to go to school all day and come home say at 3:00 and have a job till 11:00. I wouldn't separate myself from the kids that whole time. If I win the Megabucks (the state-run lottery), I'll go back to school. That would be how it would be.

Another mother of two young daughters knows she wants to do more than waitressing, her current job, but is much less clear about her goals:

When I was down in New York I worked for an eye glass place. I loved that job. I loved it. They trained you there to be an optician and I wanted to stay and try it. (Her husband was injured on the job and they returned to Maine.) I called a couple of outfits (opticians in Rumford) and there were no openings. I just want - you see, I'd like to have a job that - I don't know how to explain it, really. To go somewhere, for advancement. I don't plan, by any means, to stay where I am for the rest of my life.

Several parents also expressed concern about their children's education. Two worried that their preschool children would not be prepared for school. They work with the children themselves and are grateful for the help given by their child care providers:

I don't think she is really ready for kindergarten. There is only two colors she knows, that bothers me. I try to work with her as much as I can. Jane (her provider) spends time with her working on her colors and numbers, you know, like school, to help her out.

I have these tapes, the Golden Books, Mother Goose tapes for her and we've gotten book after book for her. And the alphabet, I was teaching her wrong. I was teaching her name in capital letters because I figured that was the easiest way. But that isn't the way they want it in school and I didn't know that, so I've got to retrain her...Wendy (her provider) is working a lot with her with her ABCs and stuff, teaching her to recognize her letters.

The mother who works as a waitress is already saving for her daughters' college educations:

I know I've got a ways to go because my kids are not even in school yet, but, that's important to me, that they get a good education. I want them to make something of themselves. That's very important to me.

The providers in this rural community were nearly united in their dedication to nurturing the children in their care. To the question, "What is the most important thing you do for children?" 14 of the 21 providers specifically mentioned giving love, affection, attention, emotional security or stability. One provider responded:

Just respect them for the wonderful little people they are...and just treating them like they're the most wonderful people on the face of the earth. I think that's the best thing I can do for them.

The Contents of the Report

This report describe the realities of employment and child care for working families and providers in rural Dixfield, Maine. Much of the description is in the parents' and providers' own words. Through their voices a picture emerges of the values that strengthen these families and communities and the challenges they face in caring for their children.

Chapter Two describes the geography and economy of the Western Mountains Region and the Dixfield area. Chapter Three describes the amount and type of child care being used in western Maine. Chapter Four explores the reasons mothers work, the impact of work on family life, and the impact of child care on work. Chapters Five and Six outline the characteristics of child care providers and their programs. Chapter Seven analyzes the interaction between parents and providers. Chapter Eight describes child care supply and demand. Chapter Nine analyzes the economics of child care: the income to providers and the costs to parents. Chapter Ten discusses the issue of regulation, its impact on child care in western Maine, and the availability and utilization of child care support services. Chapter Eleven draws conclusions from the study and makes recommendations for increasing support to rural working families and child care providers.

CHAPTER TWO

PROFILES OF WESTERN MAINE AND THE DIXFIELD AREA

There's Timberland and I.P. and Boise. They're big corporations that have a lot of workers. That's basically what's around here. If not, you're self-employed in the woods yourself. (A Dixfield area working mother)

Child care does not exist in a vacuum. The form it takes, its availability and its cost depend on the social values and economic conditions of the communities in which it is operating. To provide a context for the discussion of rural child care, this chapter describes the geography and economy of the western Maine and the Dixfield area.

The Western Mountains Region

In its report, The Western Mountains of Maine: Toward Balanced Growth, the Mainewatch Institute defines the Western Mountains Region as the area encompassed by Greenville and Moosehead Lake to the northeast and by Bethel and the White Mountain National Forest to the southwest. Comprising over one-third of the state's land area, it consists of four counties: Piscataquis, Somerset, Franklin and Oxford. Yet with a population of 143,888, it constitutes just 12.4 percent of the state's population. There are 36.5 people per square in Maine. In the Western Mountains Region it is 12.0 people, or one-third that amount.

An area rich in natural beauty, it contains the state's highest mountains. largest rivers and many of its most extensive lake systems. It is the most heavily forested region (94 percent of its land area is covered with trees) in the nation's most heavily forested state (90 percent). The abundance of natural resources has fueled the region's economy from its settlement following the American Revolution to the present day. According to the Mainewatch Institute report, forest products have been and continue to be the backbone of its economy, followed by leather and textiles. Water provided the power for the textile industry and the leather industry developed from the availability of hemlock bark used in tanning. All three industries have been impacted by changes in technology and foreign competition. Between 1930 and 1985, employment in the textile industry was reduced by half. Jobs in shoe mills fell by nearly 30 percent between 1960 and 1985. Among forest products, only the pulp and paper industry has held its own, increasing employment by 16 percent over the last 50 years. In 1985, manufacturing accounted for 43 percent of the total wage and salary employment in the region, nearly twice that of the state as a whole (28 percent). Over 57 percent of these manufacturing jobs are in forest products,

16 percent in leather, and 10 percent in textiles. 1

The Western Mountains Region lags behind the rest of Maine on the following socioeconomic measures:

In November 1990, Maine's unemployment rate was 6.6 percent compared to 9.0 percent in the region.²

In 1987 statewide per capita income was \$10,478; in the region it was \$9,080.3

In December 1990, 11.6 percent of Maine households were receiving AFDC or Food Stamps. In the region, 14.8 percent of households were relying on public assistance.⁴

In the period 1980-1988 the state's population grew by 7.2 percent. In the region it increased by 5.7 percent.

The 1980 Census reported that 14.4 percent of state residents age 25 and over were college graduates. In the region only one out of ten adults (10.5 percent) had a college degree.⁶

Families in the western mountains are struggling to make ends meet. One way these families survive is to have both parents work outside the home. Women with young children in the region work outside the home in greater proportions than do women living elsewhere in Maine. In 1980, 48.1 percent of women with children under six were in the labor force compared to 45.3 percent statewide.⁷

¹ Richard Barringer, Charles Colgan, Lloyd Irland, John Joseph, Frank O'Hara, and Kenneth Stratton, The Western Mountains of Maine: Toward Balanced Growth, Mainewatch Institute, Hallowell, Maine, June 1989, pp. 1-26.

² Maine Department of Labor, Bureau of Employment Security, Division of Economic Analysis and Research, "Civilian Labor Force by Maine County." Statistical Data Series: CCLF 11-90, Augusta, Maine, November 1990.

³ U.S. Department of Commerce, Bureau of the Census, Population Division, "1988 Population and 1987 Per Capita Income Estimates for Counties and Incorporated Places," Current Population Reports, Series P-26. Washington, DC. 1990.

⁴ Maine Department of Human Services, Bureau of Income Maintenance, "Geographic Distribution of AFDC and FS Money Payment, Augusta, Maine, December 23, 1990.

⁵ U.S. Department of Commerce, Bureau of the Census, 1990.

⁶ U.S. Department of Commerce, Bureau of the Census, 1983.

⁷ U.S. Department of Commerce, Bureau of the Census, 1983.

Yet in September 1989, regulated child care was harder to find. There were 9.8 children under thirteen for every slot statewide but in the western mountains there were 12 children.8

Not only are families poorer and less educated in this rural region but there are fewer educational resources and social services available to them. The University of Maine at Farmington is the only institution of higher education located here. It is a major educator of Maine's public school teachers but it has not been primarily a resource to raise the aspirations and prospects of area residents. With the exception of the Western Mountain Alliance formed as a result of the Mainewatch Institute report, no economic, community or human resource development agency serves the region exclusively. All of these services are delivered by a multitude of agencies. For example, three regional planning commissions, four community action programs, three job training programs, three regional offices of the Maine Department of Human Services and four child care agencies serve the region's communities. With the exception of one community action agency that also administers child care services and job training, the agencies' main offices are located outside the region. These agencies, all of which are understaffed and underfunded, tend to focus their resources on the urban populations in their catchment areas and not on the people living in the small towns and on the back roads of the western Maine.

In assessing the economy of the region, the Mainewatch report concludes:

The people of the western mountains have both less disposable income and a smaller tax base available to them than do the people of Maine as a whole; that per-unit and per-capita costs of government services are higher; and that less of them are generally available, as a result. 9

The Dixfield Area

Dixfield, a community of 2500 people, is located in northern Oxford County on the Androscoggin River. It is five miles downstream from Rumford, a paper mill town with a population of 7300. Rumford is the major retail center and employment base for this part of Maine. Dixfield is in the foothills of the western mountains. Fifteen miles to the north is Mount Blue State Park which offers excellent swimming in Webb Lake and hiking up the 3,000 foot mountain for which it is named. Thirty miles to the west is the entrance to the White Mountain National Forest.

For the purposes of this study, the Dixfield area includes the villages of West Peru (across the river), Carthage (six miles north) and Canton (ten miles

⁸ Maine Department of Human Services, Office of Data, Research, and Vital Statistics, "Population Estimates for Minor Civil Divisions by County, Maine 1987," Augusta, Maine, October, 1988.

⁹ Barringer, et al., 1989, p. 27.

southeast). Dixfield, Carthage and Canton comprise School Administrative District 21 which supports elementary schools in Dixfield and Canton, and a middle school and high school in Dixfield. Approximately two-thirds of the students live in Dixfield, one-quarter in Canton, and one-tenth in Carthage. According to the school superintendent, the high school is the focal point of the community. Residents of SAD 21 are very proud and supportive of the school system.

The town has two major arteries: Main Street running east and west along Route 2 and Weld Street running north and south along Route 142. Most of Dixfield's businesses are located on these two streets.

The largest employer in Dixfield is United Timber Corporation (formerly Timberland) which operates a lumber mill in town and owns and harvests extensive forest holdings in the area. United Timber provides approximately 250 jobs to area residents in its corporate headquarters, local lumber mill and wood harvesting operation. SAD 21 is the next largest employer with over 100 employees, 60 of whom are teachers. Most school district employees are women. The third major employer is the Dixfield Health Care Center, a nursing home employing over 70 people. Between 25 to 30 employees are Certified Nurses Aides who do shift work. Between 40 and 50 percent of the employees work part time. Most of these employees are also women. All three employers provide health insurance. Neither United Timber nor SAD 21 offer child care benefits to However, the nursing home operates a child care program in its basement for employees and community members. The nursing home subsidizes onethird of the employee cost of care.

In addition to these large employers, Dixfield supports 56 small service and retail businesses including a bank, three gas stations, three realtors, three beauty shops and one barber shop, a print shop, a bookkeeping and tax service, two construction businesses, three antique shops, a grocery store, three variety stores, two outdoor pool distributors, a health clinic, a funeral home, an optometrist, a restaurant, a pizza place and an ice cream stand. The town maintains a town office, a library, a town garage, a fire station, and two parks. The town also supports three churches, an historical society, a Grange and an American Legion Hall. 10

The town manager reported that most of the residents are employed outside of Dixfield either at the Boise Cascade paper mill and wood products plants in Rumford or, to a lesser extent, in the Lewiston-Auburn metropolitan area 40 miles to the south. He estimated that as many as one-quarter to one-third of Dixfield workers are employed at Boise or work for vendors that supply the plant. Boise is the employer of choice in the Rumford area, paying the highest wages and providing excellent benefits. However, it is difficult to obtain employment at the plant because of limited job openings and fierce competition. According to

¹⁰ From a map distributed by the Dixfield Area Business Association.

an employment counselor at the Rumford JTPA job training office, 11 Boise maintains a regular labor force of 1200 and hires approximately 100 new permanent employees each year. It also hires the same number of "summer spares," i.e., people who work between April and September and are then laid off. She commented that this seasonal work pays more than full year work at minimum wage. Both she and the manager of the Rumford Maine Job Service office, 12 project a bleak employment future at Boise because jobs are expected to be lost through the continued introduction of labor-saving technologies.

Dixfield was described as a "bedroom community" by its town manager and a "yuppie town" by the Job Service manager. Both mentioned the real estate development where new houses start at \$100,000. People are attracted to Dixfield because of its small town atmosphere and its excellent school system. Yet these descriptions tell only part of the story. The existence of Boise and its suppliers creates a two-tier labor market for area workers. Jobs at Boise start at \$11 an hour; the construction companies that service the mill pay as much as \$18 an hour for skilled labor. These wages are in sharp contrast to the irregular income generated by woods workers or the \$5-6 an hour being earned by nursing home employees. Residents who work in the small businesses that line Main and Weld Streets earn even lower wages. Housing prices and rents are being forced up by Boise wages rates; decent affordable housing therefore is out of reach for low and moderate income families. Dixfield has 34 units of low-income housing built eight years ago. Between six and eight families are on the waiting list and on average each must wait a year and a half to move in.

The wage gap between mill workers and the rest of Dixfield's labor force has another unfortunate consequence. Ironically, the high median family income resulting from the presence of Boise workers makes Dixfield ineligible for Community Development Block Grants available to low-income communities --funding that would help the town upgrade services such as improvements to its water system. The town faces a 100 percent increase in water rates to finance federal and state mandated improvements. Because the town is predominantly residential, it does not have a strong property tax base. In the words of the town manager, "It will place the burden on those who can least afford to pay it." The empty store fronts on Main Street attest to the community's economic decline.

At the same time that Boise provides some members of the community with substantial incomes, recent plant closings have reduced employment, forcing the town's young people to leave the area in search of work. Seven factories have closed in the last six years in the Rumford area. The Rumford Job Service manager and the JTPA employment counselor described the impact of these plant closings. The G.W. Bass Shoe Company, long a major leather goods manufacturer in the area, closed its Rumford plant six years ago, laying off 340 employees (at its peak it had employed 600). Its Wilton plant (18 miles away) remained a

¹¹ The state contracts with Mountain Valley Training, a private non-profit job training agency to deliver employment services to low-income people, displaced workers and welfare recipients.

¹² The Job Service administers Maine's unemployment compensation program and maintains a listing of job openings for people looking for work.

source of employment for leather stitchers. However, in February, 1991, it announced that it was moving its hand-sewn work oversees and was laying off approximately 150 people. Diamond Brands, a wood products company located just across the river in West Peru, closed two years ago. Over 200 jobs were lost when the plant moved out of the country. Half of the employees, 70 percent of whom were women and many of them single parents, lived in Dixfield. In March, 1990, the GAM textile plant closed in Bethel (30 miles to the southwest) laying off 60 workers, of whom 57 were women.

Mountain Valley Training is the local job training agency that retrains laid-off workers. It has enrolled 80 of the 200 former Diamond Brands employees and 48 of the 60 GAM workers in its training programs. Given the changing economy, it is not surprising that most of these trainees have not returned to manufacturing jobs but have been hired in service occupations such as Certified Nurses Aides and commercial cleaners. While the employment counselor was justifiably proud of the clients who obtained professional training through her program, most of the trainees found jobs with wages and hours inferior to those that they had lost. 14

The resources of the local public job training and placement programs are extremely limited relative to the demands placed on them by the local economy. Both agencies have lost staff due to cuts in federal funding. In November, 1990, the Rumford labor market recorded the second highest unemployment rate in the state (11.1 percent, nearly twice the statewide rate of 6.6 percent) between the are only 42 slots available in all of Oxford County for unemployed workers through STAR, the state-funded retraining program. ASPIRE, the training program for welfare recipients, is unable to enroll new clients because the demand for services has been so great and funds for child care and transportation are exhausted.

Respondent Employment Patterns

The employment histories of the Dixfield area families interviewed in this study closely parallel the descriptions of the labor market provided by the town manager and the two employment specialists. The 41 interviewees described 75 current or recent jobs held either by their spouses or themselves. Twenty-eight (37 percent) of the jobs were in forest products industry: ten people worked for

¹³ Maine Times, March 1, 1991, Volume 23, No. 21, p.13.

¹⁴ For example, Diamond Brands was paying employees \$6.05 to \$6.25 and hour. The Dixfield Health Care Center, the nursing home that hired laid-off workers as CNA's, starts them at \$5.35 an hour.

¹⁵ Maine Department of Labor, Bureau of Employment Security, Division of Economic Analysis and Research, "Civilian Labor Force by Maine Labor Market Area, New England States, and the United States, November 1990," Statistical Data Series: CLF11-90, Augusta, Maine.

paper companies, eight of whom were either regular Boise employees or worked for a Boise subcontractor; five jobs were with Timberland; another seven were independent loggers or worked for logging companies other than Timberland; three people had been employed at Diamond Brands before it closed; one parent worked in a dowel mill and another ran his own small wood turning business.

Four jobs each were reported at the nursing home, Bass Shoe in Wilton and the local school system. Four were skilled workers in manufacturing companies in Auburn and Bath. Three people worked at the Rumford Community Hospital. The remaining jobs were a mix of retail, clerical and service jobs located in Rumford, Mexico (across the river from Rumford), Farmington and Auburn. 16

Residents of small rural communities often have to commute considerable distances to work. Nearly three-quarters (73 percent) of the jobs held by Dixfield area parents were in towns other than the ones in which they lived. While most of the jobs (18) were in Rumford/Mexico five miles away, nine were in Auburn (40 miles from Dixfield and 30 from Canton). The Diamond Brands plant closing caused major dislocations for two families in the study. Both parents in the first family had been employed at Diamond working different shifts. The husband is now working nights in a factory in Auburn: four days on and fours days off. His wife, unable to find another job, was trained as a CNA through Mountain Valley Training and now works the three-to-eleven shift at the Dixfield Health Care Center. She has to work every other weekend. She says she would prefer to work the 11 p.m. to 7 a.m. shift so she could be home in the evenings with her two school age children. She has struggled to find sitters who can fill in the gaps in their work schedules.

The husband in the second family started job hunting when he learned of the pending plant closing. A skilled craftsman, he found a job at Bath Iron Works 60 miles away. For the last two years he has spent more than four hours a day car pooling to and from his job. The family plans to move closer to Bath when their two learning disabled sons finish high school in Dixfield.

While manufacturing jobs pay high wages, the varied work schedules take their toll on families and child care providers alike. Paper workers typically work revolving shifts. They work the day shift, the evening shift and then the night shift in weekly rotations. A new provider discovered that she could not take in infants because their crying bothered her husband when he had just come off a night shift and was trying to sleep during the day. Working overtime brings in additional income but puts additional pressure on the family. The same provider described her husband's current work schedule:

He's still working sixteens (double shifts) and all kinds of overtime. Last week and this week we got behind. I had to order oil, 'cause it was going up so much. I just ordered oil and we still need four cords of wood, so he's been working extra to get caught up...He's worked a sixteen

¹⁶ These occupations included store clerk, electrician, ski resort chambermaid, waitress, hair dresser, customer representative for Central Maine Power, bank teller, cook, manager of a paint store, car parts manager, carpenter, insurance salesman and sporting goods store manager.

Saturday and a sixteen Sunday.

Parents often try to solve their child care problems by working alternate shifts so that one parent is always home with the children. Yet this arrangement has drawbacks. This woman had to leave her children alone between the time her husband left each morning to work at Diamond Brands and the time she got back from the night shift:

He left to go to work at ten minutes of 7:00. I was home at 7:00. The kids were home alone for maybe ten minutes, no more than ten minutes. We could punch out at five of and they weren't home more than five or ten minutes alone and they were still sleeping. That's why I went to [the nursing home in] Dixfield because I knew there would be mornings that we'd have to leave the kids.

Working overtime creates another kind of pressure in two income earner families. This mother had worked outside the home but gave it up because of the difficulty in finding baby sitters on short notice when her husband had to work overtime:

I worked at Shaw's (a supermarket in Lewiston) and my husband was working in the mill. They have a lot of [overtime] hours. If he didn't get home and they didn't have a phone to get a hold of you, my brother or somebody would call an hour before I had to leave for work, "Tim says you have to find a baby-sitter. He can't get home." So I'd be on the phone just trying to find somebody quick. There was one girl that used to take them quite often or if I had the time I'd run them to Rumford or my mother would meet me half way and take the kids there until Tim got out of work.

A related type of employment is referred to as "working shutdown." Contractors come into the Boise mill and do intensive maintenance and repair work when the paper-making operation is shut down. A provider explains how shutdown affects her sister-in-law for whom she baby sits:

She'll go in as a laborer so she never knows what she has to do until she gets there. It runs anywhere from two to four weeks, usually four weeks. Then sometimes they keep them on but they lay off a lot of them so she never knows whether she's going to get laid off or whether they'll keep her working, one or the other. A lot of the work up here is up and down. She's just going in under a construction contract so she's not actually in the mill. They just hire masses of people to come in and do all of this work. They try to get it done as fast as they can. That's why they put them on twelve hour shifts and work seven days a week.

Another provider commented on the impact on children when both parents work shutdown:

I had those kids 18 hours a day sometimes. I feel bad for the kids because after two or three days of that you could see the toll on them. Because after awhile they'd want their mommy and daddy.

Layoffs occurred frequently in several families. A common practice was to

have the father care for the children when he was laid off. Loggers are laid off regularly during the spring mud season when they cannot get skidders into the woods. Other related businesses are affected as well. One mother who worked in a dowel factory was regularly laid off in the spring.

Layoffs also impact child care providers. When a parent is home to take care of the children, providers lose income. When families live at the margin, every opportunity is taken to maximize income including bartering. A parent interview produced this example. Two Bass Shoe stitchers, on vacation for a week, had worked out the following arrangement: one mother baby-sat for the second while the second mother visited her family out of state. The second woman's husband fixed the first woman's car in exchange for the week of baby-sitting. Both of the families' regular providers lost income during that vacation week. The nature of the labor market in this part of Maine exacerbates normal tensions between the needs of the parents and the family day care provider.

A provider who had attempted to work outside the home but had given it up because she could not earn enough money and wanted to stay home with her two children summed up the area employment picture for women this way:

But some days I think I would love to have a full-time job where I could earn full-time pay, so I could save for a new car or something like that, but I don't think it would be worth it. There again, I want to raise my kids, but, if there came a time where I needed to work, I could very well see it would cost us \$75 a week for a sitter, so I couldn't take a job that paid \$5.00 or \$5.50 an hour. I'd have to have a good paying job, but living in this area, to get a good paying job, you'd either have to go to Lewiston or Auburn (30 miles away), or you'd have to go maybe to Rumford (15 miles away), and if you got a shift job, that would be a whole 'nother ballpark. Then who would watch them... But in this area, you'd have to travel, you'd probably have to travel a good 20 miles to get a good paying job, a woman. A man could probably get a job at Jay (10 miles away) that paid enough.

CHAPTER THREE

CHILD CARE USE, EXPECTATIONS AND SATISFACTION

A major goal of this research project was to better understand why rural parents use child care, what kind of care they use, what they are looking for in care and how satisfied they are with their child care arrangements.

Reasons for and Frequency of Child Care Use

Of the 224 family members in western Maine surveyed by telephone, 15 percent reported never using child care. Forty-four percent primarily used child care primarily while they worked and three percent while they attended school. The remaining 38 percent used child care while they could socialized or ran errands. The frequency of use varied significantly between the group that used child care for work or school and the group that used it for other reasons:

Table 2

Frequency of Child Care by Reason for Use Four-County Respondents

(In percent)

	Work/ ¹ <u>School</u>	Errands/ Socializing
Daily	53	5
Weekly	43	28
Monthly	1	20
Rarely	3	47
Number of		
cases	100	75

Over half of the families using child care primarily for work or school used child care daily; nearly half of the families using care so they could run errands or go out used child care rarely. The population of greatest interest to the study was families using child care for work or school: their livelihoods depended on finding care and they were the largest users of care.

¹ Of the 100 respondents, 94 used child care for work and six for school.

Full-Time Versus Part-Time Care

The National Day Care Home Study, the most comprehensive study of family day care, was conducted by the U.S. Department of Human Services between 1976 and 1980. Both providers and parents were interviewed in four metropolitan areas. Nearly 70 percent of the children were in full-time care defined as 30 or more hours a week. Part-time arrangements tended to be limited to school-aged children. While working parents in rural western Maine counties used child care frequently, the proportion using full-time care was considerably lower: only 39 percent used care 30 or more hours a week. One possible explanation is that 40 percent of the urban sample were single parents compared to 10 percent of the rural sample. Part-time work is likely to be more common in families with two income earners. Additionally fathers are available to contribute to the care of children in two-parent families.

Types of Child Care Used by Working Families

In 1985, the U.S. Bureau of the Census reported the type of child care being used by children under the age of five with working mothers. When compared with the distribution of care among respondents in the telephone survey and in Dixfield some striking differences emerge:

Table 3

Types of Child Care
(in percent)

	U.S.	Four- County	Dixfield <u>Area</u>
Relative care	48	34	14
Family Day Care	22	48	48
Combination relative			
& Family Day Care	570	*	33
Non-relative home car	e 6	12	5
Center care	23	6	76
Number of cases	26,190	100	21

² Patricia Divine-Hawkins, Family Day Care in the United States, Executive Summary, National Day Care Home Study Final Report, U.S. Department of Health and Human Services, Office of Human Development Services, Administration for Children, Youth and Families, Day Care Division. DHHS Publication No. (OHDS) 80-30287, September 1981, p. 18.

³ U.S. Department of Commerce, Bureau of the Census, "Data User News," June 1987, Vol. 22, No. 6, p. 1.

In the national sample, families used more relative care and much more center care. In contrast families in western Maine and Dixfield used much more family day care. Teen-agers frequently provided the non-relative in-home care. In the Dixfield area family members often provided backup care. While mothers worked, fathers cared for children on weekends, afternoons and evenings or during periods when they were laid off. Only one family was currently using an in-home provider (a teen-ager during the summer) although five had used teen agers in the past. Two-thirds of the families used family day care at least part of the time. There are no licensed child care centers in this rural area. The nearest to a center is the child care program run by the Dixfield nursing home. Licensed for twelve, it serves the children of nursing home employees and community members. It operates like a center in that staff are employed by the nursing home. Because of the number of children it serves and because it has a more structured program, it is perceived by area parents to be a center. Two families interviewed for the study used the nursing home program.

Five families sent their children to Dixfield's one nursery school as an additional source of care. This use of multiple arrangements (combinations of institutional, home-based, and relative care) is not unusual. Betsy Squibb, in a study of multiple child care arrangements and the reasons families choose them, also found that child care utilization is often complex. Parents do not necessarily choose the most affordable or most conveniently located care. They will combine relative care or family day care with preschool programs or nursery schools. In that way children will receive both individualized nurturing and socialization and school preparedness. Parents reported that coordinating more than one type of care took effort but was worth it.⁴

In a four-year longitudinal study of child care arrangements in New York City, Liliane Floge also found that mothers often used multiple providers. Multiple arrangements produced benefits for the working mother: when one provider was ill or otherwise unavailable, the other provider could substitute.

Regulated Care

In the four-county telephone survey, nearly four out of five working families (72 percent) reported using unregulated providers. Margaret Nelson, in a study of child care in Vermont, reported a similar proportion of unregulated care. In that rural state, 75 percent of all children under six with parents in

⁴ Betsy Squibb, "Childcare Packages: A Proactive Strategy," unpublished manuscript, University of Maine at Farmington, Farmington, Maine, pp. 12-15.

⁵ Liliane Floge, "The Dynamics of Child-care Use and Some Implications for Women's Employment," Journal of Marriage and Family, February 1985, p. 152.

the labor force were in unregulated homes.⁶ William Gormley, in an article in the Fall 1990 issue of The Brookings Review, estimates that nationwide three out of four family day care homes are unregulated.⁷ In contrast, only 58 percent of the Dixfield area families used unregulated care. This variance was undoubtedly influenced by the method of provider and parent contact employed in the study. All regulated providers in the area were located and interviewed. While a concerted effort was made to identify and interview unregulated providers, they were much harder to find. Parents were identified primarily through their providers.

The Logistics of Work and Child Care

Working mothers rise early, get their children ready (which may or may not include breakfast depending on the arrangement they have made with their provider), drive to the providers and then to work. Fathers often are involved in their transportation. In eight of the 21 Dixfield area families, fathers regularly transported children.

Four-county respondents were asked how far they had to travel from home to provider and from provider to work. About one third travelled less than seven miles, another third between seven and 20 miles, and the final third more than 20 miles. Nearly one out of five (19 percent) reported travelling more than 30 miles from home to provider to work, or 60 miles a day.

Mothers working full time face particularly grueling schedules. Nine of the women interviewed in the Dixfield area reported getting up between 4:00 and 5:30 in the morning. Here is an example of a mother who has a school-age daughter and a preschool son: She and her children get up between 4:00 and 4:30 in the morning. At 5:30 she drops her daughter off at her sister's who lives next door. Her sister feeds her daughter breakfast and gets her ready for school. The mother drives 20 miles to work at the Dixfield nursing home with her son who is enrolled in the on-site program. She finishes work at 2:00 and reverses the process. One day a week she works from 10:00 to 6:00. Either she or her husband - whoever gets there first - picks up her daughter in the afternoon. She accepts this schedule with remarkably good grace.

I'm used to it, it doesn't bother me. I don't feel rushed. It's just the routine I've gotten into. My schedule is changed every two weeks. My husband keeps the children on weekends when I work. Those are his special days with the children.

Another mother and her infant son leave the house at 5:30 four days a week. She drives eight miles to her child care provider and then another 18 miles to work.

⁶ Margaret K. Nelson. "Providing Family Day Care: An Analysis of Homebased Work.." Social Problems, Vol. 35, No.1, February 1988, p. 80.

William T. Gormley, Jr., "Regulating Mister Rogers' Neighborhood: The Dilemmas of Day Care Regulation," The Brookings Review, Fall 1990, p. 27.

She picks up her child at 5:45 in the evening.

One of the most demanding schedules was described by a mother who has since given up her job at International Paper in Jay:

I worked every shift. For one week I would do seven to three and then have a long weekend, do three to eleven and have two days off and do eleven to seven. (She was using her stepmother for child care.) For the night shift I would leave home at 10:00 p.m., drop off my daughter and she would sleep all night. By the time I got there in the morning I would just use my old bedroom and sleep and my stepmother would watch her during the day and then when I got up, we would come home.

A mother who waitresses nights lives in Rumford, leaves home with her two children at 2:30 in the afternoon, drives them to Dixfield to her provider and then back to her job in Rumford to start work at 4:00. Her provider puts the children to bed and she picks them up at 11:00 and drives back home to Rumford. Not surprisingly, the mother commented, "Some nights I'm tired."

Another mother drives her daughter 20 minutes from Jay to Dixfield to a relative and then travels another 20 to 25 minutes to her job in Farmington. Her husband picks up their daughter in the evenings. They are willing to do the extra traveling to have a relative care for their daughter.

Not all families face such strenuous schedules. One mother uses a neighbor to care for her son while she teaches at the high school located minutes from her home. Another works part time at the nursing home which is 20 minutes away. Both her children attend the nursing home child care program. Another mother lives one-half mile from her provider and ten minutes from her job.

Provider Continuity

Families change providers either at the provider's initiative or their own. Whatever the reason, researchers have voiced concern over the impact on children of frequent caregiver changes. Four-county working families reported using their current providers for an average of 1.7 years. The average length of time Dixfield area parents reported using their current providers was 2.3 years. Length of care varied from two months to eight years. Eight providers had been used for less than a year (two of the children were infants), six had been used between one and four years and five had been used for five years or more.

Changing providers in Dixfield was a common practice. Of the 21 families, 17 had used more than one provider. At one extreme, one mother thought that she had used seven or eight different baby sitters (including several teen-agers) for her ten-year old daughter and eight-year old son. At the other was the family with two daughters age nine and five who had used one provider for seven years. Another concern expressed by child care advocates is that working parents,

⁸ Floge, 1985, p. 153.

pressured to find care, will accept the first arrangement that comes along. Liliane Floge's study of 37 working mothers of young children in Lewiston, Maine, supports this contention. Sixty percent of the searches for child care occurred when the mothers were working -- not when they were job-seeking. Fifty-one percent of the women in the study reported that they did not need to look for a provider or found one right away. Thus the author concludes:

It appears that the "lack of a search" indicates one of two things: first, that the search ended where it began: the first person asked to be the provider agreed and the mother did not look further, or second, that someone volunteered to care for the woman's child(ren) and she accepted and looked no further.

The author goes on to argue that this willingness to accept the first solution that comes along is not because these women did not care about the welfare of their children but because they felt pressure to solve quickly their child care problem so their jobs would not be jeopardized. 10

Of the 19 provider changes for which explanations were recorded in the Dixfield area interviews, over half (11) were initiated by the parents. While parents may enter into a child care arrangement due to job pressure, the Dixfield area interviews suggest that they will not continue it if their goals for the child are not being met. Six of the eleven child care changes initiated by parents resulted from dissatisfaction with the provider. One licensed family day care provider did not give an infant the attention the mother wanted. A stepmother, while convenient to use, did not share the mother's parenting ideas so the mother found another arrangement. Another family made a change when their provider's youngest child went to school leaving their child without a playmate. A fourth family tried the nursing home program but withdrew their children because they were uncomfortable with the large number of children in attendance.

Parents left satisfactory child care arrangements for a variety of reasons. They changed jobs, moved from the community, or a child entered school and needed a provider on the bus line. The eight provider-initiated changes also were the result of a number of different factors. Two relative providers went to work outside the home and a 19 year old got a "real job." One provider became pregnant and another remarried and stopped doing child care. In another case, a change was made because the provider wanted the children picked up by four in the afternoon which was impossible for the mother given her work schedule.

Mothers will work hard to find a satisfactory child care arrangement. One mother of an infant son had three providers in the nine months since his birth. The first came to her house but was too expensive, the second, a family day care provider, did not give her son the attention she wanted. Fortunately she was thoroughly satisfied with her third, and current, provider. The mother's job was

⁹ Liliane Floge, "The Search for Day Care in Dual Earner Families," Paper presented at the annual meeting of the Society for the Study of Social Problems, New York City, August 28, 1986. p. 10.

¹⁰ Ibid., p. 16.

soon to require her to commute to New Hampshire. She intended to keep her provider because she is so pleased with her even though the provider would no longer be on her route to work.

The difficulties of maintaining child care arrangements is illustrated by the following story of a mother's five year history of finding adequate for her five-year old daughter and three-year old son. The first provider was a friend of her mother's, the second was a relative by marriage, and the third was recommended to her by a neighbor. Each move affected not only the children but her own feelings about leaving them in another's care.

Mary was wonderful. She had Susie from the time she was an infant ... I would come to pick her up and would find Mary just sitting and rocking her. Then I had Jimmy. When I went back with the two kids, she had a daughter of her own and it seemed to be disruptive for her to have the two additional kids and so she asked if I'd find someone else. I was lucky. I called Ruth right up. Her son is married to my cousin so I know them. Ruth said yes. Jimmy was just six months old when we started so he grew up with her and Susie made the transition beautifully and I would have stayed there because she was perfect, she was just perfect. But then I had to switch to Canton. (Ruth lives in Dixfield; the family lives in Canton.) I work up in Rumford and Susie was going to start school in the fall. So I had to change and Wendy (who lives in Canton) was sitting for my next door neighbor. She wasn't making enough money and really needed to get another family or she would have to give it So I changed to Wendy in April...But as far as the transition went for the kids, they were fine. Jimmy had about a week that was kind of tough on him, and I think it was a big adjustment. really missed Ruth because he had been with her since he was born... They really have adjusted well and I think they're really happy. I haven't noticed any real change in them. (She was having her own adjustment difficulty, however.) It's only my own transition because I was so comfortable with Ruth and Mary, and I don't have quite the same comfort level with Wendy.

What Parents Value in Their Child Care Providers

Four-county respondents were asked to rate on a four point scale a list of factors that enter into the decision to use a particular child care provider. They were asked if each concern was very important, somewhat important, not very important, or not at all important. When the scores were averaged, the following ranking emerged. (The higher the score, the more respondents thought the factor was very important. A score of 4 would indicate that all respondents thought the factor was very important.)

Table 4

Factors In Choosing Child Care Four-County Respondents (average scores)

Knowing the provider before	
leaving the child ¹¹	3.95
Sharing discipline ideas	3.70
Length of time acquainted	3.57
Providing nutritious food	3,56
Location	3.42
Structured play and learning	3.17
Cost	3.06
Flexible hours	2.82
Set map times	2.67
State regulation	2.16
Religious affiliation	1.81
Number of cases	100

It is noteworthy that parents looked for providers with whom they shared values (sharing discipline ideas) -- which they insure by using providers they know. The next grouping reflects program characteristics (nutritious food, structure). Factors that benefit the parents most directly (location, cost, and flexible hours) were rated less highly. State regulation and religious affiliation appeared to be of little importance to parents.

Respondents were then asked which of the factors was most important to them in choosing care. Overwhelmingly, parents chose knowing the provider as their most important concern (71 percent). No other factor came close: sharing ideas on discipline and the provider's location each earned five percent, the cost of care and attention to children four percent each, and running a structured program, religious beliefs, and state regulation two percent each.

To answer the question about what families value in child care, parents in the Dixfield area were asked what was important to them in how their children were cared for. Responses ranged from nurturing attention and appropriate discipline to school preparedness and the personality of the provider. Six parents relied on knowing the provider and sharing parenting styles. Here are two responses.

Analysis of early survey returns indicated parents overwhelming concern for "knowing the child care provider before leaving the child in her care." Because of possible misinterpretation of the question, a more precise question was asked of the second half of the survey respondents, "Was the length of time you had been acquainted with the child care provider of great concern, some concern, little concern or no concern?" The question is summarized as "Length of time acquainted" on the factor list.

Luckily my sister and me both have raised our children about the same. Probably the same as we were raised. (She also uses the nursing home program for a second child.) Everything they've done (the child care staff) is just as I would have done it.

I know those two people that baby-sat him. I've known them all my life, so I kind of trust them. There are other people that I'd probably be scared to death the whole time working because I wouldn't know them. I try to leave him with somebody I know.

The overwhelming concern was that their children receive adequate attention from the provider. Fourteen of the 21 parents interviewed mentioned the importance of having their children's physical and emotional needs met. Five of these parents mentioned that they did not want custodial care. An example of such care was allowing children to watch an excessive amount of the television. Here are three comments:

I don't like somebody who just doesn't pay attention to them or spend time with them.

When I drop my daughter off, I want to know that she is being looked after.

Supervision is very important. I want her to be watched over.

One saw the provider as a surrogate parent:

Probably the most important thing is to know that somebody's going to be there to hug them, that they aren't just going to make sure they have their necessities because they're suppose to be taking my place.

Three parents were concerned that children might not get enough individual attention at day care centers. One was using the nursing home program. Even though it only enrolls 12 children, she expressed anxiety over the amount of nurturing they were getting:

I think I could feel a little more secure if there was a little bit more love for the kids. They do a beautiful job and they do care, but I don't see much hugging and things like that. They have 18, I know it's not 18, but how ever many they have. They just don't have the time.

Another mother contrasted center care with the family day care her son was getting:

I don't like traditional day care. For some children, it meets their needs but I don't want John in that kind of situation. He gets lots of attention here. I like him to be with other children and yet I didn't want him to be somewhere where he was just a number.

While acknowledging the importance of showing children affection, five parents wanted the affection balanced with clear behavioral expectations. They wanted aggressive behavior including bad language controlled. Here are two examples:

I don't like it if a baby sitter just lets the kids do whatever they want to do and doesn't give them any direction at all, because I think it's real important that they know what their boundaries are. There's a lot of baby sitters who want to be a friend of the child, and somewhere in the transition of being a friend, they forget to have any rules and then I get a monster coming home at the end of the day...You can be friends and you can be loving but you can still guide them along the way.

That they're disciplined. They don't run the baby sitter. The baby sitter runs them. I want them to mind.

Six parents wanted their children disciplined in a positive way. Four parents specifically mentioned that they did not want their children spanked:

I think positive reinforcement works and I think that's important. I'm not a spanker and I prefer that no one spanks my children or does violent things to discipline them. If they need to be disciplined, and I need to discipline them too, sitting in a chair is okay, time out is okay, revoking a privilege is okay.

Four parents used their children's reactions to judge the performance of their provider:

I like to know that they're having fun when they have to be at a sitter. I like to know that they're enjoying it, too, because you feel kind of guilty leaving them someplace where they're not happy. You're concerned about that. If your kids aren't happy, you can't be happy, and feel guilty leaving them in that type of environment.

I like to know that they're happy. If every morning I woke them up and they didn't want to go there, then that wouldn't be the thing to do. They both seem very happy with going there and it never seems to be a bad day. Whatever she's doing seems to be agreeing with my kids.

That's basically what I'm concerned about is how they like her, how they act towards her, and how she treats them.

Seven parents wanted their children to participate in a variety of activities during the day including arts and crafts, learning letters, numbers and colors, cooking, outside play like swimming and sliding, and free play.

Wendy (her provider) does a lot of crafts and she does a lot of work with letters and numbers. My kids go to nursery school, too, so I feel they have a fair amount of structure. You know, I think of play as children's work, and I want them to have play time that is

unstructured as well. Where they can be creative and do their own thing.

Six parents valued cleanliness of the home and nutritious food. Finally one parent tried to describe the personality characteristics of a good provider:

It's really hard to say what I mean, put it into words, but there's a definite way that people carry themselves when they like working with kids. There's a certain way that you act around kids when you like kids, that you don't have when you don't like kids. And the way she handles problems, I don't want her flying off the handle. If she can stay calm, that's fine.

Parent Satisfaction with Current Child Care Arrangements

Not only were Dixfield area parents able to articulate what was important to them about child care, they also had a good deal to say about their current providers. Surveys of working parents regularly elicit a high degree of satisfaction with existing child care arrangements. This phenomenon has been explained by parents needing to believe that their children are well cared for. If they did not, then they would have to find other arrangements, a process that can be difficult and time-consuming. However, in the face-to-face interviews, Dixfield area parents often gave detailed explanations both for their satisfaction and dissatisfaction with their current providers. This thoroughness lends credence to their answers. What they liked about their individual providers was consistent with what they were looking for in child care.

Advantages: All 20 parents currently using child care expressed some degree of satisfaction with their providers. On balance, the advantages strongly outweighed any disadvantages. Three parents described problems they had encountered with their providers and how they had resolved them. These incidents are documented in Chapter Seven on parent and provider relations. The advantages (and disadvantages) cited by parents can be categorized as those that affect children and those that affect parents. Again, the preponderance of responses were child related. Seventeen of the advantages benefitted children and are summarized below. Six benefitted parents: five mentioned the provider's convenient location and one the low cost of care.

Two employees of the nursing home used the on-site child care program. One had only praise; the other had a more mixed response. The first parent described the advantages of being located in the same building, her son's pleasure at attending the program, her pleasure with the variety of activities he participates in, and the progress he had made:

I can't have more kids now but if I was to have another one, I wouldn't hesitate a second to take them there, not for a second. I think it's good to be right there so that if something does happen, I can be notified within a minute and be down to check him myself, to see just how I think he is, knowing my child better than any other person. Say he was at a baby sitter's someone not in the

family or that I didn't know. They might not want to bother me and just give him a drink and have him lie down. My daughter broke her hand at 10:00 in the morning and the school didn't call me 'til after 1:00.

My son's day care has been the easiest thing I've ever had to do. I get up with him, I take him with me, I pick him up when I leave. That is ideal for me. He loves it. On my days off he's saying, "Can you go to work? Can you go to work?" It's got to be good to have the child want to go. You get there and you've got to wait ten minutes for him to get all his stuff together and put all his toys back, because it takes so long to stop playing but they do a lot with them. Rather than just going and being watched (custodial care), they—— like the cards that they made for Father's Day. It just seems like every day he comes home with a picture they colored, or they cut these out and glued these on here and this and that. Almost every day he comes home with something that he's done, rather than just go and do your thing for the eight hours they have him. It's almost like a day school or something.

They have an early childhood program at the school where he'll be attending, and when they did his screening, I was impressed, proud mother, you know. The early childhood program is geared more for getting him used to being gone from home, rather than learning letters and numbers and when they went and did his prescreening, he came out and they wanted to send him right into kindergarten. And they told me they believe a lot of it is from him being in day care. They believe that's given him an extra space to be more independent than a kid that's been home with his mother the whole time. I was thrilled.

The second mother with two children in the program was also pleased but did find a disadvantage in being so close to the children when she was working. She also wished the program was open during the weekends:

Oh, they love it. I have no trouble with it at all... Before this, my son had nursery school two days a week but when we started here, we omitted nursery school because we found this to be really similar. He wasn't getting the individual time he needed there and he gets it here. I'm spoiled as far as day care goes. I don't have to go anywhere out of my way, whatsoever. If the kids are sick, I know it because they let me know.

If they're outside playing, I can't stand to see them out there crying. They take them outside on nice days in the wintertime and my daughter didn't like to be set down outside because she couldn't move around in her little snowsuit and it just ruined my concentration on my work to think that she was crying. When I first started here, for like the first two weeks, if I heard the kids crying downstairs, I wondered if it was mine.

I just wish they'd work weekends. I don't want to work weekends

either but I do. The only problem is that I have to scrounge up a baby sitter for every other weekend because my husband would like his weekends off.

Three parents used the same licensed family day care provider and were unanimous in their praise. All three had moved beyond a purely business to a social relationship. Two parents knew the provider before enrolling their children; one did not. The first parent commented:

He's the happiest kid there. When I drop him off in the morning he'll kiss me goodbye and wave goodbye to me. When I pick him up that night, he'll come running just as happy as can be. I've never heard the child cry when I've walked in the door...I spend 15-20 minutes there in the morning. We sit down, we'll talk about what's going on in both our lives, the kids, anything and everything. I'm there a good 15 to 20 minutes at night. I'll play with the other kids when I'm there. We have to go around and kiss everybody goodbye before we can leave. They will not let us walk out the door. He's everybody's pride and joy.

The second parent who knew her prior to using her as a provider:

The kids like her. They really like going over there. They'll come home and say different things, "Jane did this," or "Jane did that." If I would have had to go and pick a stranger, it would have been hard. When I pick them up, usually, they'll want me to come and sit and have a cup of tea so they can play a little bit longer.

(The provider had taken a CPR course and was planning to take one in First Aid.) That made me feel good. She doesn't seem like the kind that would panic if something happened. She would keep herself together and be able to handle it if something happened.

I think knowing how much she cares. She eliminated her dining room, hauled all the kids' toys in there and said, "This is your room. You can play in here and mess it up if you want." She's not one that says, "Don't get the toys out." She'll let the kids have fun, which is what I like. When I go there and the kids are happy and they want to go back, they'll ask, "Are we going to Jane's today?" and then I know they're happy, they're satisfied. That's impressive.

Other parents were pleased with their providers because of the activities they offer their children, that they are providing more than custodial care. A parent identified the following things she liked about her registered provider:

She pointed out different things to them and showed them how to make things in the woods. That was one thing that I liked. And she'd schedule different things. They make cutouts and she teaches them how to do these things. She'll talk to them. She just doesn't tell them, "Go play." She does things with them.

This parent was equally pleased with her unregulated provider:

She's real supportive in the potty training end of it. You've got to have somebody who is cooperative with you or you'll never potty train your kid. She's done excellent things with teaching them to count and colors and shapes and things like that. It's worked out real well for us. I've been real happy with what she does. She really seems to love the kids.

This provider was also unregulated:

She's really interested in doing things with the kids not just, "Go, play," like some people are. She is working a lot with my daughter with her ABCs teaching her to recognize them.

Parents also remarked on the personalities of their providers. These providers also were unregulated:

Sometimes I'm tired a lot and I tend to holler more than I should. She is always so happy and she's always so understanding with the kids, and I look at her and say, "How do you do it?" She does it with her own kids and she's a really good baby sitter.

She's a good person. She's very level headed and has good judgment. She is so good with kids...She's just a rare person.

When I go to work, I don't want to have to worry about if he's being well taken care of. I know he's well taken care of, because she's very strict and very caring.

She's really good with the kids. She's really patient.

Two parents mentioned their providers' approach to discipline. The first was unregulated, the second was registered:

She sets my daughter straight if she is doing something she should not be doing... She sits her down and says, "You know you don't do certain things at certain times." If she's gotten into a bad mood or disagreeing with something, she sets her down and explains it.

We are friends with her and when we go to her house we see her disciplining the kids which is good because I can see what her limits are. I know what she expects them to do in her house.

The chief advantage for two parents was knowing the provider well. The first was a relative and the second was an unregulated provider.

I would rather have a relative who I know loves her to death, and I don't have to worry.

We know her personally. It's not like we're going into a situation where we don't really know these people who are watching our kids

personally, and it's important for me to know who these people are, I mean, kids are very [impressionable] when they're young. They can be influenced to do a lot of different things, or to act in a certain way, or behave in certain ways, and at least when you know someone on a personal basis, you're able to identify some of the things that you see in them that you see in yourself as a parent. You know, it's like leaving them with some of your own people or something. That's why I'm really satisfied with Martha. She's a good person at heart, and peace of mind is worth a lot if you're going to leave your children with somebody all day long.

Disadvantages: Parents did identify disadvantages. One mentioned the distance she had to travel but hastened to add that it was worth it. Another parent described the disadvantage of using a licensed family day care provider:

There is a disadvantage where she's real small [runs a small program] and doesn't have an assistant. When her daughter is sick I have to frantically find someone to watch my kids or stay home myself.

Another was having difficulty adjusting to a new unregulated provider who was more structured than the ones she had used in the past:

I'm a pretty relaxed parent. When you work you kind of learn to go with the flow, and I'm not really into schedules and massive routines...We don't have a nap from 1:00 to 2:00 every day. Wendy is kind of a routine person and so we had to do a little negotiating with how regimented [her program] was. She needs that regiment, she does. But it's tough for me to adjust to.

The Ideal Child Care Arrangement

When asked about what would be the ideal child care arrangement for them, eight parents said they would prefer having someone come into their own homes. However, the expense and the unwillingness of adult women to leave their own homes made this an unrealistic option. Two parents who worked at the hospital in Rumford thought an on-site child care center would be preferable. One mother made a convincing argument for such a facility:

At the hospital they have this whole big building and there are so many mothers there. So many moms there with little children and they had a big empty building. Why couldn't they have a little day care center? It could be staffed 24 hours a day with sleeping or whatever so you could bring your kids and they'd be right next door. There are enough mothers in that hospital working. I mean, most employees of a hospital are all women. To have some kind of day care center right there on the premises, I just don't understand why they don't do it. I don't know if it's insurance reasons. I don't know why.

The other hospital employee mentioned that she had applied for a job at a ski resort. The facility operated a child care center -- but only for the children of guests. Yet the resort employed many women as housekeepers.

Experiences with Teen-agers

Using teen-agers to care for children was a common practice in rural western Maine. Nearly one out of four (22 percent) of the families in the four-county survey who used child care because of work reported that their providers were under the age of 21. Several parents in the Dixfield area commented on their experience with teen-agers. Six parents expressed dissatisfaction with their experiences, questioning the ability of some teen-agers to care adequately for the children. Here are three of them:

I had trouble with one of the baby sitters I had. She was a young girl. I had her come up one evening and spend a couple of hours with me and the kids at home so I could see how she dealt with them...She seemed really nice. I'd ask her questions and she answered them sensibly and I told her that we'd try it. She was 15. One day she came over [to the nursing home] crying. My baby sitter came over crying because my daughter had gotten mad and hit her. I said, "I can't have you coming over to work crying. If you can't handle my daughter, tell me now. Don't wait until something happens and it's too late." I told her, "I'm sorry but I'm going to have to find someone else." I couldn't work over here worried that my daughter was beating up on her baby sitter.

I did have a real good dependable baby sitter but a few of them, I just as soon not have them. Playing the stereo real loud and just basically not watching the kids. One of them let the kids run to a point where the kids knew better and they told me. They were uncomfortable with how much freedom she was giving them.

I only needed a baby sitter two days a week for an hour, an hour and a half. We had just moved here and she was probably 13. My son plays outside right beside the stairs here and I told her to keep checking on him. I found out the next day that she went out to check on him and he had walked across the street (a heavily traveled route in the town). I gave her notice the next day. That's when I decided to stay home and watch my own kids and make some money baby-sitting.

Two parents had positive experiences using teen-agers in the summer, however.

I got really spoiled because for three summers I had a wonderful teen-ager, and now I have just a regular teen-ager. She takes fine care of the children, I don't have any trouble with how she handles the kids. I just wish she would do more around here...The other teen-ager did all my laundry and all my ironing and washed and waxed the floors.

She just lives across the street and she has a little sister who's nine months older than my daughter. They play together constantly, so it worked out really well. She's been watching my daughter for a couple of years [in the evenings] and she's been really good with her. I have the comfort of knowing that her mother was across the street, if anything were to go wrong.

Evaluating a Potential Provider

One concern voiced by child care advocates is that parents, desperate to find care, will not take the time to evaluate a provider before leaving their children. In rural western Maine communities, this problem is lessened because most people already knew each other.

Analysis of early telephone returns indicated the importance of knowing the provider to families looking for child care. To explore this phenomenon more fully, an additional question was added to the second half of the survey. Respondents were asked when they had first become acquainted with their provider. The fear that parents will leave their children with strangers was unsupported in this study. Of the 43 working parents asked the question, none reported meeting the provider for the first time when dropping off the child. Only eight parents met the provider for the first time when arranging care. In contrast, 17 people first became acquainted many years ago and 12 people had known the provider all their lives. The percentage distribution is as follows:

Table 5

First Became Acquainted with Provider Four-County Respondents (in percent)

When first dropped off child	-
When arranging care	19
Less than a year ago	5
More than a year ago	9
Many years ago	40
All of life	28
Number of cases	43

Most of the Dixfield area parents who did not know the provider prior to arranging care made a point of visiting before making the decision. They also relied on references from friends. Here are three experiences:

Me and my husband took Andy up there and we sat and talked for

¹² One parent who used child care for non-work purposes did indicate meeting the provider for the first time when dropping off the child.

almost two hours letting him play around and watching her son with him and Jane with him. We had no doubts when we sat there that he's be happy there.

I went to visit for an hour one day. Before I even made the decision I talked to my friend Betty who has been here a long time and knew her. Betty just doesn't let her kids go anywhere, her kids have to be where she knows the people. So I trusted that plus talking to Wendy (the provider).

She was recommended to me by seven people, at least. Because I went around and I said, "If you were me, who would you recommend to watch your kids, and she was tops on everybody's list. I called around and everybody that has kids with her said she was alright. And I spent a couple of hours over there and she's really good with the kids, she's really patient. She explained how she treats them if they do something wrong. She seemed to be on top of the situation and that's what I want.

Only one mother recalled that she was rushed into making a decision to bring her children to the nursing home program:

I think we came for a short while before and got papers and things that we had to fill out but my kids weren't here as long as they require. They wanted them to come for at least an hour or two but I don't think it was that long. We were just getting a house. We were moving, we were living at my in-laws, and I was getting this job and it was right before Christmas so everything was really busy. Then she [her supervisor] called me on Friday and wanted me to start on Monday so it was quick.

While most working mothers in the Dixfield area were satisfied with their current child care arrangements, they experienced many of the pressures and frustrations of trying to balance work, family and child care. They also found good care hard to find. Chapter Four will explore the first set of problems. Chapter Eight will explore the second.

CHAPTER FOUR

WORK, FAMILY AND CHILD CARE

If I weren't working, we wouldn't be able to live. That's one way of looking at it. (A Dixfield area mother)

A majority of women with children are now employed outside the home in this country. Forty-two percent of the four-county respondents reported that their families used child care primarily because mothers were working. This phenomenon has changed markedly traditional spousal and parental roles. While conservative promoters of "family values" argue that mothers should stay at home to raise their children, this is a luxury that many families can not afford.

Income and Benefits

Most women in western Maine work to supplement the family income. Table 6 compares the incomes of families who use child care for work with those who use it to run errands or socialize. If women were not working out of economic necessity, the income of two-earner families would be substantially higher than that in one-earner families. However, in this region, the difference in total income between families with two-income earners and those with one was not statistically significant. This suggests that both parents work to achieve the same standard of living enjoyed by families with one working parent.

Table 6

Annual Household Income by Reason for Child Care Use Four-County Respondents
(in percent)

	<u>Work</u>	Non-Work
Income		
\$20,000 or less	19	25
\$20,001 to \$25,000	18	13
\$25,001 to \$35,000	30	29
\$35,001 to \$50,000	24	24
Over \$50,000	9	9
Number of cases	97	70

In the Dixfield area, four out of 20 families lived on incomes of less than \$20,000 a year. In two of these families, both parents worked full time. The third was headed by a single working parent on AFDC and the fourth was a student on AFDC. In eight families, the parents' combined income was between \$20,000 and

\$35,000. Six earned between \$35,000 and \$50,000. And two families were earning over \$50,000.

Access to health insurance was a priority for Dixfield area families. All had some form of coverage. However, employer group plans covering all family members were available to only three out of four families. Two families were on Medicaid; two were covered by expensive individual policies. Other families had a combination of Medicaid, employer and self insurance. One family had coverage for only two of its four members. Four women whose husbands worked in the woods (and had no insurance) were able to obtain coverage for their families through their jobs. When families cannot afford insurance, the impact can be devastating. In one family, the mother was insured through her employer and her preschool son was on Medicaid. However her husband, a logger, and her school age daughter had no insurance.

If I was to get it for the kids, it would be roughly \$25 a week from my paycheck, so I can't. I would love to. My son is covered by the state program because he is under seven. But my daughter has no insurance at all. So far we've paid for a broken foot, a broken arm and a broken hand. But we had to pay those, \$700 to \$800 apiece.

A tree fell on my husband and pinched his leg between the skidder tire and the tree. He ended up getting a blood clot and was in the hospital for a week. The charity care covered it through the hospital. And I thank God we was lucky, we got through without his income. The person he was working for didn't carry [workers compensation insurance]. I'm sure he could have sued the guy to pay his bills and the guy probably would have had to have paid it but then he wouldn't have had a job to go back to once he got better.

Owning one's own home is increasingly beyond the means of low and middle income families in Maine. The pressure on real estate is being felt in the Dixfield area. Six families lived in mobile homes, one rented a house and another rented an apartment.

Why Mothers Work

To answer this question, Dixfield area parents were asked how important the mother's income was to the family. Of the 19 parents who were working, 14, or nearly three-quarters, said that their earnings contributed to meeting the family's basic needs. In eight families, the wife's income contributed from 50 to 100 percent of the family budget. Three husbands were unemployed: one because of a work-related injury and two had been laid off. One woman was separated from her husband and he did not pay child support. In six families, the wife had the more secure job. One woman described their situation when they first returned to Maine:

We knew we'd probably have a tough first year because my husband didn't have a job [lined up] so we came [to Maine] thinking I might be the only bread winner. It didn't turn out that way but I do have the better job of the two of us.

This wife generates the stable income in this family:

I've carried us for a couple of years on what I make...He was unemployed in the winter again because of lay-offs in construction. He's helped towards paying the baby sitter but it was just basically my income and it wasn't much.

Three wives were working so that they could upgrade their housing situations. Two families, one living in an apartment and the other in a mobile home, were saving money to buy land and build a home. The third family was building an addition on its home.

Only two wives fit the stereotype of the mother who works primarily for personal fulfillment rather than out of economic necessity:

[Working] is not that important [financially]. It is important to my sanity. I've always worked. I'm not a housewife and was never made to be a housewife. I've been working since I was 16 years old. And I enjoy it. I love my work.

It's nice. It's a little bit of extra money. I mean, every dollar counts but we don't rely on it for anything. I just work to get out of the home because I want to go out. [The money] is not important at all.

The Impact of Mother's Work on the Family

Women often feel caught between their need to work outside the home and the burden it places on them and their families. Several women expressed anxiety over leaving their children even while recognizing that the separation was beneficial. Others felt bad about having to wake children at an early hour to get them to the provider. The guilt mothers felt using child care was exacerbated when children did not want to go. A mother who had stayed home with her children until her youngest was five was forced to go to work when she separated from her husband;

In a way I was ready [to got to work] and in a way I wasn't. I felt the kids and I needed that break because we were around each other all the time...When I first started, it was hard taking them over there and dropping them off, especially knowing how much it bothered my son. He's pretty close to me. I didn't think it would bother him that much. But about the second month he began to realize that this is going on all the time. He'd start to cry and that made it hard because we're real close. But he likes it now. He's adjusted to it and I've explained to him why I have to work.

A mother with school age sons was troubled by the fact that they got no break in their routine even during the summer:

They feel that they don't have a summer vacation because they're in a routine. To them it's a routine, day in and day out it's the

same. They like a break from that routine every so often...There's times that they don't want to go to the sitter's. I just have to tell them they have to go. I have to try to reason with them why they should go.

Another mother described what it was like when she was working full time and her two children were small:

I worked 40 plus hours a week and we had no family life. My kids were young enough so that by the time I got out of work, they had supper and they went to bed because they had to get up so early in the morning. You see your kids long enough to say "Hi," "Good night," "I love you." And that's it.

Another mother who worked part time thought that child care was helping her children:

Some mothers think that their kids should stay home and be with their parents, but I think interaction with the other kids is good for them. It's only two or three days. I think they learn more. Sometimes this winter I felt a little guilty [getting them up at] 5:30 in the morning but I thought it's the best thing for them.

However, if she had to work full time, she would feel differently:

I know I would feel guilty. I always tend to have guilt feelings when I leave my kids too much.

One mother decided to quit her evening job so she could be at home with her children. She was thinking of doing child care or adult day care so she could be at home.

I'm getting done work so I can be with them during the school year which I have never done before. But my son went way behind in his grades and I can't put up with that. He needs me home a night. Baby sitters you can't depend on. [You can't say] to a baby sitter, "You make sure he does his homework. You work with him for so many hours a night." I can't do that. That's up to me. I'm the parent not the baby sitter. That's why I'm getting done, so he won't get any further behind which may sound stupid to some people but I'd rather live on less money.

A mother who works full time described the burden of work and family responsibility. Even with a supportive husband, she carries major responsibility for household chores -- and feels guilt at being unable to do everything.

My house is always a mess. The laundry is always piled up. We don't eat a nice meal every night like I'd really like. It was something I always used to do before I worked. Those days are gone. I'm on call. I work weekends. I have to go in after midnight a lot of nights. So things just don't get done around the house. Maybe if I could ignore it, but it drives me crazy.

Fathers Sharing Responsibility

In extensive studies of two parent working families, Arlie Russell Hochschild found that only one out of five husbands shares equally in household chores. She calls the women's movement, which has helped women achieve greater equality in the work place, a "stalled revolution" because women continue to bear a disproportionate burden of work inside the home. She calculated that women working full time outside the home average an extra 12 to 15 hours a week doing housework. She concludes:

If we add up their paid and unpaid work and compare it to that of their husbands, women work an extra month a year. 1

Families in the Dixfield area varied greatly in how large a share of responsibility fathers assumed for child care and housework. In over half of the two-parent families (11 out of 18), fathers were responsible for transporting to, and/or providing child care on a regular basis. Another five fathers helped out occasionally. Only three mothers did not mention the father's participation in either child care or household chores. Not only does the father's involvement ease the mother's physical burden but it helps her deal with the psychological guilt associated with not caring for her children.

One father delivers his sons to the provider, picks them up in the early afternoon and cares for them until his wife comes home from work at 5:30. The mother described her feelings this way:

He picks the kids up around 1:00 or 2:00. It's made it easier on me knowing that they're home at least with one of us.

When husbands share in the transportation and the child care, it benefits both the mother and the children. This mother said:

I used to pick up the children at 5:00 and that was a real long day [for them]. Now that they get home at 3:30, it's a lot easier.

Another mother described the value of having her husband share in the transportation of their daughter to child care:

I think it should be split, to tell you the truth. He gets out before I do. I don't think I would have been able to stand it if I had to travel full time, it's just too long a day. (The family lives in one town, the provider in another and the parents work in a third town.) He can spend time with her, to drive back and pick her up. And he gets the hassles, too, when he picks her up a lot of the time. She doesn't want to leave because she's doing something, so he gets to deal with it on his own. I think it should be half and half. She's his child, too.

¹ Hochschild, 1991, p. 7.

Consistent with Hochschild's findings, the father does not carry half the child care burden in most families. Mothers do not expect equal participation and are grateful for whatever help they get. One woman who leaves her house at 5:30 each morning and returns at 6:00 in the evening described how they share in the care of their infant son:

He's the one that gets up at night with him. He says, "You take care of him when you get home from work and everything. The least I can do is let you sleep at night." But when he's sick, I'd get up.

Even women who work as many hours outside the home and contribute an equal amount of income to the family still feel they have the primary responsibility for household chores.

My husband's very good around the house but he doesn't have time to do it either...He's more than willing to help but -- I'm not complaining or anything -- it's still my responsibility. It's just easier for me to do it, that's why I get up at 5:00 in the morning.

The Impact of Child Care on Work

Not only does work outside the home complicate family life, but the need for child care can impact on work productivity. One out of three four-county respondents reported having missed days from work because of child care problems last year. On average they had lost 4.8 days. In the Dixfield interviews, 13 parents mentioned that they had lost days at work because a child was sick or a provider was not available.

Seven parents mentioned that fathers would take time off from work to care for sick children. In two instances, however, mothers always stayed home because they had paid sick leave and the fathers did not. Sick time was not an issue for three of the remaining families because their children had not been seriously ill. Another three had family members who could stay with sick children. One of these parents was able to solve what otherwise would have been a very difficult problem by relying on family members. The nursing home personnel policy, which rewards employees for not taking sick time, placed this low-income family in a difficult bind:

I have a lovely family. Either my grandmother, my mother or a sister or an aunt could take them. Because I couldn't afford to miss a day. To miss a day for me would be like getting half a

² A 1984 telephone survey of Maine parents' child care practices and needs found that more than 40 percent missed at least one day of work in the last year because child care was not available. Maine Department of Human Services, Child Care in Maine: An Emerging Crisis, Report and Recommendations of the Maine Child Care Task Force, Augusta, Maine, November 1984, p. 9.

week's groceries. I don't believe I've called in more than four or five times [in the seven years] I've been at the nursing home, luckily, and it's because of my family. I earn a sick day every three months. But if you don't use one, you get a \$35 bonus, which is something I try for.

Sick children or children needing medical attention were a problem for one family with four children. According to the mother:

It's a disaster. I imagine everybody who goes through it feels that way. If I have time coming to me at work, then I'll stay home with them. At this job, I get a sick day once a month. But if you have four kids, and you have eye doctor appointments and dentist appointments and doctor appointments and we've got one in braces, there's just a whole lot of appointments you need to take them to. So my husband and I try and trade off and try to take turns on who is going to miss work. If he doesn't work, he doesn't get paid. I get the days and he doesn't. (He is self-employed).

Two parents reported that they had lost days at work because they had not been able to find providers on short notice. One mother who does not get paid sick days, loses a day's pay when this happens:

If my baby sitter wants the day off, then I've got to find another one and that's sometimes hard to do. Sometimes I end up taking the day off because I don't have a sitter.

Even when parents do not have to take time off, anxiety over the welfare of their children can affect their work. One mother had difficulty finding adequate care in the summers for her school age daughter.

I would say at times my daughter having a baby sitter has affected my work. You can't keep your mind on your work. To me my kids are the most important. My job's important, my husband's important, but my kids are at the top and if I didn't think that things were going right, I wouldn't be able to concentrate. I might as well punch out and go home. It hasn't happened much, luckily.

The possibility of losing a provider is also worrisome. Two parents mentioned that they might stop working altogether if they lost their providers.

One mother responded differently to the question about how having children affected her work. She thought that she benefitted because she was able to limit her work commitment.

It's helped me, I think. It makes me really put it in perspective because when I leave I'm looking forward to being with the kids, and so I leave everything at work behind and come home and they are my world. I live in two worlds which is great because I don't suffer from the stress. I do what I can do and my boss knows that 40 hours is about all I care to work and that I'll give them 100 percent when I'm there but when it's over, it's over. I have a wonderful,

exciting job that gives me a lot of satisfaction.

Support from Supervisors

A universal fear of working parents is that the needs of their children will conflict with their job responsibilities. Fortunately, Dixfield area parents were nearly unanimous in reporting they had supportive supervisors. Four supervisors had children of their own and therefore were sympathetic when parents had to stay home or leave work because of child care problems. Three parents appreciated their supervisor's willingness to allow them flexibility in scheduling their work. A newly single mother who works part time was especially grateful for this attitude. Already feeling guilty at having to leave her children for the first time, she found her supervisor's attitude very helpful.

They're pretty flexible at work. If I've had to take an afternoon off or something I've been able to go in and work a full day to make up for it. During inventory week they wanted me to come in two days early and the kids had Bible School. On the third morning [my supervisor] said, "Can you come in?" I said, "Well, my kids are in Bible School and I have to make arrangements for them to get back and forth." He said, "Just come in when you can then. Whether it's 9:30 or 10:00 just come in." So I was able to get the kids to Bible School and my mother was able to pick them up. That worked out okay. But that's why I'm glad they're flexible like that because I'd hate for them to miss out because of something I had to do.

Another mother who works full time values the flexibility in her schedule.

I work from 7:00 to 3:30. I have really wonderful people that I work with. If I have to be late I can make it up on the other end. They are flexible. If you [don't] work the hours, you can make it up the next week, just keep track of it. I couldn't have designed a better job for a mother.

A father who is a teacher had only praise for the support he got from the school system. His wife is an assistant manager in a Rumford store.

The people in the school system here are good enough to know that if you've got two people working it's pretty difficult to get off when in a situation like my wife's; she's sometimes the only person in the store. So, we couldn't very well just close down everything and run and take the kids to the doctor. But I'm in a situation where I can go see the principal and say, "Look, one of my kids is sick and I need to take her to the doctor," and he will say, "Fine, take off and we will get someone to cover your classes."

Only two mothers mentioned that their supervisors were unsympathetic to the demands of child care. One mother recalled her experience asking her supervisor for time off:

It was like, "Gee, I'm sorry that your kids are sick but at

Christmas time without you to run the service desk, you know you're really putting me in a bind."

Another mother described her supervisor's reaction this way:

I don't think [my supervisor is supportive]. She's a young girl, she's only 23. She doesn't have children of her own. I don't think she realizes the obsession a mother feels with her children. I don't think she has ever had anything that important to her. When my daughter broke her hand, I was at work. She did fill in for me while I was gone [to pick up my daughter], but her attitude was, "Hurry up and get back so you'll be here to serve." She did let me go, she didn't give me a hard time about going, but I don't think she understood the need I had to go.

Full-Time Versus Part-Time Work

One key to managing the demands of work and family is choice. Families who were in a financial position to allow one parent to work part time felt much less stress than families who did not have that option. One mother who worked part time explained it this way:

[If I had to work full time], it would probably be a lot different. I would feel the demand and I would be tired. That's why I sympathize with the girls that work 40 hours...I had to work 40 hour for the first two weeks of orientation and it was very tiring. There was a lot going on in my life then and it was tiring. I could do it. I would just have to have my husband pitch in more than he does, but I wouldn't want it.

And another said:

Part time is what I wanted. I like having my days off. It's nice to be able to have a choice to be able to do it because there are people who, I realize, don't have a choice and I feel blessed that I do. I don't have to work if I don't want to; it's because I want to.

Another family has made another choice. The mother works full time and the father takes the major responsibility for child care. He transports the children to and from the provider and cares for them for much of the afternoon.

We're very happy with [this arrangement]. We really are. Two years ago my husband was working for Timberland in Dixfield and he would work until 4:00 or 5:00 so the kids would have to stay there until that time. (He is now self employed.) It's really helped with him working at home. I think the kids are better for it.

Of all the parents interviewed, the following couple were the most creative about how to generate income and care for the children and the house. They had returned to Maine after several years' absence and had planned for the husband to stay home with the children. The wife explained:

One of us was not going to work because I couldn't stand the thought of putting my kids in day care.

Her husband added:

I'd like to stay home and do the laundry and the cooking and everything. Yes, that's what I had planned when we moved up anyway. But I was only here two weeks and I had a job.

The couple is still debating how they can best share the work. She said:

I have the better job of the two of us, so if anybody was going to go part time, which we discuss nearly every night, it would be him just so things got done around the house.

Working Mothers' Preferences for Staying at Home

As difficult as it is for working mothers to manage their dual responsibilities, many enjoy the work they do. Their work is an important part of their identity. Dixfield area mothers who worked out of economic necessity were asked, "If you had a choice, would you prefer to stay at home?" Of the 16 parents asked, ten said they preferred to work. Significantly, six of these women who work full time preferred to work part time or part year. One mother recognized that her sense of fulfillment was an important ingredient in her relationship with her children:

If I didn't have to work [full time], I would stay home during the summer and work during the fall. I couldn't stay home while the kids were at school and sit there. That's not the kind of person I am. If I couldn't be happy myself, I wouldn't enjoy their company as much as I do now. I get out of work and I enjoy picking up the kids and going home. My daughter helps with supper, she does dishes, we go for a bike ride after. I enjoy this time. But I don't think if I was home all year round with no life of my own other than with my family, I don't think I would be as happy as I am now.

Another mother also would prefer working part time:

Now that I'm back at work, I really enjoy my job. It's challenging. I just wish maybe I had somebody home here to do my housekeeping and maybe where I could stay at home a little bit more with the kids. Not maybe work the full 40 plus hours. I could work maybe three days a week but that doesn't fit in right now. But I still enjoy working. I've found that the five years that I didn't work wasn't a challenge. I was too bright to stay home. I do well at my job and it's rewarding, so I'm not going to quit.

Here is a mother who readily acknowledges that she is not well suited to staying at home:

If I could do what I really would like to do, it would be to work part time. I have to do something, I have to work, or I would go crazy. I couldn't just stay home and be a mother and all of that. Women who do that have some special power I was born without. I have to have some escape.

For the following mother, the obstacle to working a more flexible schedule came not from her employer but from her child care providers.

I would choose to work less than I do. As a nurse I could work two days a week. I wish I only had to work two days. When I had Mary, I worked four ten hour days and that was perfect. But Ruth and Wendy don't have that flexibility. So I'm kind of locked into the five eight hour days because of my day care situation. But if I could, I would work less. But I don't know if I would not work at all. I do get a fair amount of fulfillment from [my job]. Part of my identity is my job. I like being a nurse, I like the rewards I get for doing a good job and that's a driving force behind my personality.

This mother would continue to work but would be happier with a job closer to home.

I like to work. I don't know if I can be an organized housewife. I've always worked ever since I got out of school...I like to work, I really do, I enjoy it. I probably wouldn't [choose] anything so far away, probably closer to home, but I think I'd have to work.

Six parents thought they would prefer to stay at home but only until their youngest child was in school. This mother only has recently gone to work:

I enjoyed being with the kids. I had my flower gardens. The kids and I, we'd go for hikes and we'd go for picnics. They liked to bake so often times, we would bake things. If I didn't have to work I would probably stay home and enjoy it. In a way I was getting a little bit restless as they were getting older...They're starting school in the fall and I was like, "What am I going to do? They're both going to be in school and I'll have no one to take care of during the day."

Two women were forced to return to work earlier than they would have liked. One mother had returned to work after raising two teen-agers when she became pregnant again. She stayed home for three years with the third child and then returned to work to help pay for college for the older boys. She said, "If the boys were not in college, I would have liked to have had just a couple more years [at home]." The second mother wanted a job in the school system and when a full-time opening occurred, she took it even though it meant working more than she wanted:

I wanted to pick my time to go full time (when her younger daughter started school). I didn't have that choice. So when I got full time I had to accept it. I'd rather be home with them.

A mother who had never had the luxury of staying home with her daughter thought she would like it but was not sure since she had never experienced it.

That's hard. Some days yes [I would like to stay home] and some days no. I'm a parent but I'm also a worker and the worker has been more of my life than the parent. She was unexpected and I was real young and I've always had to work. Maybe if I had something else also to do at home I would because housework only takes a minute when you do it every day. I need something to fill my time. Sometimes [my daughter] wants to be with me and other times she just wants to do her thing. So I think if I had the chance to stay at home and have something else I probably would do it.

The one father interviewed expressed concern over young children not being raised by their parents. While he did see a role for fathers in nurturing children, his primary focus was on the need for mothers to stay at home. His view of mothers' preferences contrasts with those expressed by the mothers themselves.

I don't think there's probably a man who wouldn't prefer that his wife be home with his children so that they can be with their mother. I think naturally no matter who you are you're going to be more attentive over your own children before you will somebody else's. I mean, I think that's human nature... I think there's a psychological thing that takes place when children that are very, very young are separated from their natural mother for times during the day; I think there's time when children need the security of their mother or their father, maybe when they're sick or maybe when they're frightened or scared and I think there's a psychological thing that the children go through to making adjustments to other humans, other than their own biological parents. Yes, I would much rather see [my wife] stay here but I don't see anybody putting a check in the mail to me...I think she would probably answer it the same way. I don't think there's too many mothers that wouldn't want to be home with their kids, really.

CHAPTER FIVE

PROFILES OF FAMILY DAY CARE PROVIDERS

The focus shifts in this chapter to the women who care for the children of working parents. It will explore who these women are, why they are doing child care, how long they have been doing it and how long they plan to continue it. Chapter Six will describe what their programs are like. Twenty-two women living in the Dixfield area were interviewed for the study. Sixteen provided care at the time of the interview and six no longer cared for children.

Socioeconomic Characteristics

In several ways the women providing child care in the Dixfield area resemble the working women they serve. This is not surprising since, as noted earlier, several women who had been providers now work outside the home and most of the current providers have had out-of-home work experience. In other respects the two groups differ significantly. Table 7 compares their socioeconomic characteristics.

As one would expect, the ages of the working mothers needing child care cluster around 26 to 35, with relatively few younger or older women. Among providers, two clusters predominate: women with preschool children and older women whose children are grown. There is virtually no difference in marital status between the two groups. While the average household size is similar, it masks a greater variation in the number of children in provider households. Four providers had no children living at home and five had more than two children. In contrast, only two working families had more than two children.

The two groups vary most significantly in total family income. Nearly twice as many provider families earn less than \$20,000 a year than do families in which the mother works outside the home. Nearly four times as many two-parent working families earn over \$35,000 a year than do families doing child care. This difference is the result of the limited income generated by child care providers in the Dixfield area since there is no appreciable difference in spousal earnings between groups. (See Chapter Nine for a discussion of child care costs and provider earnings.) In each group, two families are on AFDC. All members of both groups have some form of health insurance.

Providers are less likely to have gone beyond high school than are mothers working outside the home; however, two providers had college degrees versus one working mother. More than half of the providers have preschool children -- a result of their desire to be at home raising their own children. In this regard, Dixfield area providers are typical: national studies have also

Table 7

Characteristics of Dixfield Area Parents and Child Care Providers

	Parents	Providers
Average household size	3.9	3.7
Age	*	*
Under 26	15	14
26-30	40	36
31-35	30	18
Over 35	15	32
Marital status		
Married	90	86
Divorced	10	9
Never Married	19	5
More than two children	10	23
*Children under six	85	55
*Household income		
Under \$20,000	20	39
\$20,000-\$35,000	40	50
Over \$35,000	40	11
Health insurance	100	100
*Education		
High school graduate/GED	42	57
Post-secondary		
technical training	21	14
Some college	32	19
Four year degree	5	10
Number of cases	20	22

^{*} The difference is statistically significant

found that half of family day care providers have their own preschool children.

Types of Providers

Child care experts are well aware of the great variation in family day care providers. For example, Edward Zigler of Yale University's Bush Public Policy Center has called family day care "a cosmic crapshoot," noting that among its practitioners are found the very best and the very worst in child care. Several efforts have been made to define the types of women who are doing child care in their own homes typically along a familial-professional continuum. 3

The first type of provider is the relative or close friend who cares for a child as a favor to the family. Once common, this type is declining as more women enter the labor force. Often a grandmother, this provider is not interested in caring for non-relative's children and does not think of what she is doing as a job. Two of the family day care providers interviewed for the study fit this profile.

The next provider type along the continuum is the "experienced mother" (Perreault), the "traditional woman" (Wattenberg) or the "family-like provider"

Joe Perreault, "Why People Become Family Day Care Providers," Save the Children/Child Care Support Center, Atlanta, Georgia, 1985, pp. 1-6.

Esther Wattenberg, "Characteristics of Family Day Care Providers: Implications for Training," Child Welfare, Vol. LVI, No. 4, April 1977, pp. 216-218 and

Betsy Squibb, "Future Directions in Research on Family Day Care," unpublished manuscript, University of Maine at Farmington, Farmington, Maine, pp. 6-10.

¹ Claudia Kramer Shuster, The Hard Questions in Family Day Care: Using the National Experience to Inform Research and Policy Directions. Draft Report of the Family Day Care Round Table. The National Family Day Care Project of the National Council of Jewish Women and the Bush Center in Child Development and Social Policy, Yale University, New Haven, Connecticut, June 1989, p. 6.

² Quoted in Diane Adams, "Understanding the Image of Family Day Care," an issues paper commissioned by Save the Children/Child Care Support Center, Atlanta, Georgia, 1990, p. 7.

³ See Adams, 1990, p. 4.

⁴ Wattenberg estimates that 80 percent of children now in family day care are in the homes of people who were not known to the family prior to starting the child care arrangement, p. 211.

(Squibb) who sees caring for other people's children as an extension of her own maternal role. She may have started doing child care when her own children were young or as a favor to a relative or friend and then began taking in other children as families become aware she was baby-sitting. Often she will continue providing care even when her own children are grown. She may never have worked outside the home. She offers long-term care and considers this work her career. She does not see herself as a professional and tends to charge low or modest fees. The money she earns is welcome but is not critical to the family income. As a "natural" mother, she is resistent to regulation and training. Another two interviewees were clearly "experienced mothers."

The next type is the mother who has worked outside but wants to be at home to raise her own young children. She may have had difficulty finding child care that meets her personal standards and that she can afford. She may have found that she cannot afford to work outside the home once she has paid for child care, transportation and clothing. According to Perreault:

In this family, the husband is clearly the principal wage earner, but the amount of potential income she can earn as a provider is the factor determining whether they can "afford" for her to be home.⁵

This provider is more amenable to training and may discover that she likes doing child care enough so that she may continue it even after her children start school. If she returns to outside employment, however, her tenure as a family day care provider may have lasted only a few years. This was the most frequent type of provider interviewed in the Dixfield area. Eleven women reported having started doing child care so that they could be at home to raise their own children.

A fourth family day care type is the "entrepreneur" who seeks to increase her income by enrolling the maximum number of children, using government subsidy programs like Title XX and the Child Care Food Program, and making use of self-employment tax write-offs. Her husband may contribute to the "business" by building equipment, working as a part-time assistant, or becoming a full-fledged partner. She may run other home-based businesses such as Tupperware or Avon. She is interested in both training in child care and child development and business management. Coastal Enterprises' Child Care Development Project has financed several family day care providers of this type. In the Dixfield area, five providers exhibited some, if not all, of these characteristics. While raising their own children was important to three of the five providers, they also exhibited "entrepreneurial" behavior.

Lastly, there is the family day care provider who has formal training in child development or early childhood education and sees herself as a professional. She may have acquired the training prior to becoming a family day care provider or obtained it on-the-job through such avenues as the Child Development Associate (CDA) program. She may have chosen to work at home to be with her young children or because she has more freedom, and perhaps more income, than she would working in an institutional setting. She tends to offer a more

⁵ Perreault, 1985, p. 2.

structured program which includes focused learning activities. None of the Dixfield area providers meet this definition of a professional caregiver. Two providers were professionally trained: one had an associate degree in early childhood education and a second had a four year degree in elementary education. However, the first ran an unstructured program and the second cared for one daycare child while she was at home educating her own school-age son. Alternatively, the five women who ran the most structured and enriched programs were not professionally trained and three of them were unregulated.

Length of Time Providers Have Been Doing Child Care

As mentioned earlier, high provider turnover and the resultant lack of continuity of care is one of the greatest problems in family day care. Experts estimate that most family day care providers are in business from two to five years and turnover among regulated providers is between 30 and 50 percent a year. The average length of time providers had been caring for children in the urban National Day Care Home Study was three years. Dixfield area respondents had been doing child care for an average of 4.1 years. Table 8 shows the distribution of provider tenure.

Table 8

Dixfield Area Provider Tenure (in percent)

Less than two years	23
Two to five years	50
More than five years	27
Number of cases	21

Child care experience ranged from one month to eleven years. The average tenure of the six providers no longer doing child care was slightly higher at 4.7 years. Five of the women, including the two with the longest tenure, reported that their child care experience had been sporadic. Here is the most extreme example:

I sat for four children from three families for about a year and then I stopped [to go back to work in the mill], and I went back to baby-sitting when I was laid off -- I would baby-sit maybe six months. Somebody would call me if they knew I was laid off to baby-

⁶ Shuster, 1989, p.17.

⁷ Adams, 1990, p. 1.

⁸ Divine-Hawkins, 1981, p. 13₃

sit. It was off and on.

Families were willing to use her even though they knew it would be for a short period because of the difficulty in finding good providers. Now that she has a child of her own, she is considering fixing up her mobile home and baby-sitting again on a more regular basis.

Prior Child Care Training and Experience

One of the issues dividing the child care community is the need for formal training. Child development experts maintain that caring for young children is a skill that requires formal training and credentialing. They also argue that professionalizing the field in this way will enhance the value of child care and the prestige of caregivers in the eyes of the public. This belief has resulted in most states setting training requirements for workers in child care centers. However, only 40 percent of states have established such requirements for family day care providers. Maine, for example, only recently has established a training requirement for home-based providers in its draft child care regulations. In Maine, many legislators, practitioners, and parents view child care as an extension of parenting, a skill acquired through practice, if not a natural ability, Regardless of the merits of these two points of view, the reality is that very few family day care providers are formally trained either prior to or after becoming caregivers.

Providers in the Dixfield area fall into three groups: 1) those that completed related education programs; 2) those that aspired to training that involved working with children but were diverted from or did not complete it; and 3) those for whom formal training was never a consideration.

Three providers had post secondary degrees in areas directly or indirectly related to the care of children. One provider had earned a four year degree from the University of Maine in child development and elementary education, had taught first and second grade and had worked as a children's librarian. The second provider had a two year degree from the University of Maine at Farmington in early childhood education, had been trained at the University's day care center and had done a practicum in a family day care home. The third provider, who only did child care during the summers, had a four year degree in community health. She works as a teacher's aide in the special education program in Dixfield.

Four providers had planned or begun, but had not completed, training for careers working with children or infants. Two of these four providers were diverted by the birth of a child.

I had taken child care classes in high school. I was going to go to college and do something with small children but I had gotten pregnant with Jason and so I didn't go. I just wanted always to do something with small children.

⁹ Gormley, 1990, p. 22.

I was going to go for special education. I started college and I left my infant daughter with a neighbor and after the first semester, I quit. I wanted to be home with her. The person I chose had never had children, had never baby-sat and so she was greener than I was with a newborn, so it just didn't work out. I stayed home from then on.

Another provider had worked with special education students in high school and had taken relevant courses in her college physical education program (which she did not complete). The fourth provider was trained as a CNA by the local job training agency. She wanted to go on to be trained as a Licensed Practical Nurse and work in a maternity ward but at the time the agency did not fund LPN training.

Thirteen providers had neither aspired to nor received any kind of formal training. Six providers mentioned baby-sitting as teen-agers as experience that prepared them for child care and another five pointed to raising their own children. Two providers mentioned no prior experience but emphasized their love of children. One responded that she had "absolutely no experience" but found that "it came so easily having kids around."

Prior Work Experience

The harshest critics of women who "just baby-sit" suggest that they do this work not because they have an interest in or aptitude for caring for children but because they need to earn income and cannot get jobs doing anything else. This characterization could not be further from the truth with respect to Dixfield area providers. Only two of the 22 providers had never worked outside the home. Older women with grown children, they were the "experienced mothers" in the sample. Both chose to stay at home to raise their own children and both enjoy being child care providers. One of them did convey a sense of inadequacy, however:

It's like I don't know what I would do if I didn't do something like this, you know. I'm not trained to do anything outside of the home, really, since I've always been at home.

The second woman felt some confusion over what family day care was:

You have these feelings, that you're not quite working and yet you are working.

The remaining providers had a wide variety of work experiences paralleling the jobs held by their clients. Seven providers had worked at Bass Shoe and five had held jobs at other area mills. Six were store clerks in the past, three were CNA's, two were former secretaries, and two had waitressed. The remaining jobs included running an antique store, working as a machinist, sewing, and working in a health club and a movie theater.

It is not uncommon for family day care providers to work outside the home as well. In CEI's Child Care Development Project, five out of twenty-three home-

based providers either are or have worked a second job while trying to get their child care businesses off the ground. Only one Dixfield area provider worked outside the home when interviewed. However, a second provider had worked nights in a movie theater 30 miles away when she first started doing child care. She exhibits one of the characteristics of the "entrepreneur" described earlier. Among the most "businesslike" of the providers interviewed, she does home basket parties and makes Christmas wreaths with a neighbor, in addition to her work as a child care provider. They are going to try dried flower arrangements next. Of her various activities she commented, "I always try to center them around the home." A second provider is similarly involved in multiple income generating activities:

Avon, Success for Living (religious books for children), Amway and baby-sitting, those are all in-home businesses and each works to supplement our income.

Reasons for Starting Child Care

According to the categorizers of family day care, the initial motivation for starting child care is a predictor both of the type of program one is likely to implement and how long one stays in business. For example, women who do child care so they can stay home with their children tend to run unstructured programs and only stay in the business until their youngest child enters school.

The Dixfield area providers exhibited a range of motivations: they wanted to raise their own children; they had difficulty finding adequate care for their own children; they had been asked by relatives or friends; and they had been trained to do child care. Over half (52 percent) said their reason for doing child care was so they could stay at home and raise their own children. A typical experience for a young mother was to return to work after the birth of her child and then realize that she did not want to be separated from her baby:

I went back to work for five weeks after he was three months old and I ended up taking him with me almost every day; I couldn't stand to be away from him. So I decided that's it, I'm going to stay home and this is what I am going to do. Because I love kids so much, I figured why not have a couple of more around the house. That's how it got started.

Three of these eleven providers also mentioned the problems they had experienced finding and arranging care for their children when they worked outside the home. Needing to contribute to household income, they found family day care the answer. Here are two comments:

I needed to make money and I couldn't find a baby sitter that I could trust. I wanted to bring up my own kids. The only way I could do that was to baby-sit myself.

I didn't want to go back to work after my first one was born. To be truthful, I just couldn't leave him. They didn't have a lot of day care centers then in this area, either. It was always someone at

home doing it, and I didn't know a lot of people that I wanted to leave him with, so I took in one and then two, and I found I really liked it and it gave him someone to play with and I kept adding on and adding on, and people would hear about me, you know, and they'd call all the time.

Another three providers had made the decision to stay at home with their children without planning to do child care. However, once people learned that they were not working outside the home, they were asked to baby-sit:

Somebody just called me up one day and wanted to know if I could take care of their baby. I had Susie then and was pregnant with Barbara so I wasn't working.

Five providers simply responded that they got started doing child care because they had been asked to by a relative or a friend. Child care experts view such providers as the least professional and least committed to their work. This was not the case among Dixfield area providers. One woman who was asked by a relative to keep her new baby "until she could find somebody," is still caring for children ten years later, is state-regulated, and considers what she does her job. In response to a question about what parents do when she is not available, she said:

I never call and say, "Well, I'm going shopping today, I can't babysit." I don't think I have ever called and said that I am sick. This is my job and these women depend on me. I have to be here.

One woman traveled a long and difficult path to become a provider and continues to feel ambivalent about it.

I stopped working at the mill five years ago because I finally realized that somebody else was bringing up my children and I didn't like that. I was working 60 and 80 hours a week. I thought that I needed to slow down and think what's more important. It was a hard decision back then. I had a really good job, a really good paying job so emotionally and physically I felt like I should still be out there working. I thought that I wasn't good enough if I just stayed home just taking care of kids. That was put in my head growing up [by my mother]. As I've grown I certainly differ with that attitude. I think it's the number one job priority and I think a lot of people just really forget about that, which I did back when I was working so much. It took me a long time to get over that but I'm glad I did...When I got done work outside the home people knew My friends just needed somebody to take care of their children. At first they would say, "Can you watch them today?" But it seems as if everyone is getting more into work and needing somebody to watch their kids. I picked them up a little at a time because I never was quite sure if I really wanted to do that, to have children here all the time with my own. It ties you down a lot.

The woman with the degree in early childhood education became a family day

care provider because that was what she was trained to do. A CNA at the nursing home accepted the job as director of the on-site child care program when it first opened. Two women became providers simply because they wanted to care for children. One of them (who is licensed and sees child care as her life work) had to be asked first:

I had been wanting to do it for the last couple of years anyway but I didn't dare get done work because I wasn't sure. So when one of my sister's friends was going to work and she needed someone to sit her child, I gave my two weeks notice and started.

Plans for the Future

Not only does high provider turnover generate concern about the impact on children of lack of continuity of care, but it also raises questions about the wisdom of investing public funds in outreach, training and other provider support services. In order to craft effective regulatory and support policy for rural child care providers, policy makers need to understand what motivates them to continue serving the working families in their communities. There was great variation among Dixfield providers with respect to the length of time they expected to do child care.

Short-Term Commitment: Of the 16 providers who currently cared for children, eight (half) estimated that they would stay in the business another three to five years. Of the eight, half are regulated. The director of the program in the nursing home said that she would stop work when her husband retired. The remaining seven, all of whom did child care so they could be at home with their children, reported they probably would return to work outside the home when their youngest child reached school age. One woman considered the possibility of continuing the work even after her youngest child went to school:

I want to do this at least until my daughter is in school full time, in first or second grade, but if I enjoy it then as much as I do now, I'll probably keep on continuing because I really do enjoy it. You get so much out of it, you really do. And, who knows, maybe another baby will come along and then I'll just keep on doing it until that one gets to school, too. Who knows?

Long-Term Commitment: Two women, the ones who had never worked outside the home and whose own children were grown, responded that they expected to continue providing care for the foreseeable future:

Who knows. If something should happen, if there's sickness in the family or something like that then I would definitely give it up. But right now I see no reason to stop.

Of dear, I don't know. I really don't have any desire to work anywhere else outside the home, so probably as long as I can stand it.

Career Advancement: Child care advocates are interested in developing career ladders in family day care. For example, a woman who begins doing child care in her own home may go on to hire an assistant and then may start a center. Five of the women interviewed expressed interest in a career progression. One woman who recently had started a licensed program, spoke enthusiastically about her plans for the future:

[I plan to do child care] forever. I'd like to have a center someday, if it works out. I'd like to have one, just sort of be like school. It would be more organized and with a helper so we could sit down and we could paint and draw. I wish I had been a teacher. I was thinking about renting my brother-in-law's house to have more children but then they didn't move after all. Someday my basement is going to be all day care. I've got to figure out how that works [having a helper], the pros and cons. I'd have to go up on my prices.

Another woman had given up her registered program when she remarried:

It was hard for me to get done. I kept them for a little while to see if I could handle it with my three new stepchildren and my two children. So I thought I'll keep them for a few weeks and see if I can do it, and then it made it just too hectic. I didn't feel I was spending enough time with the kids I was taking care of, because it's in my home and I had other responsibilities and I did try to take care of that at the same time, too. You know, housework and things like that. So, I figured if there was someplace I could go off to and take care of them, it would be easier, but a lot of people do it in their homes if they have a lot of kids. I couldn't. Not with all these running around.

When she did family day care, she had thought about expanding:

I was thinking of getting someone else to go in with me and really going full force with it, but I just couldn't find someone that was compatible enough to do it with, that would be there every day...I find it easier to have someone to help you, as far as being able to spend the time with the children and someone else being able to do the clean-up, that type of thing. If you have a lot of smaller ones you just can't do arts and crafts and take care of four-year olds and... have a couple of one-year olds playing and not getting into the glue and making the other children angry. If you're going to have the ages like that, it would be much easier if you had a little bit of help, I think. Two people -- someone to tend to the smaller ones, and someone to carry the older ones, if you're going to have the mixed ages. And it's hard to find kids that are all one age group.

She thinks she would be able to do child care again even with her blended family if she could find someone who could fill in at the end of the day. Because of her own family responsibilities, she would like to be able to finish by 3:00 or

3:30

She and her husband also talked about the possibility of going into business together:

My husband works in the woods [as an independent contractor] and things just don't look good. Right now, he's been out of work the last couple of days because IP (International Paper) can't come up with a contract for him, a place to cut. We would like to do something together. (They considered buying a sporting camp on Moosehead Lake). We felt that was something we'd both enjoy doing and could handle with the kids but everything is just so high-priced up there. We'd like to do something together. My husband said, "If we could made enough money [at child care], I'd quit my job in a minute." Because he just loves kids, the kids just love him and he's just one of those people that take to them.

Another woman in a very different situation would like to expand her child care activities. On AFDC, she currently provides before and after school care for a niece as well as caring for her four sons. She sees child care as a desirable option because she would like to work and get off welfare. She had gone so far as to send for a licensing application. Two of her sons are in school all day, one is in kindergarten mornings and one is in pre-kindergarten afternoons. She knows that she could not afford child care if she were to work outside the home. In fact, it was the cost of care that caused her to stop working four years ago and go on welfare. She also knows she would have to find another location in which to provide child care. She lives 17 miles from Rumford, fives miles from the nearest highway in a beautiful but remote area. She lives rent-free in a house she and her ex-husband started to build on his parents' land. The house is not complete.

I would like to baby-sit, to do something and get out from under. I thought my two younger boys could be dropped off [from kindergarten] at the day care [she might run in Dixfield or Rumford] and I wouldn't have to worry about finding somebody to watch the other boys.

I've always made stuff with my kids, as you can see. They've always drawn and I've always hung it up and I just thought something like this my kids could be involved in, too. I've always liked kids and I've always baby-sat and I just thought it would be the ideal thing. My kids have their own workbooks. My youngest could say his whole alphabet when he was a little over two.

I thought of working in the nursing home [her mother, and aunt work in the kitchen]. But Mom said it really wasn't much money and most of the jobs are part time and what would I do with the kids' school schedules. On storm days who would I get?

Yet the obstacles which prevent her from implementing this plan are considerable. She has no car. She would have to pay rent if she were to move to a community

like Rumford or Dixfield. She had hoped that she could move into her father's house and do child care there but his plan to move out fell through. She had not heard of ASPIRE, Maine's training program for welfare recipients, even though there is an ASPIRE office in Rumford. This family would not easily find a way off welfare; however it is certainly possible. One option is a job in a child care center with a before and after school program. This would give her some income and training and could solve her own child care problems. Another option is to find a woman in the Rumford-Dixfield area with whom she might go into business. Without assistance in planning and managing such a transition, however, her chances to escape her current circumstances are remote.

The fourth woman considering a career change currently cares for two preschool nieces in her home. She had to cut short a nursing career because of a debilitating disease from which she is now recovering. Success in advocating for her two dyslexic sons and her child care experience has prompted her to think about a career working with learning disabled children:

[Child care] did start out being a favor [to relatives] but I have enjoyed it to the point of probably going into that line of work. Having my boys has made me realize that I have a lot to offer LD kids. I would like to start a preschool program.

Two sisters who live next door to each other and, for all practical purposes, do child care together have considered starting a child care center. Both registered providers, one is the graduate of the early childhood education program and the other works during the school year as a special education aide. Uncertainty about the financial feasibility has deterred them:

We would love to be able to combine but I don't know if it would be worth it for two of us. There would be insurance and taxes on the building if we bought it, otherwise we would have to pay rent.

Ambivalence About Continuing Child Care: Five women expressed ambivalence about continuing to do child care. Two of them are regulated. The woman trained in early childhood education has been in the business for four years and has a nine-month old child. She became registered a year ago when one of her child care parents wanted to apply for the child care tax credit:

The way things are going, it's getting hard as far as taxes go. And things are hectic now that I have one of my own. I would almost like to work as a teacher's aide. Or maybe go back to school.

Another woman who left a demanding but well-paying job to be at home with her two daughters moved into child care because she was asked to by friends. She expressed her conflict about doing child care, working outside the home, and being available to her daughters:

I really haven't thought about it. I'm just going week by week. I will get my nephew back in a month (when his mother goes back to work) and I have another sister-in-law that is due any day now with a baby and she has to go back to high school in September so I told

her I would baby-sit for her. And then go on from there. I had thought about maybe going out and trying to get a job but I'm not sure at this point what I would find. I notice that the girls (her daughters), when I'm not around, they really want me here. Even though they'll be in school all day this year that would mean that I need to be home by 3:00 in the afternoon which would mean I would probably have to start at 6:00 [in the morning]. That means I would have to find somebody to get them off to school because my husband leaves at 5:00 to 5:30, sometimes even earlier than that. The baby-sitting I enjoy and I'm willing to do that for another year or two, but I don't think it's something that I'm going to be doing for ten years down the road.

One provider who had been asked by a friend five years ago to care for her children is unsure whether she will continue. Part of her uncertainty may come from the fact that her first group of children has begun school and for the first time she may need to recruit new children. She has taken the summer off.

I had her children for five years. This will be the first year I won't have them because they are in school full time. All the little ones will be in half-day kindergarten in September. I've always had younger ones. A friend heard from a friend, I'm not advertising so I really don't know if I will baby-sit come September. If I only get one or two I may keep continuing or I may not. I don't really know.

Later in the interview she added:

I'm thinking really hard about advertising just for two or three, but I don't know. There's a lot of new people in town.

The two women who felt most strongly about being home to raise their own children also are the most ambivalent about caring for other people's children. They believe that children should be cared for by their parents. Needing to work, they are trapped into doing something that they believe is fundamentally wrong. This and other conflicts between providers and parents are explored further in Chapter Seven.

One of these two women has a college degree in elementary education. She is struggling with her commitment to care for her neighbor's kindergartner as well as considering the possibility of taking in more children. She is teaching her own six-year old son at home.

I didn't know whether to baby-sit this year or not...Last year I had decided I wanted to teach at home so I didn't know how much time that would take. I don't want to just be raising other people's

¹⁰ Margaret Nelson has explored this value conflict in her article, "Negotiating Care: Relationships between Family Daycare Providers and Mothers," Feminist Studies, Vol. 15, no. 1, Spring, 1989.

children. My most important thing is raising my own child and even though there's only one, that's important, so I need to have the time with just him, and not have my day filled with everybody else's children. It's important that I work around that.

The second provider is new to her community and was committed enough to child care to become licensed. Trapped between her need for income and her belief that parents should care for their own children, she explained why her husband feels so strongly that she should be home with their four children:

My husband's mother was divorced several times and his father was gone when he was nine, so he was brought up mostly by his grandmother. He went through a lot of bad times. He says, "I'm not going to have my kids go through what I went through."

These parents are just going from work to coming home, to work to coming home...These kids just aren't being brought up right. The parents love them, I know. It's just that they seem to be more concerned about their jobs than being home and caring for the kids. Especially when they're little. I just don't think the parents are home enough for their kids.

I like the day care, but yet I like the quiet and my own kids, too. We'll see what happens in the fall.

CHAPTER SIX

CHARACTERISTICS OF RURAL FAMILY DAY CARE

People don't realize. You've got to be a social worker, you've got to be a mother, you've got to be the cook and the cleaner and the teacher and all those things. (A Dixfield area family day care provider)

Regulatory Status

Of the 22 women interviewed, 16 were current providers. Of these 16, seven were state-regulated. Four were licensed and three were registered. Of the six women who no longer cared for children, three had been regulated. One had been licensed in one location and registered in another, one had a provisional license, and one had been registered. (Parent and provider reactions to regulation are explored in Chapter Ten.)

Hours Providers Work

Family day care providers work extraordinarily long hours. Needing to accommodate the varying schedules of a number of working parents, providers can find themselves working 12 or more hours a day.² They are unlikely to have their full complement of children for the 12 hours, but one child arriving at 6:00 a.m. and another leaving at 6:00 p.m. will create a 12 hour day.

On average, Dixfield area providers were working 11 hour days. The range was considerable. One women provided three hours of before and after school care for a niece. At the other extreme, a provider advertised that she was open 24 hours a day, regularly worked 11 1/2 hours, and increased her hours to 17 on the days when she cared for two children who were with her until 11:00 p.m. Employment patterns in this rural community contribute to long and irregular hours. Shift work, working "shutdown," and the time parents spent traveling, affected providers. Here are two examples:

I had those kids 18 hours a day sometimes because both parents were working shut down in the same place. Otherwise I had them eight to ten hours a day.

¹ See page 3, footnote 5 for a description of Maine's child care regulation options.

² A study of Wisconsin family day care found that caregivers worked an average of 61 hours a week, or 12 hours a day. Reported in Adams, 1990, p. 2.

Most of the work in this area requires parents to be gone from 6:00 in the morning to 5:30 at night mostly because so much traveling is involved. One woman I sat for last summer had three children. She was going all the way from here to Madison every day. So she dropped the children off at 5:00 in the morning and never got back until 7:00 at night.

Of course, the working day for a family day care provider is longer than the time she is caring for children. Some providers mentioned doing housework while the children were there. Others, however, tried to get it done before the children arrived and after they left:

[In the summer] I was getting up at 5:30 so I could get laundry done, housework done, pick vegetables in the garden, weed out the flowers, and have a little time to myself before [my four] get up and [the two day care children] come in.

Not only are the hours long but they are often without respite for the provider. Only the program at the nursing home employed regular assistants. With the following exception, the remaining 21 providers worked entirely on their own. In this one case, a former provider's husband who did shift work was available to help with the children for two to three hours a day. The provider explained the difference this made to her:

It was a big help. Being able to run to the store or have him go to the store. Or if we had babies, it was nice to have somebody in the house and somebody outside the house. If wasn't like we ever planned it that he was going to help.

A parent illustrated how strapped for time a family day care provider can be:

When she got her new car she had to go up and register it and she asked me if I'd come over and watch the kids while she was gone for that hour.

Flexibility

Another perceived advantage of family day care is flexibility. Since the provider is at home anyway, she can easily adjust to changes in parents' schedules. Most Dixfield area providers said they were flexible. However, their willingness to accommodate parents' needs for flexible hours varied. One woman simply accepted the fact that parents frequently left their children beyond their agreed upon hours:

It happened quite often. That was fine because usually I was home anyway.

An element of self-sacrifice is evident in this "experienced mother's" response to the flexibility question:

The latest one to go is around 4:30 and I like that because then I

can start my supper. [If a parent needed a child to stay longer than 4:30] I let them. They can stay. I mean, not continuously. I don't make a practice to keep them but if somebody needed me till 5:00, I'm here. But it just isn't every night because by 4:30 my patience is getting shorter. But if they need me or if somebody, something else happens, all they've got to do is pick up that phone and let me know.

Another expressed more conflict. While acknowledging that she was "home anyway," she obviously preferred that it not happen:

I run into that quite a bit [parents needing to leave their children beyond the regular pick up time] and I'm pretty flexible, pretty good about it, because I'm at home anyway. Usually I say 6:00 is about the limit, but sometimes I have them until 7:00 because the mother works in a store and sometimes they're open till 8:00 at night and the father often has to work late also so I have them that long. I wish I didn't have to but I do.

Providers particularly resent intrusions into the time they have set aside for their own children:

I do allow flexibility but I also don't like to take time away from my children. I don't get quality time with my children during the day, so supper, story time, and bath time is special. Sometimes these two will have baths and supper here, and I don't mind that, to help my neighbor out, but I like to have them out of here by five...I still like the time with my own children.

Sometimes there is a fine line between accommodation and exploitation. Three providers who no longer do child care mentioned that parents who picked up their children late had been a problem for them. Here are two responses:

It happened a lot because I'm a softie. I was real flexible. And I think probably people who are less flexible probably last longer at child care because they don't burn out, but I was real flexible. There was one little girl, she used to come at a quarter to five (in the morning) because her parents worked in Bath and then they would pick her up at quarter to six (in the evening) and then she ended up spending the night a couple of times. I had a real hard time saying no.

I felt I wasn't spending enough time with my own children. There's so much they need with school work and stuff that I felt I was neglecting them. A lot of people I baby-sat for would say they'd be here at 5:00 and they wouldn't come until 5:30 and that causes problems with mealtime and having the time to spend an evening with the kids.

The third former provider was particularly annoyed by parents who did not phone her in advance to tell her they would be late.

The Number of Children in Care

One of the primary reasons for regulating family day care is to insure that children receive the attention they need to thrive physically and emotionally. Consequently, many states limit the number of children in family day care. In Maine, a licensed provider may care for a total of four children under the age of two, eight children over age two plus two in school, or if she is caring for a mix of children, she may have no more than six plus two in school and have no more than three under two. If she has an assistant she can increase her count up to 12 depending on the ages of the children. The provider of a registered home baby sitting service can care for up to five preschool children by herself but must have a second provider when there are between six and 12 preschoolers present.

An often expressed fear about unregulated care is that children are being "warehoused," endangering their health and safety. Media accounts of rooms lined with baby cribs or teen-agers left to watch large numbers of preschoolers fuel this fear. This kind of exploitation was not evident in the 1981 National Day Care Home study. Nor was it evident in the four-county telephone survey or in the Dixfield interviews. In the telephone survey, parents were asked how many children their provider generally cared for at one time. While the responses reflect parent perceptions rather than an actual census, no parents reported an unregulated provider caring for more than seven children. In the Dixfield area interviews, no unregulated provider reported caring for more than nine children (including her own) at one time. In all three samples, unregulated providers had, on average, fewer children than regulated providers. Table 9 compares the number of day care children (excluding provider children) in regulated and unregulated homes. Table 10 compares the number of provider and day care children.

Table 9

Average Number of Day Care Children
in Care At One Time

	Regulated <u>Providers</u>	Unregulated Providers
National Day Care Home Study ³	4.0	2.8
Dixfield Area Respondents	5.7	3.1

³ Divine-Hawkins, 1981, p. 17. When the provider's own children under seven were included the average group size increased from 3.5 to 3.8

Table 10

Average Number of Provider and Day Care Children
At One Time

	Regulated <u>Providers</u>	Unregulated <u>Providers</u>
Four-County Survey	8.6	2.2
Dixfield Area Respondents	7.7	4.4

Nearly two out of three (63 percent) of the four-county parents reported that their providers were caring for just one or two children.

A conclusion from the National Day Care Home Study applies equally to rural western Maine:

The great preponderance of all homes abide by the group size limitations applicable within their states even when they themselves are not licensed or registered.

This self-regulation is particularly impressive since providers feel pressure to accept more children both from parents often desperate for care and from their own need to earn income. A question about the ideal number of children elicited the following four responses:

I want to do what's best for them, not what's best for me. That's why I have limited my number of kids because I don't believe it's fair to coop them up at my house. I probably could be making more but I don't feel it's fair for them to have to stay right here. I like to be able to please them and do different things with them.

I didn't really want to have more. I didn't have them all here at the same time so I could pay attention to all of them.

Two is all I can handle (she has four children of her own). I know it's not a lot of money but it gives my kids someone to play with and just a little bit of income to help out.

I usually kept three other children so I had a total of five. I don't know how a lot of day cares can handle four or five babies. I baby-sat for a couple of months for a girlfriend because she was in a spot for a baby sitter. I was already taking care of a baby

⁴ Ibid, p. 17.

and a couple of toddlers plus my two and it was hectic, constantly, because one wants to be held and other one wants something else...I just feel they need all that attention.

Relative Care: Caring for relatives' children is still common in this rural community. Slightly more than half (52 percent) of the Dixfield area providers cared for a least one related child. Unregulated providers were somewhat more likely (58 percent) than regulated providers (44 percent) to care for relatives.

Part-Time and Sibling Care: In addition to the absolute number of children, two other factors influence the amount of money a provider can earn: the number of children who are full time and the number of siblings she cares for. If a provider has part-time children, she may not be able to find other children to fill the gap. Typically, providers do not charge the full fee for additional children in the family. Half of the children being cared for by Dixfield area providers were part time, either preschoolers who were not present full day, full week, or older children who needed before and/or after school care. Siblings were equally prevalent in this group of children: three out of four providers were caring for a least two or more children from the same home.

Continuity of Care: Caring for children part time or for short periods appeared to be related to starting a child care business. One woman who had been working less than a year and was currently sitting for children whose regular provider had taken the summer off, commented:

It's been on an on and off basis. Most of it's part time or it'll be like a spurt and I'll do a lot of day care for a little while and all of a sudden it'll die out.

Another who had eight to ten different children over a three year period said:

They may have lasted for a few weeks. I was often filling in between regular baby sitters. Basically their (the parents') jobs were part time.

Women who had been in the business several years, however, often had cared for the same children since they opened. One provider had watched the same six children for four years. Another still had two children she had started with ten years ago.

Ages of Children: Nearly half of the children cared for in the Dixfield area were between the ages of three and five (44 percent), another quarter were two or under and one out of three (32 percent) was six or older. This age discrepancy may have resulted from differential demand but it is also influenced by provider preference. Several providers mentioned a preference for preschoolers, although one preferred either infants or children over four. Here are three comments:

I just like the preschoolers. Once they're in school, I don't bother with them...Once they start going to school they just want to

go their own way. They're too independent. But when they're little they're fun.

We had a lot of laughs [with the little ones]. The other ones I had fun with too but they were a little bit older. You couldn't tell them, "You're going to do this," and they would do it. They had to argue about everything.

I try to stay away from [infants and toddlers]. I find that the ages that I have right now are the easiest to deal with (they range in age from three to eight)...now that they are out of diapers and they all play together really, really well, and they really listen. You can do a lot more things with them when they're five... you know, the eight-month old is going to take a lot more work, with crawling around and a lot more supervision. And it restricts you.

Two providers also described the complications of caring for children of varying ages.

If you can keep them all the same age, then it's a lot easier, but when you add babies, it's really hard, because a baby needs more or less constant attention. They really demand a lot more, and it's hard. I think, if I had to do it over (she is no longer doing child care) I would only take one infant with preschoolers.

During the summer Susan (who was ten) would help out, she'd play with the little ones sometimes, but she got bored after she got used to the regular routine and it was hard for her to be around all the younger ones.

One of the advantages of family day care compared to more institutionalized center-based care is that children can experience the activities of daily living. However, the numbers and ages of the children often determine how close to the "family" model family day care can operate:

If I have only two and they're old enough then I take them grocery shopping. They like that.

Programming

Like providers in the Dixfield area, child care advocates are concerned that provider/individual child interactions decline as the number of children increases. Direct observations of provider/child interactions in the National Day Care Home Study demonstrated a high level of provider involvement with children As a group, they spent nearly two thirds of their day in child-related activities. Regulated providers had higher rates of interaction (64 percent) than did unregulated providers (56 percent). The authors conclude:

It is important to stress that NDCHS observers and interviewers were consistently impressed by the family day care that they saw regardless of regulatory status of the home. [Differences in

behavior from one setting to another] seem to reflect different philosophical orientations, child care goals and care giving styles.⁵

Unlike the National Day Care Home Study, the study of child care in western Maine did not include systematic observations of provider/child interactions. However, providers were asked to describe how they spent a typical day. Responses indicated a range of child care styles that appeared to be unrelated to either regulatory status or formal training. Some providers described a day that consisted primarily of free play; others recounted a more structured sequence of activities. The fixed events around which most days revolved were meals, snacks and nap time.

Frequently, providers pointed out that they were not running an education program. Even the program in the nursing home that had the largest number of children and staff emphasized socialization over academic activities:

As a day care home, we're not required to teach anything other than growing up. We're taking quite young children so what we're teaching is how to hold a spoon, toilet training, how to get along with each other. We don't have any programs to teach ABC's or anything...We have story time if it's raining and different games they can play and they've got all kinds of toys...We just free play mostly.

Another provider commented, "It's not a real rigid schedule. I by no means run a nursery school."

Several providers mentioned that they wanted the children to be free to choose their own activities. Here are two examples:

I try to have a little bit of structure but basically I want the kids to feel at home. I don't want them to feel like they have to come in and sit down, "We've got to do this now, we've got to do that now."

I don't have a set pattern every day that we go through. If one wants stories, this one wants to watch TV, this one wants to go to the park, they do what they want to do. I don't force them to do anything that they don't want to do...They do basically what they want to do except as far as destroying things or fighting with other children. They have to learn to get along. Anything else they just go on their own.

The provider with the training in early childhood education emphasized the importance of flexibility and free play:

I'm not fully structured. A lot of the days we spend here (at her parents home on the river) swimming, playing ball. I don't like a

⁵ Ibid, p. 31.

structured day because if something comes up, we go and do it. We don't have an hourly program. We go with the flow. From what I see in a structured day care, they go from one thing right into the other to the other, whereas we may start something, throw it away and leave for the day, go to the beach, or go to the park and they love it...We stay outside a lot. We get lots of fresh air, sunshine, running, exercise. Most of them are in school, and if they're not in school full day, they're doing nursery school a few days a week. ..We have sessions where we sit down and make things or we sit down and color, but there's not a lot of that. They're in school all day. I don't think they should have to come home to my house to sit down at a desk again.

Five providers did include more planned activities in their days. Three were unregulated and two, who no longer did child care, had been regulated. The provider who was trained as an elementary school teacher described the routine followed by her son and her one day care child:

They would play and then I would sometimes have structured activities, like doing coloring papers, or worksheets, or clay. They like to play GI Joe a lot, so to get their minds off of that, instead of four hours worth of GI Joe, I'd try to structure something else. "Okay, let's get out the Leggo's or the Lincoln Logs." When it's nicer weather they would spend a lot of time outside playing in the sandbox. In the winter they do go out some, but if it's real cold, they would play inside straight for four hours or they would have stories. It really varied. I'm not super structured so that at such and such a time we would do this or that.

An unregulated provider who had started doing child care five years ago as a favor to an acquaintance and was not sure she would continue doing child care offered one of the richest programs of the providers interviewed:

During the school year we all go to the bus stop [since] my kids get on the bus. This is a trip for [the day care children] because they get to walk down there. Then we come back and have breakfast. Then they watch TV for an hour. There's all that new Nickelodeon. I get my housework done and then we're usually outside for the day. We've got a pool next door and we go swimming. That's in the summertime. We've got sheep next door. We go visit them. We take walks to town and use the school swings... They all take naps at noon, all of them. Then we play a lot of games. (She buys games at yard sales.) We do names and numbers and shapes. Four- year olds usually know that. Kids are smart. All these kids know how to do their names now. And numbers and songs and games. Then we get to color and cut and draw. Every season we got to make Halloween pumpkins and Santa Clause...Playing is really important, getting along and sharing. Some kids will bring their own toys and don't want them to touch them. So we have to get over that.

The woman who had been licensed but was no longer doing child car preferred to run a structured program but expressed uncertainty over what a family day care

program should be. Through her participation in the Child Care Food Program, she had ordered learning materials specially designed for home-based providers:

I tried to keep it structured as much as I could but then I guess I had a conflict there a little bit, whether you were considered a day care home, you were supposed to be just normal, I guess. Some people wanted a day care home so their kids could be normal. But without something structured, it was hard. We have a room downstairs that we had all set up with puzzles and books and toys. They didn't have to stay in that room but that was where we spent most of the time. We ordered material from a home preschool program and we did that a lot of that. That was usually about an hour to an hour and a half a day, it depended on the kids. We got a kit with activities for every day. So we did a lot of that, and we went to the library and we cooked a lot.

A former registered provider described the contrast between providing a rich environment for children and what she was being paid for her efforts:

I ran off papers [for the children]. I'd teach these kids how to write their names and color and glue and paste. I was only getting \$1.00 an hour and many of the parents just couldn't pay me. I spent a lot on supplies because my kids loved art and it kept everybody happy and it did break the day up. It was rainy, we'd color all day long, and they loved it.

An unregulated provider had given the most thought to the need for structure, both for herself and for the children:

I feel like I have a pretty good system going. I really feel that the structure that I have helps out the kids a lot. I think kids thrive on having the same system every day. Like they'll have a snack at 10:00 and they have their lunch between 11 and 12. The they go down for their nap, and even if they just rest, they stay there for anywhere from a half an hour an hour. That revitalizes me, because I need time for myself. I think I'm a giving person, but at times I'm selfish. I need to be alone. I'm with them from 6:15 to 5:00, I need a break...We try to work in some stories here and some crafts there, and a lot of play time.

Child Care as a Business

Advocates who want to improve the image of family day care and increase the professionalism of providers recommend that they establish written program policies, enter into written contracts, and maximize their incomes by documenting their business expenses for tax purposes. Few Dixfield area providers followed these practices.

Written Contracts: Only three of the providers had used written contracts. One was the nursing home program; one was an unregulated provider who had used

written contracts in the past and was thinking about using them again; and one was a formerly registered provider who had introduced written contracts after participating in family day care training. The unregulated provider had used a written contract when living in Connecticut and now considered requiring it of her current families:

I'm thinking of doing it again [having written contracts]. My insurance man said I really should. [She was particularly concerned with her liability should a child be injured.] The thing is, I don't want anybody to get upset if I do write something up that say's "I don't hold Wendy liable." I don't want parents getting upset that I asked them to sign something like that. Do I have the right to do that?

Most providers, however, felt they did not need written agreements because of their relationship with the families. For example:

I have a verbal agreement because everyone I take care of is a friend or a relative.

Three providers recognized the value of a written contract, however:

It's usually verbal. I've had them (the families) over the years and they know what to expect and I know what to expect from them. Maybe new ones if I got them I would.

I've never given anything to Elizabeth because it's always worked out. I had run into some problems with being paid [by another family]. If I were going to start in with someone new, I would have a set of rules. I would have this list right up front so that I could say, look this isn't being done and I can't take the child anymore. Rather than waiting for a problem to come up. Because if you're waiting for the problem to come up, thinking it may not come; then it's sometimes harder to deal with it at the time, because you don't want hurt feelings.

I learned along the way, and I think if I wanted to go back into it, I would do it right, I'd have a contract. I didn't get paid when the kids were sick and didn't come.

Record Keeping: Only one woman volunteered that she was careful about keeping track of her expenses for tax purposes. More typical was the provider who commented:

I guess I don't keep as good tax records as I should. And again, that's probably because I'm not doing if for the money. I'm not looking at it as a tax write off type of thing...The kids are the highest priority.

In this example, the provider was feeling a conflict between her role as a nurturer and as a person in business. Even the provider who considered leaving

child care because she was not earning enough confessed:

I'm not real business inclined as far as sitting down and doing lots of paperwork. We have somebody that does our taxes but he's not specialized...as far as what I can get for deductions.

Visits Before Enrollment

Typically Dixfield area women who serve families beyond their immediate circle of family and friends will invite them to visit before a child begins coming for care. They understand the need for a match between provider and parents. One newly licensed provider commented:

That's the only way I'll take them in. They've got to come visit me. I like them to come during the day so they can see what's going on. Most of them have been on the weekends because the parents are working. I like them to come in and see me and meet my husband, my son and see everything. I don't like them to come in and drop them off. I don't think it's good for the child.

An unregulated provider was equally interested in assuring herself that both the child and the parents would be comfortable in her home:

I always have [the children] come first with their parents before they come that day, and I see how the children all interact. I talk to the kids too and see how they are, let them know who I am and that I'm a nice person yet I really set my rules out, too. And then I go back and I talk to the mom - what she feels, what she's looking for in me, and then I say what I'm looking for in parents.

She went on to say:

What I look for is a mom that loves their children as much as mine, and I also look for compatibility among the children. I feel that that's really important. If you're going to have one kid who slugs everybody and bites kids, I don't want them. I'm really picky that way, because I want to be happy with what I'm doing. I enjoy it. I'm with the kids all day. I'm home because I love to be with my own kids, but I love children and I love to see my children having fun with other kids...You know how you feel --some people you're friends with and some people you aren't. Well, I feel I can be friends with the parents. I feel that the parents have to be a lot like me.

A former regulated provider tried to have families visit but found it difficult for parents who needed care right away:

Most of the parents were in a bind, they needed somebody right away so they'd call. If you had room, they came. But most of them came and visited at least once before they actually come to stay the day.

Rewards from Doing Child Care

The responses from Dixfield area providers to the question about what was the best thing for them about doing child care were strongly child-centered. Fully 84 percent said they liked being with children or watching them grow. In a mail survey of family day care providers in northern, suburban Virginia, 42 percent of the respondents cited enjoyment of children and pleasure in watching them grow as the best part of their job. In the Dixfield area study, eight providers mentioned their pleasure in being around children. One provider responded:

Probably seeing them laugh, to enjoy the child. To really see the light in their eyes and just be able to watch them. They're so curious.

Seven providers also found satisfaction in what they were able to give the children - everything from love, a home environment and structure. Here are two responses:

It made me happy to try to make another child happy, too. Most of the kids I had really responded well...it was like a challenge. I'd try to set up different things during the day...to keep them busy, to see how well I could keep them entertained and happy.

The feeling that I'm doing something very worthwhile. That I'm getting to love these kids and see them grow and enjoy them. Knowing that I'm doing it right. That they are going to have happy memories of being here...and those feelings will last forever.

Also important to providers are the benefits child care affords to their own children. Six mentioned the advantage of having playmates for their children and four repeated that it allowed them to remain at home to raise their own children.

Four providers mentioned the pleasure in seeing children grow. For example:

I think it's just the individual child. Every one of them is different and seeing them grow from the time they're like this till they grow up. I just get satisfaction in helping them grow everyday.

Three providers commented on the affection they received in return from the children.

When they come around a corner and give you a hug or a kiss or act like they appreciate having somebody that cares.

⁶ Northern Virginia Planning Commission, "How Did a Cute Kid Like You Get a Mom Like That?," Argus, The Journal of Family Day Care, Vol. 3, No. 4, January 1990, p. 11.

The satisfaction that you get from doing it is just incredible. It's just to have them all come up and give you a hug. What's good about baby-sitting is having a child come up to and just say out of the blue, "I like you Wendy, I love you Wendy."

Only one provider mentioned income as a reward for doing child care and only after first identifying staying home and having a playmate for her own child as advantages.

Disadvantages in Doing Child Care

Providers were also asked what was the most difficult thing for them in doing child care. There was much greater variation in these responses than in answer to the question about rewards of doing child care. Notably, few of the problems had to do with the children themselves. Five of the Dixfield area women commented on the length of their day, how stressful or demanding the work was or how tired they got.

As far as doing this for a living, after awhile its very stressful. I mean, "I dropped my pencil. I need to go potty. I need a drink of juice. I need this and this." They need, need, need all the time, which is fine. They're children. Children need and someone's got to provide for that...The biggest thing is feeling like it's day after day after day. If I can get a break, I'm much better.

Another three mentioned being tied down at home. This restriction was particular onerous when they were prevented from participating in their own children's activities:

The most difficult [thing] is working around a schedule, like when I have to go to the doctor's or something. The hassles involved with having to make other plans, other arrangements. I'm thinking, too, my boys play soccer and it's a problem for me to be able to attend soccer games which are right at the hours when they are picking up the kids. So I feel badly about that, I can't be at two places at once, so I have to do a lot of rearranging at that time of year.

Three providers said their greatest concern was over the home lives of the day care children:

I think the most difficult thing is having children come in and sometimes knowing maybe the treatment they get at home may not be up to what I feel the child should have...I know the parents are trying as hard as they can, but it's still hard...I take these kids in and it's like they're my own, and it's really hard for me if I know they're not being treated better at home...I think that has an awful lot to do with it, when both parents are working. That's a lot of it, I think. One family has been divorced, remarried, with children from the first marriage, children from the second marriage, that type of thing.

Another three providers were torn by the children's desires to be with their own parents.

They come in the morning and they don't want to stay. They want to go back to their mom. That's hard.

Really you could be watching your own children and raising your own children. They were just craving their parents' attention. I just felt so sad.

Two Dixfield area providers expressed their frustration at being unable to communicate with parents.

I think dealing with the parents was the most difficult because a lot of times, the kids were great. It was trying to tell the parents if I needed anything...I couldn't get across to them.

Communication was especially difficult when the provider felt her value as a caregiver was not appreciated:

It's hard when the parents and the baby sitter can't really meet some kind of a compromise... If there's any kind of misunderstanding, I get so emotional about it because I tried so hard with these kids, and sometimes, if you don't get that reinforcement like oh, "you're a good baby sitter, you're trying so hard, thank you for taking care of my kids," and you hear this negative thing come out, "I don't want this, I don't want that," - that's the hardest thing for me.

See Chapter Seven for a description of relations between parents and providers.

Three providers mentioned the wear and tear on their homes. Two commented on the children's aggressive behavior:

As long as the children don't fight. That's the only thing that bothers me is when they get to fighting. I can stand all kinds of noise but not fighting.

Another thing that really bugs me is the kids and their petty quarrels. That drives me nuts and they know it. I think a lot of time that's why they do it.

Two providers went on to express concern about what they perceived as negative behavior and their discomfort at having to discipline the day care children. The first comment illustrates how difficult it can be to define the roles and responsibilities of providers and parents.

I think the hardest thing is the discipline because, these children, they don't belong to you. I probably don't discipline them as much as I should because I feel they don't belong to me and I don't want these children not to like me. I mean, I'm not here to bring these children up, that's the way I feel about it. I know I do have to

spend a lot of time with them and everything but it's up to the parent to bring these children up, not me, as far as discipline.

The next response shows how one provider tried to influence the behavior of the day care children through reprimanding her own children:

The hardest part was the discipline. I have a hard time telling other kids - I felt more like I was taking it out on my kids. Even if they were doing the same thing, I'd yell at my kids. And the kids noticed that. My son noticed it...The mothers would tell me, "Don't feel like you can't stand them in a corner."

It is also likely that preferences for younger children that some providers expressed resulted from their discomfort at having to manage the behavior of older children.

Only two Dixfield area providers mentioned the limited income they could earn from child care (in the northern Virginia survey, 22 percent mentioned low pay⁷):

The reason that I stopped was because I asked for a raise and a couple of the mothers just said no. So I said that it was just not worth it and I'm not going to do it anymore. And then when I told them that they said, "OK, we'll do it," but I had made up my mind.

Two providers felt it was taking time away from their own children. Another provider said the hardest thing was turning parents away when she was full.

An assumption often made about family day care is that the isolation and lack of interaction with other adults is a disadvantage. However, only one provider mentioned this as a major problem in doing child care. In fact, four providers volunteered that lack of adult company was an <u>advantage</u>. One of them said:

Everybody always said, "How can you stand it?" I get along better with kids, I guess, than I do with adults. It's easier to be home with the kids and playing with them, than it is to deal with adults during the day.

Support from the Provider's Family

Another assumption about family day care is that it asks a lot of the provider's family: members must share their home and, especially, the time and attention of the wife and mother. The extent to which families either become directly involved in the child care activity, were unaffected by it, or resented it varied among the providers in the Dixfield area.

⁷ Ibid, p. 13.

Family Contribution: Eight, or nearly half, of the providers mentioned that family members contributed to their child care businesses. In addition to the husband who regularly participated in child care, one carpenter husband built a swingset, another gave an eight-year old nephew his evening bath, and a fourth baby-sat and helped around the house so the provider could attend evening child care training. The provider commented, "I couldn't have done it without him." A fifth husband regularly cared for their infant daughter so the provider could get a much needed break:

It just gives a chance to get away without any children to think about. I don't have to worry about my daughter. I don't have to worry about home. I'm just on my own. Even if it's just for two hours, it's heaven. When I come back, I'm ready to face it again.

Family Tolerance: In other families, child care was tolerated by family members. The provider who was open 24 hours a day asserted that her husband didn't mind having day care children in their home until 11:00 p.m.: "He loves the two girls. He thinks it's tremendous." (This is a family that would like but is unable to have more children of its own).

The two older women with grown children made a point of separating their child care activities from their family responsibilities.

My husband and daughter are gone most of the day. By the time they get home most of the children are gone. (She prefers children whose parents are able to pick them up by 4:30).

When they leave, everything's picked up and it's my home again, so I don't have any problem with it at all.

Family Conflict: Family conflict was reported by some providers. The most frequent problem mentioned was the jealousy felt by their own children when they had to share their mother and their belongings with the day care children. However, these problems were resolved in time and, overall, providers found them healthy socialization experiences. One provider talked about the rules she established with her own three children -- all of whom are now in school -- as well as some of the problems she encountered:

They have to keep their stuff up [out of reach] and it's up to them. That's the rule. If you don't want them to play with it, you don't leave it lying around. Sometimes, they come right home after school and want me and I'll just say, "You're going to have to wait." Sometimes they'll have to wait until 5:00 to do their homework with me because I'm still working. It took them a while. There was jealousy with my littlest one because when they get up from their naps a couple of them have to sit right on my lap just to wake up. Sally never liked that but she got used to it. And my kids will play well with them. Sometimes I'll say, "Take them out to the sandbox," if I have to get supper started. They're good with them.

Another provider described how child care has benefitted her own children. She also reflected on how she became aware of her own young daughter's needs:

Because we have always had other children here it is almost like a nursery school environment. [My children] have always been very social and I feel it's really helped Paul come a long way. I also feel that my working with him and all the other children on numbers and letters and reading to them, being close to him and all of them has really helped them thrive...Sarah had some very bad days when she was little and I had another younger child. At first I didn't understand what was going on but then all of a sudden my eyes opened and I said, "Oh, she just needs more love." And now, everything seems to be working out fine.

While most providers seemed able to handle the inevitable conflict between family needs and child care, it did play a role in the termination decision of two of the six women who were no longer doing child care. One was unable to participate in her son's after school activities and the second was unable to care adequately for the five children in her recently blended family.

Peer Support

Typical participant feedback indicates that one valuable result from child care training programs is the opportunity to share experiences and problem solving with other providers. These exchanges are particularly helpful to family day care providers who most often work in isolation. In a community where few child care providers are part of a formal training network, do they establish their own informal support system? The answer to this question is a qualified yes. Almost every provider interviewed had friends or relatives who also did child care. Seven reported talking with them about their work. One woman had a mentor in a provider she had used when she worked outside the home:

My son had a day care provider. She talked me into it (starting a program). She's done it for 25 years. If something happens, I call her. When there's a problem, I call her.

Another provider talked to her sister-in-law frequently. They even considered running a program together. A third provider used her neighbor (who also does child care) as a sounding board when she had a conflict with a parent. Her description makes a powerful case for having peer support:

She really helped me a lot with [the problem I was having with a parent]. She was the one who make me say things to myself [about my own needs]. Just her input in saying that made me understand that I'm not going crazy...And I can talk to her about other little things and she can talk to me if a child is acting funny, how can we fix this, and why is this child acting so destructive. And we do things together like picnics and crafts. It's really nice to have someone to baby-sit with.

What Providers Need to Make Child Care Easier

Given the turnover in family day care, it is important to know what providers think would make doing child care easier on them. Twelve providers had specific suggestions. Three providers thought that working with another adult would make a difference. One provider responded:

I thought at one point that I might want to go in together with someone else only because having that other adult to be able to talk to and relate to during the day would make things a little better.

Another thought having a second adult would allow her program to have a mix of children. One could be watching the little ones while the second worked with the older children. The third provider responded to the question from a financial perspective. She was concerned that two people could not make enough money given the current rules governing adult/child ratios. She suggested that a third licensing category be created between a family day care home and a center to be staffed full time by two adults and to allow up to 15 or 16 children.

Six women thought that having space in their homes exclusively for child care was the answer. The expense stopped them from expanding. Here are two comments:

I always said if I come into money, I'd make the garage into a day care center and get licensed. But that takes money.

I had another room that I was going to finish off [in the basement]. I thought it would have made it much nicer for the kids and me and my family because it would have enabled me to stay right downstairs for the biggest part of the day with the kids without ruining the whole upstairs. But that got kind of costly. Had I been able to get a low interest or no interest loan to help out with that would have helped.

Five women mentioned they could use more indoor and outdoor equipment. Three specifically mentioned swing sets. Two women also mentioned fencing in play areas in their yards.

Finally, the woman who had stopped doing child care because it paid poorly suggested that if employers could subsidize the costs of child care it would help parents pay for good care:

If their employers had been a little more sensitive to their needs it might have helped...I had people who called but I charged too much and they didn't come. If employers could make provisions for that. You know, "I'm getting a highly experienced lady here but I can't use her because I can't pay her enough." Too bad they couldn't somehow compensate for that...You could go to your boss and say, "My day care provider want \$20 more or \$30 or \$15, can you pay it for me?"

Having examined child care first from the perspective of parents and then of providers, the next chapter explores the nature of parent-provider interactions.

CHAPTER SEVEN

PARENT AND PROVIDER INTERACTION

I really think that one of the most important things is to always keep wide open communications with the parents (a Dixfield area unregulated provider)

No aspect of child care is as important to a child's welfare as the communication between parents and the provider. The significance of the provider's role in child rearing cannot be overstated. Preschool children may spend more than half their waking hours in child care. Sharing information about a child's behavior, health, and emotional needs is critical to continuity of care. Equally important is the willingness of both providers and parents to express their own, sometimes conflicting, needs. In family day care, many factors can mitigate against open communication: the parent's tight schedule, lack of provider or parent assertiveness, differences in parenting philosophy and style, and lack of understanding and respect for each other's role. In spite of these obstacles, the National Day Care Home Study of urban regulated and unregulated family day care concluded that:

The level of interaction between provider and parent is unusually high in family day care as compared with that in other day care settings. In addition, the high correspondence of attitudes about the relationship between parents and caregivers indicates that they are mutually interested in a relationship focused on the child but grounded in a friendship between adults. 1

Two other studies have documented and attempted to explain the friction that was found between providers and parents. In the northern Virginia survey of regulated family day care, 34 percent of providers reported that problems with parents was the thing they liked least about their work. Their descriptions of the problems fell into two categories. The first was what they perceived as a lack of respect for their work. Indications of this disrespect were: coming late to pick up children, bringing children when they were sick, not paying on time, and quitting without giving notice. The second area of concern was the perception that some working parents were putting their own needs before their children's.

Project staff first hypothesized that the providers who had the most difficulty with parents were less educated, less trained in child care and less likely to use business practices like written contracts, i.e., the less professional providers. However, this proved not to be the case. The women with child care training and those employing professional business practices (using contracts, charging for vacation time, for absent children, or for late

¹ Divine-Hawkins, 1981, p. 24.

arrivals), listing with a resource and referral agency and belonging to a family day care association reported more difficulty with parents than did less trained and professional providers. For example, 25 percent of more professional providers reported difficulty collecting fees compared to 14 percent of all respondents.²

The authors went on to hypothesize that problems between providers and parents had more to do with friction created by their different roles. Problems were particularly acute for women who had become providers because they wanted to stay home with their own children. They were critical of women who had chosen to work outside the home. They were also led to believe in their child care training programs that professional behavior would earn the respect of parents - something that did not always happen.³

Another hypothesis is that more professional providers may have been serving a higher proportion of families they did not know prior to doing child care. This possibility is supported by the finding that they were more likely to be using resource and referral agencies, suggesting that they were not recruiting children through a social network. Less professional providers may have been caring for the children of friends and relatives. The more harmonious relationship could have been the result of close social ties and sharing child rearing values.

In a study of working parents and family day care providers in Vermont, Margaret Nelson explored the complexity of the provider and parent relationship. The tension she found between them resulted from neither side fully respecting or comprehending the other. Mothers working outside the home suggested that they might not be good mothers if they stayed home and said they could not understand how their child care providers could stand to care for children all day. Providers, on the other hand, repeatedly said they could not understand how mothers could bear to leave their children. Providers were in the business to make money but were troubled that they were doing for money what they should be doing out of love or neighborliness. Parents wanted providers to nurture their children but not to replace them in their children's affections. Providers tried to respect the parent-child bond but found it difficult when they perceived children were not receiving good care.

While the problems identified by the Northern Virginia group and Nelson surfaced in the Dixfield interviews, a strong affinity between parents and providers was more often the case. In general, communication between providers and parents was high as was agreement on child rearing practices. Several

² Gail Bollin also found that as training increased among white family day care providers job satisfaction decreased. Gail G. Bollin, "Diversity in Attitudes About Family Day Care Among Sponsored Family Day Care Providers," University of Delaware, a paper presented at the annual meeting of the American Educational Research Association, San Francisco, March 1989, pp. 15-16.

³ Northern Virginia Planning Commission, 1990, p. 17.

⁴ Nelson, 1989. pp. 7-29.

questions were directed at this critical aspect of child care including what parents and providers talk about, what providers look for in parents, and how parents and providers handle sick children.

What Parents and Providers Talk About

There was notable consistency in the responses of both parents and providers to the question about sharing information. Most parents wanted to know how the day had gone for their children. Most providers regularly reported on the children's daily eating and sleeping patterns and if they had to be disciplined. Both group recognized the importance of communicating information about changes in behavior. One provider explained it this way:

[I tell the parents] if [the children's] behavior is different than what it usually is. If their appetites aren't what they usually are. I usually like to tell them what kind of a day they've had so they know what to expect at night, too. It's hard because they don't know what's happened during the day and if their child is tired or cranky, they have no idea why. So I usually like to tell them what kind of day they've had, what they had to eat, how much they've had to eat during the day, what time their naps were so they know their schedule.

Here is the same concern from a parent's perspective:

If you notice anything different about my kids, like they're acting different or there's something you just can't pinpoint, please mention it to me. If they don't mind, tell me. There might be something wrong. There might be a reason why they're acting the way they're acting.

A parent who uses the nursing home program described the benefits of open communication. She especially appreciated the staff's willing to discuss problems with her when they first arose.

They're very considerate. When he does something new, like when he first started walking, they said, "Do you want us to tell you if he takes a step here or do you want us not to tell you?" Is that something you want to see yourself?" I said, "No, just make sure you tell me. " Whenever I go down and pick him up or drop him in the morning or pick him up after work, they usually summarize, "He has had a good day or he seems real tired today." They usually pretty much fill me in on how he's been the whole day through. Thank God. I wouldn't want to be in the dark and say, "Well, he's there, I'll pick him up, now that's over." They tell you everything whether the kid was good or bad. If they'd put up with him biting for a week straight and [then] said , "You know, we've got to do something with him." Instead of that, they told me every day so that I knew if there was a problem starting. We'd discuss what they did about it, what I was going to do at home about it, and usually by working together the problem was either averted or went away. We've always

had a real open discussion on just how we felt, how the day care staff felt so there wasn't any problem of, "Well, I'm going to go down there and tell them this." It was never like that. If I had a problem, I let them know in the beginning. If they had a problem, they let me know and it worked out real well.

Sensitivity to parents' feelings went beyond whether to mention a child's developmental milestones. Several providers commented that they made a special point of telling parents about their children's accomplishments. One provider mentioned that she was careful not to tell a parent what a child could not do.

You tell them the things that they've done. I never tell them the things that they should do. I don't say, "He can't tie his shoes yet." I help them lean to tie their shoes.

Another provider gave an example of cooperative problem solving.

If we had any little problems we would talk them over. usually there wasn't really anything. The two boys fighting over bikes, that's the only thing I really remember. I talked it over with the mother and she started bringing her son's bike so that worked out good. Then they'd share each other's.

A third provider regularly asked the mothers about how their days had gone. If she had something negative to report to the mother about a child's behavior, she would soften it by asking about the mother's day first. One of her parents showed equal concern for her.

We talk a little about what they've done throughout the day, what the kids have actually done. And then I like to talk about things besides the kids, too. Have just a little adult conversation with her, she probably needs that by the end of the day.

One provider found it increasingly difficult to communication with parents as the number of day care children grew:

It got hectic when I had ll last summer, so I'd just try to write things down...I had the parents' names on a pad of paper and write down what I wanted to remind them of, because lots of times it was hard for me to talk to a parent when they were picking up their kids about something that a child was doing or feeling if I was trying to deal with the kids that were still there.

Not all parents took the time to exchange information. One provider commented, "You don't have that much time because they have to get to work and they usually fly in and out of here." Another said:

We don't often have a lot of time to talk. It's crazy, since she started working and I started baby-sitting, we have been less neighborly because she's busy.

This description was confirmed by the parent.

[We talk about] the weather. Nothing in particular. We may talk about what the children have made. My son is usually anxious to come home and I'm usually anxious to go home.

When probed, she did say that if something unusual was going on with her son, the provider would tell her and that if she had a concern she would raise it with the provider.

Sharing Values

Repeatedly, parents and providers alike talked about the importance of shared values. One provider said, "It's important that we agree on discipline." Another said:

You care for the kids and you watch them, you bring them up just the way their parents do, you want to go by their morals and your own and hopefully, it's together [your values are the same]. When I interview people for baby-sitting that's what I look for - that the parents and I both have the same morals and we really get along well.

Parents and providers attempt to insure agreement by making child care arrangements with people they know. Here are provider comments:

I don't take any kids that I don't know who the parents are. I'd rather know who the parents are, then I know how the kids are being raised.

I've even gone camping with the kids parents so, right from when they were little I've watched how their are with their children and I've basically had the same general idea. We've all worked together and been together.

Both parents and providers mentioned avoiding families they knew would not be compatible. Again from providers:

There are some kids that I know that I really don't want around my kids. I don't want their behavior to rub off on mine.

There were a lot of people out there who had called me and wanted me to baby-sit and I said no because I knew from living in the area, I knew these people, it's a small town, and I just didn't want to baby-sit for them.

Parents Respecting Providers

In the family day care literature, providers frequently complain that parents do not value what they do and demonstrate this disrespect by not abiding by the provider's rules. For example, parents do not pay providers on time, pick up their children late, bring children when they are sick and do not provide the

food, diapers, and clothes the children need during the day. One Dixfield area provider described what she means by being respected and what causes her to feel exploited by parents:

All I want is a parent who respects my job...I just expect the children to be picked up by the time they say they're going to be, and I think it's only respect, if they're going to be late that the parents call. Because I don't mind if they say they have to get groceries or something, but what I don't like is when people show up an hour and a half late and you're wondering did they get into an accident and you start getting frustrated because you've had this child for more than 10 hours and you feel used.

A few Dixfield area providers voiced these complaints but they were in the minority. Of the 21 providers interviewed five mentioned that they had experienced one or more of these problems. Three mentioned parents not paying them on time; two mentioned parents not picking up their children on time or calling when they would be late; three had problems with parents not bringing adequate clothing; and one commented that parents brought children with infectious diseases. Both providers and parents were asked what they did when children were sick. All the providers were willing to take children with minor illnesses like colds. However, they did not want parents to bring children who were seriously ill. With the one exception noted above, providers reported that parents respected their wishes.

One parent saw a direct correlation between what she paid her providers and what she wanted from them. She understood the importance of showing respect for their work through paying them adequately. She explained why she paid her providers more than they asked for:

[I gave her more money] not because she asked, [but] because I felt it was worth it. I want these people to love my kids and I need to be good to them so that they will. I mean I want them to feel what they do is important. We all need that in our jobs.

Tension over Appropriate Roles for Wives and Mothers

One of the ironies in family day care -- and a potential source tension between providers and parents -- is that women who believe strongly that mothers should be at home raising their own children are caring for the children of women who have "chosen" not to. At its extreme, this belief extends to a condemnation of working women as bad parents who place their own needs above those of their children. Several providers in the Dixfield area expressed variations on these beliefs. While one of the women who had never worked outside the home understood the need for two incomes, she had difficulty accepting the changes in gender roles.

Back then (when she was first married) the women didn't work as much as they do now. Today it takes two almost to keep a family going, whereas back then, 25 years, 30 years ago hey. And of course, my mother stayed home. I don't know. Like even some of the things

these girls tell me today. Their ideas and mine sometimes are just different on this working. Like, they think their husbands should do more. I don't see it that way. I mean, I can see them helping out but they think they ought to do the laundry, they ought to do the dishes, they ought to get the meals. I don't know.

The two providers who voiced most strongly the belief that mothers should raise their own children described the negative effects of child care on children and the sacrifices they were making to stay at home. Here is the first provider:

But these parents are just going from work to coming home, to work to coming home. A lot of them aren't domesticated as far as wanting to cook or bake. I make cookies in the fall when it is cool with the kids. I will bake a cake or make homemade bread. These kids are fascinated by this, "Oh, I wish my mother would cook like this." Kids just aren't being brought up --the parents love them I know. It's just that there seems to be more concern about their jobs and having to go to work than to being home and caring for kids. Especially when they're little. I just don't think the parents are home enough for their kids...My husband and I have a [financial] struggle sometimes. Some day we will have the money, but right now our kids need that time. It's not the money. There's a lot of things I'd like and my husband would like to have new or something different, and hey, that will come at a later date. It's our kids that need it right now.

And the second provider:

For me, my place is at home. Even though there have been times when we've been in a lot of financial crises including right now I've never felt at peace about going back to work...I'm not putting down the women that go out and work. It's an individual decision. But I was getting to the point that I felt I was spending the time raising their children, when it's not even a matter of needing the finances, it's just "I want to get out of the house, away from the kids." And I found I was getting, not upset, but just feeling a little discomfort about that, really you could be watching your own children and raising your own children. Because they were perfect little children, and as soon as the mother would come they would act up and they would be terrors for the whole evening. They were just craving their mother's and father's attention, they were craving their parents. I just felt so sad.

A less extreme criticism, but a judgement nonetheless, was expressed by another provider in answer to the question about the most important thing she did for children:

I think just being here and listening to the children. We have the time for the children where mothers are busy. They're working all day and then they've got to go home and they're busy trying to catch up on their work and they just don't have the time to really sit down and listen. We're always right here for them.

Discipline

The principal method providers used to discipline children was time out. In addition, two providers (one registered and one unregulated) said that they had spanked children on occasion. The registered provider trained in early childhood education said she only did so with the parents' permission. The unregulated provider who had been doing child care for five years said she had "spanked hands" a couple of times when children were playing with matches.

Three providers had problems with parents over spanking. The provider with the background in elementary education said she would spank her son but not a day care child. This created a problem for her when she was asked to care for a child whom she thought was very undisciplined and whose parents did not believe in spanking. She chose not to accept the child. An unregulated provider had experienced a similar problem. She spanked her own daughters "when they did things that were harmful to them," but was asked by a parent not to spank her child whom the provider thought "had no discipline at all."

One registered provider had the opposite problem. She said she had told the parents that she never needed to spank anyone else's child. She was very upset with a father who routinely "smacked" his small son.

Handling Conflict

Providers and parents also exhibited a wide range of behaviors in handling disagreements. One was to do nothing. A provider was upset because a father did not want his child to slide with the other children.

I'm not one to speak up and that was his choice so I said, "Fine." But inside I felt like, "That poor little girl. It must not be easy for her to sit here and watch the rest of the children be able to slide and have fun." I felt really bad.

Another provider attributed her initial lack of assertiveness to being new to child care:

I baby-sat for a lot of Bass people - they were younger and it was when I was first starting baby-sitting, so it I wasn't one that was real forceful about saying, "Will you pay me this money, I deserve it." And I'd let it go and let it go and eventually I'd tell them I got to get done...They just didn't realize how much time and energy I was putting into these kids.

A parent described a situation where she was able to confront a problem directly.

I had one problem with day care (the nursing home program), and that's when I was toilet training him. They wanted to leave him in a Pamper and I thought, if he can go in a Pamper once, he's going to think it's okay. I want him in training pants. That was the only time out of the whole, almost five years that he's been there that

I've ever had trouble with them...I ended up going up to the administrator at the nursing home and I discussed it with her. I was so upset, I was in tears, and she told me that if that's what I wanted done with my child, that's what they were to do...I think if they had tried with him at first, they wouldn't have had that problem. I think they wanted to -- it was easier to change a Pamper than to change training pants, but it was a short-lived problem and since then, we've had no trouble or disagreements, nothing.

A provider describes how she and a parent worked together to solve a problem they were having with their children.

There was a lot of conflict going on between the two children for a while. I would punish Billy (her own son) in the morning for throwing a shoe at Donna (the day care child). If he did something first to her that was really mean, I would make him so sit on the couch but when Judy (the parent) was there, Donna (her daughter) could throw the shoe at Billy and Judy wouldn't say anything to her. So it was making it hard. So we went together to classes for strong-willed children they had over in Wilton...Judy went with me because she was at the end of her rope.

The most revealing conflict that surfaced in the interviews was over nap time for a three-year old. Both the provider and the parent mentioned the incident during their interviews. Each was sensitive and sympathetic to the plight of the other but each also framed the dispute in terms of a difference in parenting style. It was a true conflict of interest. The mother did not want the child to take a nap because he would not go to sleep until 10:00 in the evening. She claimed the provider was too structured. The provider, on the other hand, needed the child to nap so she could take a much needed break from child care during the day. She felt the mother was too permissive. Here is the mother's perspective:

I'm a pretty relaxed parent. When you work you kind of learn to go with the flow, I'm not really into schedules and massive routine. I mean we have three meals a day and we all go to bed in our own beds at night, and Dad is always home for supper and there's a lot of things that are routine in our house, but we don't have a nap from 1:00 to 2:00 every day. Wendy (the provider) is kind of a routine type person and so we had to do a little negotiating with how regimented it was... She needs that regiment, she does. tough for me to adjust to. My kids are not nappers, and she really needs a break in the middle of the day, and so she really wants them to take a nap, and that means they don't go to bed until about 9:30 or 10 o'clock at night. Which means that I have from - and I love them dearly, don't get me wrong, I love every minute I can spend with them, but I have no personal time at all now. I used to have, when they went to bed, they never went to bed before 9 anyway, even without a nap. They can go the distance... They are, and that was great, because we would have a good four hours together after I get home from work, because I have to have an hour to get supper, dishes and stuff, and then we'd have a good three hours that we could play,

and give us that time together. And then 9 o'clock was good, you know, but now it's like 10 - and I need to be in bed at 10 to get up at 5:30, and so I'm a little frazzled. We're still negotiating that stuff and it's working out okay. Wendy is receptive and I try to be receptive. I recognize her needs, I really do, and I'm trying to think of some viable alternatives, other than actual sleep. I am more than willing to go along with the quiet time, or even a 20 or 30 minute nap, but an hour is just too much. I need to have my kids in bed, asleep before 10. They're in bed but they're up and down and that's not a good way for us to end the day.

The provider was equally understanding of the parent's situation but equally adamant that she needed a break. She also believed the child needed a nap.

Susan (the mother) and I had a little misunderstanding about naps. She doesn't understand that I have the child ten hours during the day, and I do need that time. If I don't get that time, then I'm going to be a grump for the rest of the day and that child is going to be crying their head off all day because they're whining and I have to have that selfish half an hour or an they're exhausted. hour. And I know that child needs that nap. And it's hard -- I can understand the parents' situation because they don't go to bed until late at night, and I put myself in their shoes and try to understand that, but mostly it makes me upset because I have the child for that ten hours during the day and they don't want their child to just have a one-hour map, if the child needs it. That really upsets me. But we figured it out and with the half an hour I think it's going to [work out] - we're going to compromise...And I also think that she's not as heavy on structure as I am... She told me that she always holds them every night when they go to bed, which is nice, but it's not something that I would do. It would just keep my kids awake longer...It's just a difference in our own ways of bringing up children.

What is impressive about this exchange is that both provider and parent were willing to approach each other about the conflict and work together to find a solution they both could live with.

When providers do not screen families for compatibility the results can be traumatic for both parties. One provider was in the difficult position of having to tell a family that she could no longer care for their children. She has stopped doing child care but thinks that she would be more selective if she were to do it again.

I took everybody. If I had room and somebody came, I took them. I only let one family go. There were two children from the same family, and I did end up telling her that I couldn't watch the kids, and I felt bad. I don't think they were being abused, but I think they were kind of being neglected at home, and I felt really bad about letting them go, but they just didn't fit in and they took a lot of time, and a lot of time away from the other kids, but I thought, you know, any other time, my heart would go out to these

children and I'd just try my darnedest to hang on to them and help them, but I came to the conclusion that I wasn't going to change things overnight and I wasn't helping the other kids out or myself by thinking that I could, so I did end up letting those two go, but I think if I were to do it now, knowing some of the families, how they brought their children up, I think it would influence me now, but it didn't then.

CHAPTER EIGHT

CHILD CARE DEMAND AND SUPPLY

I never advertised and if I had taken all the children that I have been called about, I would have had at least 90 kids. This area is small enough so that word of mouth is bigger than the newspaper. I still get calls. (A Dixfield area registered provider who has been in business four years and has always been full)

Typically there is a delay in the public's response to social and economic change. Long after women with young children began entering the work force in record numbers, our public and social institutions continue to respond as though the "Dick and Jane" family continues to be the American paradigm. This is the only industrialized nation without a family policy that adequately makes provision for child care or flexible hours in the work place. This refusal to accept reality has resulted in a gap between the working family's need for good child care and the available supply across the country. Rural western Maine is no exception.

Child Care Supply in the Four-County Area

Respondents in the four-county telephone survey reported that good child care was hard to find. Seven out of ten working parents reported that suitable, affordable child care was very difficult or almost impossible to find or was simply unavailable.

Table 11

Child Care Availability Four-County Respondents (in percent)

Readily available	18
Must look for it	12
Difficult to find	32
Almost impossible to find	32
Not available	6
Number of cases	100

Nearly a third (30 percent) of the working parents said they would work

more hours if such care were available. The perception of availability of care was directly related to need: less than half of the respondents using care primarily to run errands or socialize (and who used much less of it) said it was hard to find.

The difficulty of finding care was also evident in the number of parents who admitted that they had left their children in a situation with which they were not entirely comfortable. More than one out of four (28 percent) said that this had happened to them. Of this group, more than half said it was not a rare event: 26 percent said it had happened occasionally and 29 percent said it sometimes happened.

Child Care Recruitment Methods in the Dixfield Area

By far, the major recruitment method in the Dixfield area is word of mouth. Parents ask someone they know to care for their children; they hear that someone in the community is doing child care; or they ask friends for suggestions. Providers are also a major referral source. When they are full, they will refer callers to other people doing child care. Because of its high visibility (it is located on one of the two major streets in Dixfield and has a sign and play yard in front), the nursing home program serves as an informal referral source. Several parents mentioned that they had called the program about possible providers.

When this informal method does not work, providers and parents have few options. Advertising in the local newspaper is a standard recruitment method for family day care homes. During the nine week period when face-to-face interviews were conducted in the Dixfield area, the classified section of the local weekly newspaper was scanned for child care advertisements. In the nine papers, only three providers from the Dixfield area advertised openings and each of them advertised only once. Three families looking for child care also advertised and their ads were in consecutive issues (two of the families wanted providers to come to their homes). Only one of the parents interviewed said that she had found her provider through a newspaper ad (and then it turned out to be someone she knew).

Providers sometimes post notices in grocery stores and laundromats to find parents. During the summer, the Dixfield grocery store carried only one child care notice.

Another clearing house for child care is the publicly funded regional resource and referral program located in the county seat 40 miles away. Called Finders Seekers, it maintains a list of licensed and registered programs and

¹ The Maine Child Care Task Force found that nearly 20 percent of working parents and more than 25 percent of non-working parents would work (more hours) if adequate, affordable child care were available. p. 8.

In the four-county survey, 16 percent of non-working parents said they would work if suitable, affordable child care were available.

refers families looking for care. Dixfield area providers did not find it a useful service because they were usually full. Only one provider, no longer in business, mentioned a family had learned of her through Finders Seekers. Providers who were full and were registered with the agency did direct parents seeking care to them, however. Only one parent mentioned using Finders Seekers to find care and she was referred to the nursing home program but it was not taking infants. It is possible that in a community where knowing the provider is highly valued, parents are unlikely to use formal referral agencies.

Only two providers advertised their business through lawn signs: the nursing home program and a start-up family day care provider who was open 24 hours a day.

Both providers and parents were asked about the difficulty of finding child care. The consensus from both groups was that it was hard to find in the Dixfield area, especially for infants.

Provider Perceptions

Without exception, providers in business for some period of time had no difficulty finding children. Some of the providers just starting out, particularly those new to their communities, experienced difficulty in building up their businesses. This is not surprising since the principal recruitment method is word of mouth.

At the time of the interview, the nursing home program had seven children on its waiting list and the director reported that they were almost always full. Women sometimes started child care businesses because of their own difficulty in finding adequate care for their own children:

I don't have a waiting list per se, but I have my name registered with Finders Seekers and whenever someone calls me who has heard that I do day care by word of mouth, I have to tell them that I'm full. I refer them to Finders Seekers. Basically, I don't know of anyone who is doing day care. That was one of the reasons I did go into it because when I was working I had a real hard time finding someone that I really trusted. When I realized that I really didn't want to work outside the home, this was one of the things that came up because I knew it was needed.

Another provider, only open for six months, had already turned families down. She did not anticipate any difficulty staying full. Another unregulated provider is a referral source to women just getting started:

I'm not going to advertise because I did that before and 13 people wanted me to watch their kids and I like to limit it to five. There is another girl in town. She's just started all this. She asked me to let her know if I get any extras.

Established providers with a stable core of children can be more selective with regard to hours and full-time children. A provider who had worked for five years

explained:

I would watch them until they started school and then I'd want to take in a full-time child and [the parents] would have to find someone else.

Two women just getting started reported they were willing to do evening sitting for families doing shift work. An established provider explained:

I don't do evenings. My husband would rather I did just daytime. And weekends, forget it because that is family time. [The new provider] does evenings and really odd hours. In the mills up here they've got the swing shift. One week it's third shift, one week it's second, one week it's mornings. She will do that.

A registered provider who stopped doing child care after eight years said:

I turned a lot away. And I still get calls, and I tell them I'm not doing it anymore. Some of the women got really angry because they'd just get so frustrated at not being able to find child care, and I told them, "I can only take so many." Some of the mothers would say, "Well, can I just come over and talk to you?" And I'd have them come over but then I'd tell them, "Leave your name, and if I get an opening, I'll call you." I don't know how many mothers with small babies called me. They couldn't find anyone for their babies.

Another former provider said that a friend of hers had turned away 14 children in the last month and most of them were infants and toddlers. The provider who did child care in between her mill jobs said that when she went back to work the parents who had been using her had to "scramble around for a baby sitter:"

It's hard up here because a lot of women go out to work. Either they've got to stay home with their babies or they've got to find a baby sitter. And the only day care's down in Dixfield. It's usually filled up with Dixfield kids, they're usually packed down there. It's hard to find a good sitter.

Three providers did report that they had trouble finding enough children at first. None of them was native to the area. One woman, who is unregulated, got over the initial hump and is now full. The second, who is licensed, is still struggling and the third has stopped doing child care altogether. The unregulated provider who is fill explained the growth in her program this way:

I only had one child last year from September through December, and we were really sweating it out and I needed to make more money or I was going to have to stop and go to work. And then two more came in April and that made it enough so that I didn't have to, and now, everybody wants to come here. I had to set a limit and I am filled right now. I would consider myself a very good baby sitter. I really feel like I do a pretty good job. And now all of a sudden all the mothers are realizing that, so they're all coming at once.

The provider who is no longer doing child care had a very different

experience. After years of doing child care under the table, she received a provisional license but could not attract families:

I interviewed half a dozen families after I got my license. I handed them all that paperwork and I never heard from them again.

From the interview, however, it was evident why parents would not return after the first visit. The provider exhibited multiple personal and interpersonal difficulties. She stopped doing care because of what she claimed to be onerous licensing requirements and because of the lack of cooperation she said she received from the parents she did have.

The local job market and the need for low-cost care also influence the demand for child care. Four providers spoke about the unpredictability of their businesses.

I had her most all winter and spring. Her father got laid off because of the woods business around here. The father took care of her which is real nice for them. They saved money.

A provider just starting a summer program described her initial frustration:

[At the beginning of the] summer I had seven kids lined up and one family moved, they had three kids, and another family with three kids ended up having someone come right into their house and so I had one. (She did pick up two more children.) So it kind of backfired on me, I guess. But I got registered and I'm going to finish out the summer probably.

The third provider had a child who came irregularly because of the family's financial situation:

Cindy is full time right now but every once in a while her mother will say she's not going to be coming for a month or so. Because financially, it's really hard for them. They have old bills that really stack up. Cindy may go to a relative till they've caught up. And she's done that two or three different times in the past. (In the interview with the mother, she explained that one absence was because her husband had been laid off and therefore he was available to care for their daughter.)

Parent Perceptions

One of the reasons parents value their providers is that they know they are in short supply. A mother of a nine-month old who did not know of anyone doing child care described her experience at finding a good caregiver:

I called Finders Seekers when I was first looking. That was while I was still pregnant because I wanted to have a sitter lined up for him. The only one they came up with for me was down here at the Dixfield Nursing Home but they wouldn't take infants. A lot of

people don't want to take infants. I probably called 25 people. I spent three full days on the phone just calling people and calling people.

She found a woman to come into her home but decided she was too expensive. She then found a family day care provider who wanted her to pick up her son at an earlier time than she could comfortably leave work. She also did not think the provider was giving her son enough attention.

Then the people at the nursing home said that Jane had just opened a day care program. I knew her when I was growing up. When I realized who she was I really, absolutely had no doubt that she would be perfect with him.

The mother who uses the nursing home program for her five-year old son and leaves her ten-year old daughter with her sister for before and after school care felt pressured to find adequate summer care for her daughter:

My sister has four children of her own and I don't want to even ask her, to put her in the position of taking another one for the whole summer. So I'm still looking for someone to watch her and that's tough. I can't even find a teen-ager. Before there were young girls everywhere that wanted to. They take them at Geri-Tot (the nursing home program) until they're 12 but knowing the group, I believe it's geared for children closer to my son's age. If I were to take my daughter there, being ten and a half, I think she would be bored out of her mind. I'm looking more for someplace where there's kids a couple of houses down, so she can go down the street and play with kids rather than being in that closed environment. I wish it was geared for children of all ages, but I know they don't have the resources or the room to put in a program like that. She's not old enough to stay alone. But finding someone - school got out Wednesday, and I haven't found anyone yet.

Another mother who had recently returned to the area lacked information about available child care:

When I started working in Dixfield I had no idea where to even start. There really isn't anything available in the town office or anywhere. You'd have to go to one of these little stores and look maybe up on the wall for a little card. I went that route, looking for someone to look after your kids and you're looking at these little cards in the grocery store. (She ultimately found a provider through a newspaper ad.)

The waitress who works from four to eleven had difficulty finding a provider who would care for her daughters in the evening. She lives and works in Rumford. Her provider lives 12 miles away on the other side of Dixfield.

I was looking for someone in Rumford so I wouldn't have to travel. But I couldn't, not the hours I work. See, I work until 11 o'clock and my husband sometimes has to go out of town for a week, so it's

kind of hard. She was open 24 hours so it's worked out good.

Two mothers said that if they lost their provider, they might have to quit their jobs. One of them is aware of the scarcity of care because of a pregnant friend looking for a provider:

It's real difficult for her. She's checked I don't know how many places. I don't know what she is going to do. The waiting list at the Dixfield center (the nursing home program) is six months.

Pressure has been exacerbated by a reduction in two traditional sources of child care: family members and teen-agers. Three mothers mentioned that relatives were no longer available to care for their children because they had taken jobs outside the home. Three mothers also commented on the difficulty of finding teen-agers:

In this area it's really hard to find somebody. The majority of high school girls right now are so into activities, which is wonderful for them, but that doesn't leave anybody left for baby sitting.

It's really hard. There are only so many teen-agers and everybody wants them. There's a nursing home in town and they hire a lot of high school students to do laundry and dishes and things like that, and they're going to get paid a lot more than I can afford to pay them.

If the provider is not committed to child care, parents may find themselves repeating the search over and over again.

I went through three different baby sitters from the same family. I started with the mother and then she had something come up, then I started with the oldest daughter and then the she got a job so I ended up with the youngest daughter. (She was only 13 and unreliable so the parent let her go.)

The cost of care, the lack of subsidies and prevailing wage rates are also factors in the demand/supply equation.

My sister with four children was thinking of getting a job and it would have cost her almost \$80 a week at that time, a few years ago, to have her children baby-sat (at the nursing home program). If she had been able to get on Title XX (the public subsidy program for low-income families) it probably would have made a difference but there was no room on Title XX and she just couldn't afford to work and pay for gas and pay \$80 for child care.

Another mother had given up her job outside the home and started doing child care because she couldn't earn enough money to afford a baby sitter.

It's almost not worth it for you to go to work. I worked at Shaw's in Lewiston (a supermarket 30 miles away). My husband was working

in the mill and they had a lot of [overtime] hours. (When they both worked, she had to get a baby sitter). I was making \$4.05 an hour (before taxes) at Shaw's and was paying the sitter \$1.50 an hour. When I added the gas money in and the time away from the kids, it wasn't worth it.

Because parents were careful about who cared for their children, the supply of potential providers was further reduced. Here are three comments:

It's hard to find a good baby sitter, someone you're going to trust.

I don't like to leave my kids with just anyone. It's hard now-a-days to find a real good sitter.

Maybe you can say I'm fussy. I don't feel comfortable leaving my daughters with just anyone.

Finally child care may again become a problem for families with a child entering kindergarten. As described earlier, parents often live in one town and work in another. Providers may live in a third town that may or may not be on the way to work. Four mothers had to adjust either their child care arrangements or their work hours because their children now attended school. One mother works 6:30 to 3:00 at the nursing home but may have to change her shift:

I don't know what's going to happen this fall because David's supposed to start school and that's going to be a real problem. My kids won't be going to the Dixfield school (so can't be transported by school bus to the nursing home program). The one solution that I've come up with -- it wasn't one that I was pleased with -- is to work 3:00 to 11:00 one night a week and to work weekends every other weekend. I can't think of anybody that I would want to take my place to send my child off to school. I want to be there to hear what he has to say when he comes home and having a baby sitter doesn't cut it. So that's my biggest problem.

Another mother may have to give up her provider with whom she is very satisfied:

Next year she may not have my children, which is really sad, because I really want her to have them, but Jamie is going to pre-kindergarten in Rumford, and there's no way to transport him from here to Rumford in the middle of the day, and it may not be possible for me to pay two baby sitters.

A family living in Jay and using a relative in Dixfield will have to switch when their daughter goes to kindergarten in a year. The mother works in Farmington and may have to stop work:

They have morning and afternoon classes. They'll switch, half the year they'll go mornings, half the year they'll go afternoons. So for a person who works, it make it very difficult because your schedule changes midyear. Everyone in this neighborhood basically works and it's hard to rely on a neighbor to take your child for

you. I would feel guilty if I asked somebody to do that for me. We have a little time to think about it.

One notable characteristic of child care that emerges from the Dixfield area interviews is its precariousness. Child care is hard to find, especially for families that do not have a strong familial or social network. For the most part, parents are pleased with their current child care arrangements but the future for many is uncertain. One of the providers, unsure is she would resume child care in the fall, cared for the children of a parent who said she might have to quit her job if she lost her provider. Another provider who had cared for the same children for four years was seriously considering work alternatives.

CHAPTER NINE

CHILD CARE INCOME AND COSTS

\$1.50 an hour isn't enough for child care really, but yet when you have to work you can't afford a whole lot more. (A Dixfield area parent)

Advocates area also concerned about the limited income most providers earn from child care. The earnings of child care workers frequently compare unfavorably with earnings for occupations such as parking attendants and fast food workers. Among child care workers, family day care providers are the lowest paid. In a study of Wisconsin family day care providers published in 1989, the average income after subtracting business expenses was \$2.37 an hour, well below the minimum wage. The primary reason that family day care providers earn so little is that parents bear virtually the entire cost of care. Margaret Nelson has argued that the earnings from child care are directly linked to the low wages women earn in general:

The wages women earn in the labor force influence a family day care provider's income. Women's low wages in the labor force have traditionally been justified by the assumption that women are secondary workers making unessential contributions to family income. This assumption affects day care providers who set their rates relative to what the women who are their clients earn.²

The Importance of Child Care Earnings

Among the providers interviewed in the Dixfield area, the importance of their earnings to the family varied significantly. Two relatives did not charge family members for watching their children. In one case whether or not to charge was related to the financial status of the family:

My aunts and another sister always paid but Bev isn't really in a position to and being family we don't take from each other. She says, "If you have something for dinner for them, I've got something for breakfast," and that's the way we've worked it out.

The providers who did charge for their services fell into two groups: those who reported that the income was not a necessity but helped buy extra things and those for whom the income made an essential contribution to the family budget. More than twice as many providers (11) needed their child care income than those

¹ Adams, 1990, p. 2.

² Nelson, 1988. p. 83.

who did not (5). Several providers in both groups stressed that their primary interest was caring for children rather than earning money. Here are sample responses from women who did not need the money:

It makes a difference as to whether you have any luxuries or are just existing. We could manage without it but all my children are grown and what do you do? There's only so much housework to do. Might just as well work and I do enjoy the children. I like the job.

It wasn't that we had to count on it. It helped out at Christmas or for a little extra here and there. It wasn't real important to us.

I did it for the extra pretty much. It wasn't like we had to have it. I did it basically because I enjoyed it.

For a sizeable proportion of providers, however, their earnings were essential to the family income. Even so, some stressed that the money was not their only motivation.

I have to make a certain amount for us to make out on our monthly budget. But it's not enough to say I'm doing it for the money. If I was doing it for the money I would be charging more than I am.

Five providers specifically mentioned that their child care income paid for groceries:

It is grocery money. If I said, "No, I'm not going to baby-sit," well, what do I do for groceries?

For one provider, the child care income was used for more than purchasing groceries:

I wish I could say it wasn't [important] but it is. Before, when I first started baby-sitting, it was to just make grocery money. But when you get a house and you have two kids and you're trying to do things to your house that you want, then you need to make an income. The money that I take in helps pay the mortgage and it helps pay the bills. If I didn't have this income, we would really be hurting. I would probably have to work outside the home.

Provider Fees

It is difficult to compare provider fees because providers used different methods of charging. Of the 18 providers who charged fees, 11 charged hourly fees only, three charged weekly fees only and three offered both (weekly fees for full-time care and hourly fees for part-time care). Only two providers did not offer a reduced fee for caring for additional children in the same family (one charged only \$1.00 an hour and the second \$1.25). Another provider did not charge for a second child in a family unless the child was under three. Another charged \$1.50 an hour for full-time care but \$2.00 an hour for after-school care.

Among the 14 women who charged hourly fees, the average for one child was \$1.34. Nine providers charged \$1.50, one charged \$1.25 and four charged \$1.00. All six women who charged weekly fees had established rates for a two child family. The average fee for two children was \$70.00 (half had not served a family with just one child so had not set a fee). Fees ranged from \$55 to \$85 for two children. In two cases the families consisted of one preschooler and one school age child. Neither provider had yet set rates for two full-time children from one family.

Fee setting was difficult for these women for several reasons. They knew what parents were earning and set their rates based on what they thought parents could afford:

It was \$50 for one and \$70 for two. I just couldn't ask more than that. The parents wouldn't pay it for two children.

I set that rate (\$140 a week for three children) because I felt that any more would be too much to ask from one family.

A licensed provider who only charged \$1.00 an hour for infant care was greatly influenced by a provider she had used when she was working outside the home:

She helped me set my rates. She helped my out [when I was working]. I could afford to work and afford to have my son go some place that I really liked.

Providers also found it difficult to negotiate fees with friends. The line between social and business arrangements was especially blurred around the subject of fees. Here are three examples:

With Billy's mother, we were good friends so it was, "Just pay me when you can." I'd get \$25 and then it would be a while. I never even kept track. It was more or less a favor.

One friend with three children, she gave me a good amount of money, but they were here a lot of hours. I never did figure out what it was per hour. She just asked me if that was enough and I said, "That's fine."

I debated so hard about raising my prices. I know [other providers] are making more money than I'm ever going to see but I still feel bad about doing it. But that's where I'm not businesslike enough. Because they're all my good friends. If I didn't know these people then it would be easier for me to charge them.

Supplying Food

There was little consistency among Dixfield area providers in how they handled food for the day care children. Some providers supplied the food and others had children bring their own food. When providers pay for food, they reduce their child care income. Many family day care providers see the USDA

Child Care Food Program as an important source of income. By getting their food costs reimbursed, they are able to net a higher proportion of their child care income. Only four of the nine regulated providers had been part of the Food Program. Two family day care providers testified to the importance of the program in reducing operating costs. One said it was "a big bonus." See Chapter Ten for a more detailed discussion of the advantages and disadvantages of the Food Program.

Charging for Absent Children

While family day care advocates promote the professional practice of charging for absent children, opinion was divided on this issue in Dixfield. Only three of the providers in the Dixfield area had negotiated such an arrangement with their child care parents. Providers felt strongly about the practice reflecting their attitude toward child care as an occupation. Two regulated providers were adamantly set against it:

I don't feel I should get paid for something that I'm not even doing. If the parents want to take a vacation, as long as they tell me ahead of time, there's not problem.

If they don't come for some reason or another, I don't charge them. I'm not in the business to get rich, so if they don't come, I say, "Just call me and let me know," that's all I ask.

The three women who did get paid for holidays and when families were on vacation also charged by the week. They had negotiated a weekly fee that was paid whether the child was there or not. Two were regulated; one was not. The registered provider said:

Whether their children are here or not I still get paid. They pay me for holidays. They pay me when they are on vacation. I'd like to have a paid vacation but I haven't done it yet. Because they all get paid vacations. I've taken four weeks off (unpaid) in four years and that was to have a baby.

The unregulated provider struggled with several compensation issues simultaneously. She tried to be fair to her child care parents while at the same time charge what she felt she deserved. Her rates were \$60 a week for a full-time child and \$15 for after-school care. However, this created a problem for her during the summer when she had both the preschooler and the school-age child full time.

All summer long I only charged \$75 for both of them (her school year rate) because what mom can afford to pay \$120, so I left them at \$75, but the reason why I do what I do is that the mom pays me for all holidays, she pays me for any time they take vacation. She took two weeks vacation this summer, and I still had that \$75 coming in. Now, that's more important to me than getting \$120 here and then getting \$60 here or getting nothing here.

However, since the preschooler is starting kindergarten in the fall, she had to

decide what to do during school vacations. First she told the mother that she would charge \$60 a week year round. Then she had second thoughts:

I went back to the mom the next day and said, "I don't feel right, and I really am sorry but I can't just charge \$60 and have them all summer and feel good." She was completely fine with that, so that's what I'm going to do. The two kids will go up to \$75 during the summer and during school vacations and they'll be at \$60 the rest of the time.

Even after a provider establishes a policy it may be difficult to implement when she knows a family's economic situation. This provider faced another challenge in applying her vacation policy because one of her children comes from a low-income family:

Her mother has vacation this week, and I could not ask her to do it [pay for the week her child would not be in day care]. So I said, "I don't want you to even worry about it, we'll resume next Monday the same way that we always do, and I don't expect to be paid." I know that's not completely fair to the other mothers, but what can I do? She's got bills to pay.

Provider Income

A provider's income depends not only on her rates but on the number and ages of children she cares for and the time of year. Some women with school-age children earn more in the summer, others earn less either because mothers have the summer off or use teen-agers. Family day care earnings ranged from \$25 a week for one part-time child to \$390 for eight full-time children during summer vacation. The latter is gross income earned by a registered provider and includes the \$100 a week she spent on groceries for the children. During the winter her earnings drop to \$250 per week because she has a number of school-age children who require child care part time. Her summer earnings help pay the bills accumulated during the winter. Although she likes the work, her inability to earn more money may cause her to leave the field:

I do this because I want to and to make money. I can't do this forever making what I am now.

Even her winter earnings place her at the top of the scale. The average amount earned by Dixfield area family day care providers was \$148 a week. Business expenses were not subtracted from earnings. Even women who cared for five or more children only averaged \$192 a week. When divided by five 11-hour days (the average hours providers reported working), they earn \$3.50 an hour on average -- less than the \$4.25 an hour minimum wage.

It is instructive to compare family day care earnings with those of workers in the nursing home program. While licensed as a family day care home because of its limited number of slots, it operates like a center in that workers are employees of the facility and earn regular wages. The director of the program who works 32 hours a week, compared to the 55 hours family day care providers

average, earns \$6.70 an hour. Her 11 year employment at the nursing home predates the child care program and accounts for her relatively high wage. The program also employs three child care workers. They earn between \$4.00 and \$5.00 an hour. While these wages are shockingly low, they still are an improvement over what women earn who work in their own homes with full responsibility for the children in their care.

In addition, because most family day care providers do not charge when children are absent, and because there is often a turnover in children, provider income can vary considerably. Seven women gave an income range in response to the question about how much they earn. (The midpoint was used in generating the average wage). The experience of two women is illustrative:

I started getting \$85 a week for the three [children] in that family. But then when they were working shutdown I was getting between \$100 and \$140. Now I just have one [child] for one or two days a week. Her mother works shift work at the hospital. So I make at least \$25 a week from her.

An average week would probably be about \$140. I think the most I ever earned was \$185. There were always weeks when I was going to make \$260 (given the number of children she had), and the kids just wouldn't show up, then you'd be out the money. Every week it was that way. It wasn't anything I could count on.

Parent Costs

The other side of the provider income equation is the cost to parents. Working parents in the four-county survey were asked how much they paid per hour for child care. Thirteen percent received free child care either from relatives or live-in non-relatives. Families paying for care averaged \$1.47 an hour. Table 11 shows the distribution of child care costs.

Table 12

Working Parent Child Care Per Hour Costs Four-County Respondents (In Percent)

Under \$1.00	14
\$1.00	24
\$1.25 to \$1.75	27
\$2.00	26
Over \$2,00	9
Number of cases	86

The pattern for Dixfield area families was similar. Two families received free care from relatives. The remaining families paid \$1.57 an hour. There was no significant correlation between ability to pay and child care costs for either

group. Lower income families pay nearly as much for care as are higher income families. Table 12 compares the average hourly cost for three family income groups.

Table 13

Average Hourly Child Care Costs by Family's Ability to Pay

Annual Household	Four-County Families	Dixfield Area <u>Families</u>
Under \$25,000	\$1.40	\$1.19 ³
\$25,000 to \$35,000	1.52	1.77
Over \$35,000	1,50	1.59
Number of cases	86	18

Two Dixfield area families who paid for full-time, infant care, illustrate the inequity between cost of care and ability to pay. One mother brought home \$170 a week and paid \$70 (or 41 percent of her income) for child care. Another mother earned \$300 a week and paid \$45 (or 15 percent of her income) for care. The first family's annual income was between \$20,000 and \$25,000. The second family's income was over \$50,000. The second mother changed providers because she was paying between \$75 and \$100 a week for care for her infant. She was delighted to find a provider who only charged her \$1.00 an hour.

However, another mother was much more conscious of the link between her earnings (which were considerable -- she was a skilled laborer in a paper mill) and what she could afford to pay for child care.

I used to pay her over \$120 a week back then, which was a lot of money. I used to think to myself, "This is awful, paying my baby sitter \$100 and something a week. How can I do that?" And then I stopped and thought, "This is foolish. Here I am making \$13 an hour and I'm complaining about paying my baby sitter to take good care of my children?"

In the Dixfield area, it would appear that the downward pressure on fees results as much from providers' reluctance to raise rates as from parents' reluctance to pay more. Two parents said that they had to urge their providers to accept more money.

³ Five families earned under \$25,000. One family was receiving a Title XX child care subsidy and only paid \$.25 an hour for care. When the Title XX family is excluded from the computation, the remaining low-income families paid an average of \$1.50 for care.

When Jimmy (her second child) was born Mary's rate went from \$40 to \$50. I wanted her to take \$60 so we compromised on \$55. I said, "I think you deserve \$55," and so she took it, and I think she was glad I insisted...When I went to Ruth (her second provider) it was \$65 a week, because she charges \$1.50 an hour for two kids, which is still incredible...I said, "You know, you really do way more than anyone should have to do for that amount of money, I think you're worth more than \$65." So I gave her \$70. Not because she asked, but because I felt it was worth it.

Brenda only asked me for \$7.00 a day. But I didn't feel that was right, so I was giving her \$10.00.

Not all parents are as understanding. As was mentioned earlier, one provider closed her child care business when parents refused to agree to a rate increase. She had been getting \$55 a week for two children and wanted to raise it to \$65.

Subsidies

Parents bear almost the entire cost of child care in the United States. In Maine, it is estimated that parents pay full cost for 88 percent of state-regulated care and partial cost for the remaining 12 percent. Federal and state governments subsidize eight percent of care for low-income families and employers are subsidizing just four percent of the care purchased by their employees. 4 Parents, of course, pay the entire cost of unregulated care. Experts agree that one way to increase the number of providers and the quality of programs is to pay providers more money. Given the income of most working families, the only way to achieve this objective is to increase child care subsidies. 5

Depending on their income, Maine parents have access to five sources of subsidies: 1) Title XX for low-income families; 2) a voucher program for low-income families; 3) the ASPIRE program for welfare mothers in training; 4) employer benefits; and 5) child care tax credits.

Title XX is funded by federal and state government. Child care centers and family day care homes are allotted a number of "slots." When eligible families need child care, they are placed in a facility with a vacant slot. The state-funded voucher program is administered differently. Eligible families may use their vouchers at any regulated child care program of their choosing. Using state and federal funds, the state will pay for ASPIRE participants' child care

⁴ Maine Department of Human Services, Bureau of Social Services, Office of Child Care Coordination, "Growth of Employer-Supported Child Care Benefits Programs from 10/1986 to 10/1988," Augusta, Maine.

Maine Department of Human Services, Bureau of Social Services, Purchased Social Services, Contract Year 10/1/88 - 9/30/89, "Day Care," Augusta, Maine.

⁵ Shuster, 1989, p. 48,

in regulated programs and legally unlicensed homes (those with one or two unrelated children).

None of these programs is funded at a level to serve all eligible families. In FY 1991, 27 percent of the Title XX slots were allocated to family day care homes, or 356 slots for the entire state. In the spring of 1990, Community Concepts, Inc., the agency that administers the Title XX and voucher programs for the Dixfield area, reported that 12 at-risk families were waiting for a Title XX slot and that 100 eligible families were waiting for vouchers in the three-county service area. Due to the state's fiscal crisis, the voucher program has been eliminated and then reinstated. Federal Child Care and Development Block Grant funds are now available to finance the program as well. No new clients are being enrolled in the ASPIRE program because of a lack of funding for child care and other support services.

There is very little subsidized child care in the Dixfield area. At the time of the Dixfield interviews, the nursing home program had the only two available Title XX slots. A follow-up call in the fall of 1990 disclosed that two more slots had been assigned to a licensed home for children receiving child protective services. There were no families on the voucher program, although the nursing home had had one family with three children receiving this subsidy in the past.

An unexpected finding in a community of 2,500 was the existence of an onsite, employer-supported child care program. It was started seven years ago when the nursing home was independently owned. At that time, the administrator and four of the nurses were pregnant. Thus, the child care program was created in direct response to employee needs. The nursing home has changed hands twice since then and now is owned by a large national corporation. Yet the child care program has survived. The nursing home bookkeeper reported that the corporate owner does not intend to close the program even though it is heavily subsidized. Program fees are competitive with area family day care providers: \$1.50 an hour for one child, another \$.50 for each additional child. Nursing home employees are charged \$1.00 an hour. In addition, the nursing home provides space, heat, electricity, and laundry. The program generates \$375 a week in income and its operating expenses are \$575. Thus the nursing home subsidizes 35 percent of the costs of the program. The child care program staff receive the same benefits as other nursing home employees: vacation, sick time, paid holidays and health At the time of the interview, three of the eight families using the program were employees of the nursing home.

While the school system is one of the area's largest employers, it offers no child care benefits to its employees nor does it have a before-and-after-school program for children of working parents. An interview with the school superintendent revealed that the lack of a child care program was not perceived as a problem. Interestingly, before-school activities were available to at the Canton elementary school because of the school bus schedule. The same bus which transported older students to the middle and high schools in Dixfield delivered a dozen elementary school students one-half hour early. A teacher's aide was available to supervise the children who arrived early. Half of the children had working parents. Two parents commented on how valuable this arrangement was to the community.

Of the 20 Dixfield area parents interviewed, one had a Title XX subsidy at the nursing home; another nursing home employee benefitted from her employer's subsidy. A third parent was an ASPIRE participant who received a child care subsidy through the program. Another provider was planning to care for her sister-in-law's child due in the fall. The sister-in-law would be a teen mother, and the ASPIRE program would pay for her child care so she could return to school. The state's 1991 fiscal crisis has placed even these limited programs in jeopardy.

Prior to the passage of the federal Child Care and Development Block Grant, the largest federal contribution to parents purchasing child care was the child care tax credit. Primarily benefiting middle and upper-income families, the tax credit accounted for the growth in federal child care funding in the 1980's. Only four Dixfield area families mentioned that they used the credit. The credit was significant enough for one parent to stop using a provider who did not want to report her income. Another parent made the opposite decision. She used the credit in the past but will not apply for it again because her current provider does not report her income to the Internal Revenue Service:

The lady that's baby-sitting for me now, is just doing it under the table and we don't want to jeopardize that by putting that [her social security number] on the form. But it hurts you if you don't because you lose it [the credit].

CHAPTER TEN

PROFESSIONALIZING FAMILY DAY CARE

I was really excited [about becoming regulated] and felt like finally I'm going to get recognized that I'm doing something with kids [not just baby-sitting]. (A registered provider)

I just feel like I'm doing a fine job and I don't need someone looking over my shoulder. I just don't want the regulations they have. (An unregulated provider)

Public intervention in family day care has taken two forms: regulation and support services. Most state and many local governments have set health and safety standards to which family day care providers must adhere to operate legally. Support services include technical assistance and training through the Child Care Food Program, Title XX, and resource and referral agencies. Family day care associations also provide training and peer support. The resource and referral agencies generate business for existing providers and recruit new providers. Child care advocates support both forms of intervention as they contribute to the to the professionalization of family day care.

Child Care Regulation

Everyone agrees that children should be cared for in safe environments. The conflict over regulating family day care arises because, while it is a business exchange, and therefore a fit subject for public regulation, the service takes place in the provider's home. Americans are fiercely protective of their right to privacy and are strong believers in protecting the home from government intrusion.

There also is agreement that family day care regulations must be reasonable, both to protect families from unnecessary intrusion and to encourage maximum provider participation. Child care experts attending a June 1989 round table at the Yale University's Public Policy Center to set policy directions for family day care described the problem this way:

The challenge of the regulatory process in family day care is to protect the rights of children in care and their families and the rights of providers and their families. If standards are too lax, children in care will be at risk; if they are too stringent, the economic viability of family day care is reduced, forcing providers underground or out of business. 1

¹Shuster, 1989, p. 11.

William Gormley expanded on this dilemma. If the goal of public regulation is to increase the affordability, availability and quality of day care, then current state and local child care regulations in this country can be counterproductive. He found child care "excessively regulated in some state and localities and insufficiently regulated in others." While few precise studies of family day care regulation have been conducted, he did find some correlation between regulation and quality of care: The National Day Care Home Study reported that a greater proportion of regulated providers had received child care training than unregulated providers and that more training was associated with more provider interaction with children. This finding is not surprising since most family day care training is limited to regulated providers.

While there are important gains to be made through regulation, Gormley found that the effects are not always positive:

While regulation can improve the quality of the care given to children, it can also decrease the supply and raise the costs of day care, thus aggravating two already serious problems. It can also, ironically, result in fewer regulated facilities.⁴

Across the country, Gormley found that the more stringent the regulations, the lower the supply of regulated family day care homes. For example, one Georgia county required family day care facilities to have separate building, plumbing, and electrical inspections. Eight out of ten family day care providers simply ignored the requirements by going underground, and, as a result, operated without any regulation at all. He also found in a study of family day care regulation in Milwaukee County, Wisconsin, that it was costly to meet licensing requirements. The average cost of home improvements alone was \$936. CEI's Child Care Development Project has yielded similar results. The cost of meeting Maine's licensing requirements averaged \$1000 for home-based programs participating in the project. Cost is a serious obstacle to increased regulation, particularly for low-income providers.

Regulations will have a minimal impact on family day care without enforcement. Gormley found that in states with many regulations and few inspectors, a relatively small percentage of the rules were being enforced. Limited enforcement also means that providers can operate illegally with little risk of detection.

Gormley concludes his analysis with a recommendation for a reasonable approach to family day care regulation:

The extension of state government regulation to family day care homes must be handled with sensitivity. A Blunderbuss approach could drive some providers out of business altogether. Particular

² Gormley, 1990, p. 23.

³ Divine-Hawkins, 1981, p.34.

⁴ Gormley, 1990, p. 23.

care should be taken in rural areas, where family day care may be the only option available to working parents with young children. In designing new regulatory systems, states must bear in mind that a family day care home is primarily a home and only secondarily a business. States should try to make regulation of those homes as reasonable as possible, taking special care to minimize intrusiveness and costliness.

In Maine, child care licensing workers carry an average caseload of 337 centers and licensed and registered homes. Centers and licensed homes must be inspected at least once a year. Until recently registered homes were also visited annually. Due to the state's fiscal crisis and staff layoffs, registered homes are only visited when time permits or complaints are lodged. (Another reason for no longer visiting registered homes is to emphasize the difference between the two types of home-based regulation.) Workers average 30 complaints a year from all type of facilities. According to the director of the Child Care Licensing Unit, under-staffing means that only licensing inspections that are legally required will be conducted. The practice of visiting facilities two or three times as year to develop good working relationships with providers and detecting possible problems in their early stages is being abandoned. Because of the growing workload, child care licensing staff are discussing the legal ramifications of not conducting annual visits to facilities that have performed well in the past. Of particular concern is that the least regulated type of facility is the fastest growing in Maine: the number of registered homes grew 14 percent in the six-month period between July 1990 and January 1991. There was no growth in licensed homes, and centers grew by seven percent.

A major purpose of this study was to determine how much child care in rural communities is regulated and what could be done to make regulation more attractive to providers and parents. As noted earlier, 72 percent of the telephone survey respondents used unregulated care. Neither a significant number of the parents in the four-county survey nor of the parents in the Dixfield area interviews indicated that regulatory status affected their selection of a child care provider. In the four-county survey, of the ten factors that influence parental choice, only the provider's religious beliefs was considered less important than her regulatory status. One out of five (nineteen percent) of the working parents said regulation was very important in choosing a provider compared to nearly one out of two (46 percent) who said it was not at all important.

The interviews with Dixfield area parents gave some insight into why reaction to regulation is so varied in a rural community. Both parents and providers were asked about the importance of regulation. Parents who used regulated providers were asked how important this was to them. Parents who did not use regulated providers were asked if it mattered that they were not regulated. Regulated providers were asked what made them decide to become regulated. Unregulated providers were asked if they had ever considered becoming regulated and, if so, why they had decided against it.

⁵ Ibid, p. 28.

Parent Perspectives

Dixfield area parents' responses to child care regulation fell into three categories: those that thought regulation was very important; those that thought it was important but only under some circumstances; and those for whom it was of no importance.

Of the 18 parents who paid for child care, three thought it very important that their providers were licensed. One of the parents responded that she would not have used her current provider if she had not been licensed. She had not known her provider before using her for child care.

It's very important to me. It's good to know that there are things she has to go through in order for her to be approved. I don't think I would have brought them if she wouldn't have been licensed... She sat down and showed my her certificate and I asked her questions, like what she had to do, what she had to qualify for as far as the house [was concerned].

The second parent was equally clear about the importance of licensing in her current arrangement:

I think it is very important. I don't know too much about that aspect of it, but I know that they can't do as they please. I know that somebody out there somewhere is doing something to look out for my children's best interests.

However, her former provider had not been licensed. The parent did not know her but she had come highly recommended. She went to visit her before deciding to use her services. The parent relied on her own judgement in determining her competence. She found her "very, very nice" and "felt confident with her."

The third parent wanted her provider licensed not because it would affect the quality of the care -- "The only thing that mattered was his happiness and knowing that he was well taken care of" -- but because she wanted to claim the child care tax credit.

The second group of parents thought licensing was important in some circumstances. Eight of the 18 parents did not think that their current providers needed to be regulated because they knew and trusted them. But they could think of situations where it would be important. They did say that if they were using someone they did not know they might want her to be licensed. Three parents thought it was important for centers to be licensed but not family day care. Three parents had used providers who had become regulated while their children were enrolled and they did not see that it made any difference. Here are sample responses:

It's not too important because we are friends and I trust her. If it was somebody else, I would probably want them to be. (Her provider was licensed.)

I don't think licensing makes a big difference because I would still

know what kind of a person she was and I would know what kinds of things she was doing...Perhaps if we were in a different environment and I had to use a different kind of day care maybe licensing would matter. But I would rather have him with someone that I know well and feel comfortable with. Just giving someone a piece of paper doesn't guarantee anything. It's a start but look at what happens to foster children. (Her provider was legally unlicensed.)

It's not important at all. As a parent I know what's going on in a small group. I don't even have to be there. I can gauge it with my kids. I can tell that they are so happy and carefree that you know they are being well fed, being loved. I can tell by looking at their home and I can tell by the way their own children are being kept and by conversations. I feel I can read that about [the providers]. The other thing is that I've known all the people that I've had or had real good references. I don't see where the state registration did anything. When I first started going to Ruth she wasn't registered and then someone [reported her] and then she became registered but there was no difference. She is a good person and has a good home and state registration made no difference one way or the other. Now maybe in a larger day care center, I know there are placed in Rumford that are just huge, and that may be more important. For me it hasn't been an issue because I seek out the smaller family day care anyway. I have no desire to go to a center. (Her current provider was operating illegally.)

It really doesn't matter to me. I'm glad she is, knowing that she does have to fit some kind of standards, but I'm just happy with her. If she wasn't licensed, I'd still be happy with her.

To me, if you're licensed, you're serious. You have guidelines that you really should follow. If I had a choice, I would take a licensed day care person over an unlicensed, if I didn't have Brenda. Brenda's different only because she's more like family. She loves the kids. She has the patience of Job. [Licensing] would be a big factor in hiring someone else, a very big factor. (She has sister who is licensed to do child care in California. She has tried to persuade her current provider to become licensed) I talked to her last year about it, "You'd probably end up better if you were licensed then what you're making now (because of the business expense deductions)." But she's afraid. She says they're so strict when they come into your home.

Another parent thought the size of the community made a difference.

If I have to move to a bigger area then I would probably go with a licensed day care over somebody that wasn't licensed. But in a small town like this I would pretty much go with someone that wasn't. (She had had a negative experience with a licensed provider.)

Finally, this second group included a parent who criticized not the concept of

licensing but the way it is implemented. He was happy with his current unregulated provider because he "totally trusts" her. However, he had serious reservations about the effects licensing has on day care centers and made a plea for more adequate funding for staff.

It depends on what a license is for. What is a license for? If it's for the mere fact of paying taxes to the state because you're running something that's involved with people and stuff like that, well, I don't think that's the kind of license that a day care center needs. I think they need a lot of supervision, a lot of visits, a lot of overseeing, a lot of well, a lot of paperwork. What did you do today with so and so, and I think I'd like to see people in day care centers being screened ... You can see from those screenings what kind of people that you're dealing with...So many times, the State comes up with plenty of good ideas but no support... The politicians have wonderful ideas, but when it comes to implementing those ideas, and planning those ideas, that's for someone else to do, and, well, that's the way it is ... I would just like to see [a different] kind of licensing process in day cares, [because] you're dealing with some very special people, and it should be some very special things that go on to protect those very special people. If you're going to get quality people in [day care], then you've got to have [adequate] funding...You know, as a taxpayer, I would be willing to pay more taxes if it meant that we were going to get quality places with quality people to leave our kids.

Eight parents were in the third category. Regulation was of no importance to them because they always relied on their own judgements and the reactions of their children in choosing a provider. One of these parents made the point that licensing in and of itself didn't guarantee a good program:

Just because they're licensed doesn't mean they are going to do a good job with the kids. She's doing everything that a licensed person would do, she has nap time, quiet time, story time, they have play time, they have snack time so I don't feel that she needs it. (She did use a licensed provider in the past. While becoming licensed did improve the safety of the home, it did not change the quality of the programming.) She had a wood stove, they put a gate on it so no one would get hurt. She made a new addition on the playroom...She never did anything different from unlicensed to licensed. (Her current provider is operating illegally.)

The following parent willingly sacrificed the child care tax credit to keep her unregulated provider. She was concerned that a provider who is licensed, i.e., more businesslike, is more likely to be doing it for the money.

I trust Brenda implicitly...I'd rather have them in an environment where I know that they're being loved than to have some place that's licensed and has three bathrooms and spic and span floors and someone who just ignores the children and takes my money once a week. (Her current provider operated illegally.)

Provider Perspectives

Regardless of their regulatory status, all of the providers knew that the state regulates child care. However, there was considerable confusion about what regulation meant including the difference between licensing and registration.

Regulated Providers: Eight of the 21 providers who had done child care in their own homes were or had been regulated. The distinction between the two options was not clear to two registered providers. They both insisted they were licensed. This confusion could be because up until recently the Department of Human Services Licensing Division had been doing regular inspections of registered homes. Each provider had come to regulation by a slightly different path. Half of them become regulated on their own initiative prior to starting their child care businesses. One of these providers, new to her community, became licensed because she thought it would attract parents. (It not clear that this is an effective strategy given the parents' opinions cited above; in fact, when this provider lost one of her two families, she had trouble finding a replacement and resorted to advertising in the local paper). Another selfinitiated provider simply responded that she did it "to be legal and everything statewise and government wise." Another became registered when she learned from her sister how easy it was. The fourth provider was educated by a friend about the advantages of being licensed:

A friend of mine who lives in Lewiston is licensed. She said it's a better benefit as far as people trying to come into your home, they know that your home has been checked and that you've been checked and they have a food program and you get a little bit of help on that end for the food. All around it's better, not only for the person that's coming into your home, but for yourself, too. Plus it's a tax, income deduction. Your gas and your bulbs and you cleaning stuff, you can deduct all that.

The other four providers had been operating illegally for some time before becoming licensed or registered. One, after eight years of operation, was reported to the state. Her response was, "I didn't know that you had to have a license to baby-sit in your own home." Another was in business for three years before a parent who wanted to claim the child care tax credit asked her to become regulated. Another provider became licensed to get homeowner's insurance after several years of operating under the table. One woman, who is no longer does child care, said it took her several years to become registered because, "There was a lot I didn't know that scared me." Once she got up her courage, she found the experience very positive:

My mother-in-law kept telling me to get licensed, "You do so good with kids and all this and that," so I saw in the paper they were having some classes down in Lewiston, so I went down...The licensing worker said the house was just great for kids...I chose registration so I could have the number of kids that I wanted and the ages. Like they told me down there, a lot of parents would rather have a licensed baby sitter, but with the parents that I had, it didn't

matter, so I took registration so I could keep those kids that I had. But I went right by the licensing rules. Like I had the fire extinguisher and the back door and the fence, everything that a licensed person would need, which she told me you don't really need this because you're registered, but I went by safety standards, just like you would if you were licensed.

Another woman who no longer does child care also made the decision to be registered rather than licensed because there was more flexibility in the adult/child ratio. Unlike licensed provider, the registered provider does not have to include her own preschool children in the registration count. This is considered a major advantage of registration, especially for the mother with a number of children of her own.)

I don't know why I decided to get licensed in Livermore. When I came here I was registered because you could have more kids registered than you could licensed.

She, too, found regulation very helpful:

It was helpful because it helped you keep on a business level...keep the attitude that you were a business and that you were trying to keep up. Being licensed helped you to be more aware of what things were going on. Helped you get into the conferences and things like that.

Most of the providers found that they did not have to make many changes in their homes to become licensed or registered. One provider made no changes. Another had to fence in the play yard. A third had to install sheetrock on a basement door and replace a safety switch on the furnace. A fourth provider who had received a provisional license found the health and safety requirements unreasonable and burdensome. She decided to stop doing child care, in part, because of these requirements.

They wanted me to have a wrought-iron fence around the wood stove. And all these children have been raised around wood stoves. They know not to touch them. They wanted acrylic sheets across the balcony and down the staircase. Wanted sheetrock on the oak doors to make them into fire doors. They wanted me to have a 50 by 50 foot fence. (She did none of these things.) They sent the license to me. They never even bothered to come down to see if I had done any of that stuff.

After the initial apprehension over being "inspected," most of these providers found the visits tolerable and the licensing worker supportive. The director of the nursing home commented:

I don't see much of her. She comes in and asks a lot of questions, runs through our paper work and signs a sheet and we get a new license is about what it amounts to. She's a very pleasant lady but we don't see her maybe once or twice a year. But I feel comfortable talking to her. If something came up, I'd call her.

Another provider shared this experience:

She's really nice. I liked to talk to her. She told me a lot of different things.

The comfort level was related to the number of inspections a provider had experienced. An old hand said:

The state fire marshall comes once a year and checks the whole thing. Somebody will come from the State and she'll go through the whole house and ask you all kinds of questions. I don't mind that. I figured my own [children] have been here for a good many years and they survived. A lot of these children are better off in baby-sitting and day cares than they are at home.

Another said:

I was a little nervous at first, because I didn't know how they'd be, but there was no problem. The state licensing worker says she's not here to check on my house to see how clean it is. It's important to me though.

Unregulated Providers: The reaction of the unregulated providers to becoming licensed or registered was noteworthy. Only one adamantly refused to consider the possibility. She said she would reduce the number of children (to operate legally) or stop altogether if she had to be regulated. Her chief fear was that she would be told how she was to care for children.

The only thought I have had about it is that I don't want to. I'm doing it became I want to do it and doing it the way that I raised my children. I've only heard a little bit about being licensed, and I just don't feel that I need to have somebody looking over my shoulder. And it's not a necessary income for me so if it came to that, I would probably not do it, or do it on a smaller basis.

The reaction of the remaining providers was more positive. Two had already filled out applications. Three more indicated that they were considering regulation.

One woman did not want to be regulated because she was operating under the table, i.e., not reporting her child care income. Now that parents must include her social security number on the child care tax credit form anyway, she is reconsidering. Her insurance agent has told her she needs to be licensed if she is to get house insurance.

So now, I wouldn't have any qualms with trying to get registered. In fact, it would probably help me out. My neighbor is licensed through the state and she even gets paid by the state somehow.

Misinformation about the requirements has kept several providers from

pursuing licensing. One was afraid that she would have to accept every family that applied and continue serving them even if they did not pay her. She did not want to give up control over her clientele. Another had been told that she needed to be licensed regardless of the number of children she had. A third was afraid she would not pass inspection so did not even try:

I looked into licensing. One reason I didn't was I was afraid they wouldn't approve me, so I just didn't try. We have a wood stove [in the kitchen] and could I just put a gate up at the two doorways to the kitchen or are they going to say, "No, you can't have that, it doesn't meet fire codes."

Some of the information about regulation was accurate but also stopped a provider from operating legally.

I thought about it but we can't I'm told. Two of my friends are licensed and registered. I only have one door. Because you need two doors, a good fire exit or something and I don't have it. They said, "You don't have two doors. They will never license you."

Another provider has not pursued licensing because it represents a commitment to child care that she is not ready to make.

I've thought about it but I'm not familiar with it. I really haven't even looked into it. I wasn't sure if I really wanted to do something full time like that.

One provider who had just started doing child care was receptive to the idea but was unsure what to do about it.

The mother I'm going to be baby-sitting for, she said that she'd heard about licensing but I don't really know how to go about doing it. I don't know what you have to do and I guess it's a long process. That (the possibility of getting licensed) is why I'm putting the fence up.

The greatest dilemma was experienced by the unregulated provider, who in other respects was the most "professional" of the women interviewed. She ran a structured program, had already installed smoke detectors, and had child-proofed her house with electrical outlet protectors and cupboard locks. She had filled out applications for both licensing and registration and had gone to her doctor for a physical. In the interview, she outlined all the things she had weighed in trying to decide whether to become licensed:

I had been thinking about getting licensed and my friends came and talked about how easy it is to access the papers and to do it all and I thought yes, I want to do that...I wanted to get a couple of more [families] for the fall. But that was before I had all these other people calling me. (She is now full.) Being licensed has the advantage of the reputation of having that label. Also my neighbor (who is licensed) said it would help out if you ever need to be backed up by the State for any reason. She was talking about [being

accused of] abusing children or things like that. But it's not a concern of mine because the mothers who bring their children know me, and I know them well enough that I know, no one is going to accuse me of doing anything. [Another reason is] that if I were licensed [a low-income mother] would be able to go through the State and the State could pay me, if she was really having a hard time. That was one of the reasons in the back of my head why I wanted to get licensed. That was the next thing that really pushed me to fill out the paperwork.

I don't want to be illegal or anything, but if everyone's happy with what I'm doing and who I have then I think that's what counts the most. I have everything filled out, I just couldn't figure out which one I want to do. I went and I got my physical done and I was talking to the doctor about why I was having a physical and he said, "Why are you doing that?" and he told me his views about being licensed. "Why are you having people come in and poke around in your home when you have mothers at your house that already know that you do a wonderful job. It's not going to change the way you baby-sit. It's not going to change anything." So, I got to thinking about it and I talked to [one of the mothers] about it and [heard] her feelings on it.

She was struggling to figure out why she needed to be licensed.

As long as I'm doing a good job at baby-sitting and the mothers are the ones that I really want to please, it's not the State. I already know that my water's fine, I already got it tested last year and I know that I really run a good household [so I know] that everything would be fine.

But what I feel is that, it's between the mother and the child and the mother and me. And if they feel comfortable enough with me and I feel comfortable enough with them, that's as far as it needs to go. I don't need to have extra [children]. One of the reasons why I wanted to do it was because of the food program. I thought that was really good. But, I thought also that every week the moms help me [with food]. They bring a loaf of bread or a thing of orange juice and yes, I buy a lot of bread and I buy a lot of things. I have to pay a yearly fee to be licensed or registered and I'd have to do a bunch of paperwork that I don't have time for. [One of the mothers] told me about her other baby sitter who got turned in. [She had to get registered] and nothing changed. She did the papers and everything was fine but then nothing changed. It leaves only the relationship between the mother and the baby sitter so that really made me decide that I'm just going to stay the way I am. If I feel that I can handle [the children I have]. They have a limit of 11 children or ten children or something like that and there's only a certain amount that can be pre-school, I think it's four or five can be pre-school and I have one extra pre-schooler. I don't feel it makes any difference because I can handle that child. only have seven [children in total] but I've got five that are going to be pre-school and you're only allowed to have four. And I thought, I don't want to start out lying. I'm not going to state I don't have this child but I really have this child. If I decide to do it, I'll do it next year. I'll think about it.

I think the most important thing is if the parents are happy with you and you're happy with the parents and the kids are happy, that's the most important thing.

Some of her parents are planning to use the child care tax credit and she is going to report her child care earnings as taxable income.

That's why I don't really think there's much of a difference. I'm going to claim the same thing Mindy (a licensed provider) does, the only difference is that I'm not going to pay a yearly (licensing) fee and I'm not going to get reimbursed for any food. What else am I missing? Really, is there anything else that I don't know about?

For this provider, her confidence in her ability to care for children, reinforced by the support she was getting from parents outweighed the perceived benefits of regulation.

Child Care Support Programs

Four publicly funded support programs are available to Dixfield area regulated providers: the USDA Child Care Food Program, the Title XX Child Care Program, Finders Seekers (one of Maine's ten resource and referral agencies), and Opportunities for Preschool Children (one of Maine's sixteen screening and evaluation programs for handicapped preschoolers). Community Concepts, a Community Action Agency serving a three-county area, administers the Food Program, the Title XX Program and Finders Seekers in the Dixfield area.

The Child Care Food Program: This support program is heavily utilized by family day care providers. In Maine, 65 percent of regulated providers participate. The purpose of the program is to improve children's nutrition. Participants are reimbursed only for the costs of approved food. Providers receive information on acceptable foods and submit weekly menus to their sponsors (local agencies certified to administer the program) for approval. They report the number of meals and snacks consumed by children in their care (including their own children) and receive reimbursement based on a standard cost per meal. The program has attempted to keep paperwork to a minimum. It is one of the few federal programs that does not require a means test, i.e., all children in a child care program are eligible regardless of family income.

Two requirements of the program have resulted in the creation of family day care support networks. First, the sponsoring agency must visit each family day care program a minimum of three times a year. Second, all participating providers must attend nutrition training at least once a year. Along with licensing inspections, Food Program monitoring visits may be the only opportunity many family day care providers have to communicate with a child care

professional.

The Title XX Child Care Program: This program purchases slots in child care centers and family day care homes for children in the State's protective service and in foster care, and for children from low-income working families. Regional private nonprofit child care agencies are awarded state contracts to place children, monitor their care and pay providers. Placements are monitored monthly. One Community Concepts staff member monitors both the Food Program and the Title XX Program in Oxford County. She reported that during her monitoring visits her counseling and technical assistance goes far beyond the Food Program and Title XX requirements. In addition, she communicates with providers through a monthly newsletter. The Title XX program provides money to the child care agencies to train providers. Community Concepts makes this training available to Food Program participants as well.

A major purpose of this study was to investigate was how well these publicly funded child care support programs function in rural areas. The answer, based on the Dixfield area interviews, is that while the programs are well received by those that use them, they reach relatively few providers. In part this is due to limited resources. Because of the efforts of the Food Program and Title XX monitoring staff, Oxford County has increased the number of Food Program participants from 22 to over 50 in a three year period. Even so, these 50 providers represent only a small proportion of the women doing child care in the county. The program's impact is further limited by the reluctance of regulated providers to participate. The regulated provider trained in early childhood education commented:

I just haven't gone to any of the [training programs]. I just basically run my own.

Four of the nine eligible providers in the Dixfield area were or had been Food Program participants. Their reactions to the program ranged from positive to mixed.

We have a girl come down once a month (to the nursing home program) and she stays for one of the meals, checks a list of children and sees what we are doing. She's been coming for the last three years. We're quite familiar and we call back and forth.

Two providers found that the food reimbursement helped financially. One commented:

The Food Program helps out, the money helps out. It is not a hard menu to go by. I do it right by the book. But I know there are too many people out there that don't do it by the book and they're getting paid what I'm getting paid and they're not giving anything. I've been where they give them three or four crackers and that's your afternoon snack. You're supposed to have your fruit or vegetable and your juice and milk and cheese products.

Another provider liked the program, particularly the help she got from the

monitor.

The Food Program person was real nice. I liked her. And she gave me stacks and stacks of stuff to read. She was real helpful. Any questions? She said, "Call me anytime." She was real good.

But this provider found the requirement that she serve a hot lunch difficult to comply with during the summer.

I liked to give them something different everyday not peanut butter and banana everyday. But it was hot that summer. It took a lot away from the kids having to prepare meals like that. They won't allow boxed macaroni and cheese that the kids love as long as you give them vegetables which I thought was healthy. The homemade baked macaroni and cheese takes a lot of time to prepare. I found myself cooking chicken at night, the night before they needed to have it and then "nuking" it for their lunch, but still made it real hot and the kids didn't want to eat a lot of the time, because it was too hot.

Two regulated providers chose not to participate in the Food Program. They gave the following explanations:

They tried to get me to become part of the Food Program. But I felt that with the children I had at the time and the things they liked to eat as opposed to the things they wouldn't eat, it was too much paperwork for the whole thing.

They wanted me to get involved in their food program. (She was referring to the low-cost food distribution program in Lewiston. She did not appear to know about the food reimbursement program.) The only thing is that I find that this child wants spaghetti-o's. This one here wants peanut butter and marshmallow. So the parents supply the lunch. They would like to have you supply them with a good meal at noon. Like I'd say, "Today it's chicken day." "Oh, I don't like chicken. I don't want chicken." That would be just a waste.

Another provider, already in business for four years, currently was considering joining the Food Program. She was concerned about how little she earned. When she called other providers to check on their prices, several mentioned that the Food Program helped them financially.

Community Concepts runs regular provider workshops but they are offered in larger communities, an hour's drive from Dixfield. Scheduled for evenings and weekends, they are difficult to attend for women who work eleven-hour days and care for family needs on weekends. The nursing home program staff and two regulated family day care providers had taken advantage of Community Concepts sponsored training and/or the annual conference of the Maine Family Day Care Association. One provider commented:

Those meetings do help. Help you to be informed and to know that

you're not alone.

Another provider was even more enthusiastic about her training experiences. She went to six, weekly evening classes in Lewiston by herself.

I was so excited taking those classes because all these day care providers and baby sitters were getting their feelings out and telling how they had the same problems. I couldn't wait to go every time they had them and that helped me a lot. And Community Concepts was there and they talked, gave me a list of people who I could get in touch with for different things, it was really a big help.

She made a significant time commitment to attend the training.

I had to travel down there for the classes that ran from 6:00 to 9:30. I didn't get home until 10:30 to 11:00 at night. One night, it was so foggy, I couldn't even see the road.

On her own initiative, another provider took a Red Cross CPR for children course at Rumford Community Hospital before starting her child care business. She planned to take a First Aid course, as well.

There is no question that attending a formal training program requires family day care providers to sacrifice time with their families:

I haven't been to any workshops or training courses because a lot of them are during the day and I'm not available at those times. The ones that are at night are usually in South Paris (Community Concepts' central office), an hour away and I just can't do it. I usually like to spend time at night giving my daughter one-on-one...I very, very rarely see a lot of jealousy in her. But I do like to give her the one-on-one to let her know that, "Yes, I'm yours."

Husbands' schedules can also make it difficult to attend training. One licensed provider had not taken the training offered through Community Concepts because her husband worked nights and there was no one to care for their children.

The provider who attended the courses in Lewiston describes the obstacles to attending training after work in a strange place.

[There was training] in South Paris. I tried to go alone one night and the boys' father didn't pick them up (she was recently separated from her husband and trying to support herself through child care), so I missed that. It just didn't worked out. I didn't really know where it was so that was an excuse I used not to go.

Finders Seekers: As mentioned in Chapter Eight, Dixfield area providers did not actively use the area resource and referral program, Finders Seekers, primarily because they are nearly always full. And those who were registered, reported that it was not a good source of referrals. One provider approved of

the service in principle, however:

I am on Finders Seekers' list. I've never had anyone call and say that they've gotten my name from there. Someone may have called having gotten my name from them but they didn't say that. I do refer a lot of the people that call here looking for day care, I refer them directly because it's a good program. If and when I go back to work I'll definitely call them only because the people that are listed through them are licensed and I think that's important. They have to be child-proofed and they have to have a certain play area.

Another provider found it frustrating to be on the list because she never had openings:

Finders Seekers called at first. But, of course, I didn't have any openings. So I just told them, "Please take my name off the list. When I need your services, I'll call you." And I haven't. If you don't have space you can't take them and a lot of [parents] don't like it when you say no.

Another had a Finders Seekers application but hadn't sent it back. She explained, "See, I've had no problems getting anybody on my own."

A new provider who was looking for families was listed with Finders Seekers but had not received any referrals from them. Another provider did get one referral when she was first licensed.

Opportunities for Preschool Children: The purpose of this screening and evaluation program is to identify handicapped children and to help parents find appropriate services. It is one of sixteen county programs coordinated through the state-level agency, Child Development Services. One of its services is to evaluate the developmental progress of all children in child care centers and family day care homes in Oxford County. While its central office is in Norway. it maintains an office in Rumford. Even though a number of Dixfield area providers had cared for children with special needs, none was aware of the program. The problems families with handicapped children face in a rural area are graphically illustrated by the examples cited by Dixfield area providers. It is apparent that the providers -- even with the best of intentions -- are often unable to provide adequate care without assistance. These examples are moving testimony of the great need for services for children with special needs in rural communities. The director of the nursing home program described both what they had and had not been able to offer families:

We had a Down's syndrome child for a while till her mother moved. We've had an emotionally disturbed child here and made out all right. We were asked to take a child that's really crippled but we're not set up for it. If we were on the ground level it would be easier. But you can't carry one in and out if you're on alone and you've got five other children. I can't let four of them go out while I'm getting the other one ready to carry up or if one of the

normal kids feel and got hurt, I couldn't bring that one in and tend it and leave a physically disabled one outside.

Another provider tried to care for a child with severe behavioral problems but had to give up.

I had one child and I had to ask the mother to find another day care provider because there was something medically wrong with her actions. I feel bad for her. If she was good, she was just like everybody else. When she was terrible, she swung at me, she was hitting, she backhanded her sister in the face, she would aggravate all the kids. It was just total chaos.

Two providers reported caring for the same severely disabled child with cerebral palsy. She was blind and paralyzed but attended public school half days. Both providers tried their best to nurture the child.

I would feed her, and change her and talk to her and hold her. I almost always had music going for her.

The second provider who had cared for this same child also tried to include her in play activities.

I thought it was real important that kids nowadays know that they're human beings too and they still need a lot of love and attention. It was really neat because my girls would sit down and play Barbie dolls with her and talk to her because she could hear.

However, the provider could not do the things her daughters wanted to do and also care for the child.

My daughter would come home from school and want to ride on the four-wheeler. So she would get really upset with me so I talked to her mother and said, "I really think my kids should come first." She understood that and found someone else that came into her house and that made it better for her. If you didn't have any other children that were active and wanted to be doing things, you could do that and, really, that would be find.

Another provider cared for a child with spina bifida for a short time until the father was injured on the job and stayed home to care for him. The provider concluded from this experience:

I'm not specialized to care for somebody that's physically handicapped or mentally disturbed because I don't have the facilities.

One of the most difficult situations things for child care providers is discussing the problems they observe with the parents. One provider said she was convinced one of the day care children had a serious speech problem but was afraid that the parents would "feel offended" if she brought it up with them. Another provider had to give up a five-year old child who she knew was in

counseling because he was so disruptive and his mother would not talk with her about it.

He had crying fits. I had to tell his mother that I was getting done. I didn't know how to deal with him. It just caused too much upset for the other children. His mother never told me why he was seeing a psychiatrist. I'd try to discuss it with her. "John got real upset, I don't know why he just started crying." "He's like that at home, too," she said...It got to the point where he and my son were slugging it out and I didn't want that, so I just told his mother I just couldn't do it.

Typically providers have no one to turn to for advice when they encounter problems with children. One provider talked about a child who was very much slower at doing projects than the other children. She mentioned it to his parents who said he had had his hearing tested and it was fine. They told her that he was just ignoring her. She speculated on whether she could have asked the licensing worker for help during her annual inspection:

I guess I could have asked [the licensing worker]. When they visit you, it isn't really a quality visit. They're coming and it's right in the middle of your day usually and you know that they're coming, so you want to try to keep things as calm as possible, because usually when an outsider comes in, out of the ordinary in their day and it's excitement for them, and I guess to be able to sit down and really talk to somebody like that when they come in, it's hard to get a quality visit like that. I guess if I had thought about it, written something like that down, and then could have asked her, but I never thought of asking her.

The Danger of Raised Expectations

It is evident from the above descriptions that support services are limited in rural Dixfield. It was also clear that without a stronger provider support network, the services that are available can be counterproductive. providers who took the most advantage of existing services are no longer doing child care. One woman took the six week child care training program sponsored by Community Concepts. The other attended an annual conference of the Maine Family Day Care Association. This exposure to the concept of child care as a profession had the intended effect. Each was empowered by the experience and resolved to change the way she did child care. The first decided to use written contracts and the second, when she heard about what other child care providers were charging, decided to raise her rates. Both experienced negative reactions from parents to the changes. Their concept of child care had been changed by their training experiences but they returned to a community that did not share their new perspectives. Apparently, their training had not included help in working with their parents to make the transition. The woman who decided to use contracts was unable to enforce them.

When I went to the classes, they gave out different things, like contracts, and they said, "Don't be afraid to tell people [how you run your business]," they said. So I wrote my own contract. The

parents didn't like it, but they signed it. [One parent said], "I don't know why there has to be all this paperwork and I don't know why the State has to stick their nose in."..I was really scared giving them contracts, I thought, "They're not going to like it," so I did the simplest contract I could do.

She included an overtime charge in her contracts but wasn't able to enforce it with a parent who was chronically late picking up her child:

I got to the point where I told her, "I'm going to start charging you overtime, if you can't call me when you're going to be late." But I never got it in a check and I didn't press it.

It should be noted that she did not stop doing child care because of this resistance; in addition to her own two children, she gained three stepchildren through a second marriage and could no longer manage day care children on her own.

In the second case, there was a direct connection between what the provider had learned at the conference and her decision to stop doing child care.

When I came back from that I had all kinds of ideas and was real excited...A lot of the ladies [at the conference] lived in cities, and they were talking about how they didn't take certain children because they interviewed the parents, and if the children were spanked at home, they didn't take them. It depended on the interview with the parent whether they took the children or not...And the prices they got. There was a lady who said she got \$75 a week for the first child and she did not give a break if there was more than one child from the same family.

I don't think we could do it here (be as selective in choosing families). I don't think there's enough children to be able to do that with...You could never do that here (charge urban rates). You'd never find enough kids to make it work.

As the result of the conference, she attempted to raise her rates. She charged \$55 a week for two children and wanted to raise it to \$65. A couple of the mothers refused to pay the increase. Because of this negative reaction, she decided to stop doing child car altogether. The parents then said they would accept the increase but by then it was too late.

This former provider went on to speculate about the kind of training and support family day care providers need to accomplish the things their jobs require of them:

I always felt like I wanted or needed more training. If anybody could get more training or schooling, they might think along the lines [of asking the licensing worker about problems she might be having]. But being a day care provider, you'd have to do so much. People don't realize. You've got to be a social worker, you've got to be a mother, you've got to be the cook and the cleaner and the

teacher and all those things. But if a person could get more education, they'd be able to balance it all more. A conference once or twice a year isn't enough, but to be able to go to school and do [child care] at the same time would be crazy.

She regrets not doing child care any longer and suggested what would have made a difference for her:

I think even the most knowledgeable people are going to feel [inadequate at times]. I think a little bit of support, outside support, will help you not to feel that, or let you know that it's normal to feel that way...I know in South Paris they were going to have a support type group one night a month. It was like after your [day care] kids leave at 5:30 and you've got to be there by 6:30 or 7:00 you'd be stretching yourself. But having somebody come over, that might work. Or even if they set somebody up to go around and visit these homes once every other week, or to be with you for an afternoon.

What this experienced and thoughtful former provider envisions as being the ideal form of child care support is far from what existing programs are able to offer.

CHAPTER ELEVEN

CONCLUSIONS AND RECOMMENDATIONS

The worst fears of child care advocates were not substantiated in this study. While three-fourths of the child care in rural western Maine is unregulated, Dixfield area child care was more than custodial. It ranged from free play to more organized group activities. The great majority of providers cared about children and were committed to their work. Parents also were concerned about the care their children were receiving. They looked for providers who shared their values and who would give their children attention and affection. At the same time, serious problems were evident: child care was hard to find; an alarming proportion of existing providers either had decided to stop working or were seriously thinking about it; and many parents earned too little money or worked too irregularly to pay providers a decent and stable wage.

Two major findings emerge from this study of child care in rural western Maine. The first is the value families place on knowing and feeling comfortable with the child care provider. As one working mother put it, "Relatives would be nice but neighbors are almost as good." The second is the complexity of child care arrangements. In the same way that the "traditional" nuclear family consisting of a working father and an at-home mother only represents a small fraction of American families, the mother employed 8:00 to 5:00, five days a week year round, using full-time, full-year child care from one provider was the exception in this study.

The provider who intentionally planned to do child care and proceeded to develop it as a business was also the exception. The turnover in providers who left child care because of low and irregular earnings as well as other reasons placed a burden on working parents. Consequently, conventional solutions -- professionalizing providers, instituting resource and referral services, developing employer-supported programs -- are unlikely to solve the problems of child care supply and demand in this rural area.

This chapter will explore both the strong points and weaknesses the study revealed about child care in rural western Maine. It will conclude with recommendations on how to strengthen the existing supply of child care by respecting the values and preferences of rural residents -- the families in need of child care and the women who provide the care.

Positive Findings

A consistent theme running throughout the parent and provider interviews and in the responses to the telephone survey is the extent to which rural families rely on social networks. This network is made up of immediate and extended family members, friends, neighbors and even employers. A majority of fathers shared responsibility for child care. Often grandmothers, aunts and other relatives either provided primary or backup child care. Extended families

helped out in other emergencies and, frequently, provided the land on which young couples could put a mobile home and eventually build a house.

Most of these families have lived in the area all of their lives or have returned to raise their families. They know the other members of their communities and rely on them to provide child care. The relationship between parents and providers who did not know each other before beginning child care quickly moved from the economic to the social. The tensions often associated with child care and work were mitigated by sympathetic work place supervisors.

One of the most encouraging findings is that children are not being warehoused in unregulated homes. On average, regulated homes had more children than unregulated homes. Providers were well aware of the number of children they could handle comfortably and refused to take more children even when they were pressured by parents. For the most part, parents and providers communicated daily about the children's condition and progress. This communication was eased by social relationships. Several parents reported that they regularly chatted with their providers. Parents and providers would often socialize outside of the child care setting as well.

Another positive finding is that while regulation is not highly valued by parents (because in most cases they knew and trusted their providers), the women who were regulated did not find it a difficult or intrusive process. What is equally encouraging is that most non-relative informal providers were not opposed to becoming regulated. Similarly, while few regulated providers participated in the Child Care Food Program or child care training, those that did were enthusiastic about their experiences. It was also apparent that providers developed informal support networks either with providers they had used in the past when they were working outside the home or with friends or relatives who were also providing child care.

Despite the number of providers who had stopped or were thinking of doing so, half who were currently providing care were planning to continue for another three to five years. The two "natural mothers" had no plans to stop and five women had thought about expanding their child care activities. In designing a child care support system, it is imperative to understand the variety of factors that motivates women to do child care and to respond with a choice of services to meet their individual needs. For example, the assumption that family day care providers feel isolated and shut off from adult contact was, in some instances, false. These women are in child care precisely because they prefer working with children.

A consistent message is that families who had some choice over their work and child care decisions were far more able to balance the demands of work and family than were families with less control. Families were better able to manage when mothers could afford to work part time, when fathers were willing and able to assume greater responsibility for child care, when work schedules were flexible, and when supervisors and child care providers were accommodating.

Control was equally important to child care providers. Women who were in enough demand so that they could choose their clients as opposed to taking any

family who applied; women who could limit the number of children and be selective with respect to age and amount of care; women who were able to ask families to leave when they were not working out; and women who had greater control over their hours were more satisfied with their work than women who did not believe they had these choices.

An inevitable part of family day care is that some of these preferences conflict. Families want their providers to have flexible hours; providers need families to pick up their children according to schedule. It is most convenient for families to use one provider for all their children -- even when they include an infant, a preschooler and a school-age child. Providers, however, indicated a preference for homogeneous age groupings.

And finally, neither the amount of provider education nor state regulation were associated with more enriched child care programs or more satisfied parents.

Negative Findings

Families and child care providers are trapped in the economy of rural western Maine. Area jobs are hard to find and are continuing to disappear. Many of the jobs that are available are low paying and often irregular. The higher paying mill jobs (shift and shutdown work) are scheduled for the convenience of the corporate owners not working families or child care providers. Lack of formal education and access to job training keeps parents in low-paying, dead-end jobs.

These factors translate into highly unstable businesses for family day care providers. Knowing that families are hard pressed, they charge half the fees of their urban peers. Even so, parents earning low wages, laid off from work or at home because of work-related injuries are often forced to withdraw their children from care. A surprising result from the four-county telephone survey was that only 39 percent of working parents use full-time care. In the Dixfield area interviews, parents frequently relied on family members to provide part of the care. Subsidized care is practically nonexistent. There is a downside to the social relationship between parents and providers. Providers may have difficulty asking friends to pay them what they are worth. For all of these reasons, it is difficult for providers to earn a decent income. In the Dixfield area, women caring for five or more children were grossing less than the minimum wage.

The economics of family day care are coupled with other problems facing providers. Their days are long and the work demanding; they average 11-hour days without a break; they are tied down at home; some have difficulty communicating with parents, dealing with discipline and handling conflict.

As a consequence child care in this rural area is a scarce commodity. Seven out of ten working parents in the telephone survey reported that suitable, affordable child care was very hard to find. Dixfield area parents and providers were equally unanimous in their assessment of the lack of care. Most families in this rural community found child care through their social networks. Families new to the area who had yet to develop such networks had particular difficulty finding care.

The picture of regulation is mixed. Most parents do not see enough advantages to put pressure on providers to become regulated. At the same time, the support services available to regulated providers are too limited to offer an incentive to providers.

Yet if rural low-income families are to benefit from new federal child care subsidies, their providers will have to operate legally. These subsidies are available to AFDC recipients participating in the JOBS Program and to all former AFDC recipients for the first year they are employed. New subsidies are also available to low-income working families who without child care assistance would be "at risk of becoming eligible for" AFDC and to low-income families who are be eligible for funding through the Child Care and Development Block Grant.

With the exception of the Block Grant, each of these major federal initiatives requires the state to contribute matching funds. With the state in recession, it is unclear how much of an impact these new sources of child car subsidies will have on families in Maine. Whatever their scale, it is imperative that rural low-income families have access to them.

Serious regulatory issues surfaced in the study and must be addressed if more rural providers are to benefit from the federal child care funding steams:

- cost of meeting licensing requirements
- misconceptions parents and providers have about licensing
- confusion over the differences between licensing and registration
- difference in the way licensing and registration define a permissible adult/child ratio

For the most part, existing child care support services are available only to regulated providers. The exception is child care training which is open to any provider and is used to encourage providers to become regulated. Yet the value of support services in enticing providers to become regulated is limited for several reasons. The services themselves are limited in scope and accessibility and, often, providers did not know or had misconceptions about them. Training programs were conducted in communities an hour's distance from Dixfield. The Child Care Food Program reaches only 50 family day care providers in all of Oxford County. A significant proportion of regulated providers did not find the Food Program useful and/or did not understand its benefits. Providers who had cared for disabled children did not know of the preschool screening program.

The following recommendations emerge from these findings. If implemented, they could reduce provider turnover, bring more providers into the regulated system, and improve the quality of care for Maine's rural children.

^{1 &}quot;New Child Care Block Grant and IV-A Funds," Family Matters, A Quarterly Report on Welfare Initiatives, January, 1991, Volume 3, No. 1, Center for Law and Social Policy, Washington, D.C., p. 13.

Recommendations

I. Create a comprehensive family day care support network.

This study has demonstrated the strengths of the existing providers in rural western Maine. Given these strengths, the supply of child care could be increased and provider turnover reduced by strengthening the existing child care support network. However, for providers to be receptive to support services, methods of delivery must be tailored to provider needs. The following steps should be taken to achieve this family day care support network:

A. Convene a roundtable of child care advocates and providers.

Coastal Enterprises, Inc. should convene a roundtable of child care advocates, service deliverers and providers to review the study findings and recommend service delivery models tailored to the needs of local providers and communities.

B. Conduct a family day care support service demonstration.

The Maine Department of Human Services should fund demonstration projects to test the effectiveness of delivering support services to family day care providers.

For example, in-home services could be delivered by an experienced family day care provider recruited from the community. She could provide support in areas requested by the provider. The study suggests that such subjects as child discipline, child development, communicating with parents, and assertiveness would be likely candidates. The peer helper could also provide information on other resources in the area. Her car could become a toy, book, and video lending library. Both children's and provider training videos could be available. The peer helper could also provide respite care so the family day care provider could take time off periodically. A final responsibility of the peer helper could be to become highly visible in the community and be available to educate both parents and providers about such subjects as the value of state regulation and their joint roles and responsibilities in raising children.

B. Strengthen the existing family day care advocacy group.

The Maine Department of Human Services should fund a full-time director for the Maine Family Day Care Association (MFDCA). Presently the MFDCA is made up of dedicated and professional family day care providers but its effectiveness is limited by its lack of staff. With proper staffing, it could become a major player representing family day care in state-level child care coalitions and could advocate more powerfully for increased financial support for family day care from public and private sources.

C. Support the establishment of regional child care coordinating councils.

Currently, the Department of Human Services has a Child Care Advisory Committee that reviews and comments on proposed state child care policy. To better reflect the diversity of Maine's communities, the Department should

decentralize this critical review and recommendation function. This step is especially important in integrating and coordinating the new sources of federal At a minimum, these regional groups should include child care funding. representatives of parents, providers, public schools, Title XX and Food Program delivers, Resource Development Centers, Department of Human Services, Child Development Services, Child Abuse and Neglect Councils, the Cooperative Extension Services, and employers. Regional groups should be charged with assessing existing child care services and developing strategies for improving service coordination. Such issues as school transportation and scheduling of half-day kindergarten should be addressed. Employers who hire large numbers of women should be encouraged to offer child care benefits to their employees. Social and health service agencies should be encouraged to offer their services to family child care providers.

II. Provide child care subsidies for all low-income working families.

The only way for family day care providers to stop subsidizing care by working at below minimum wage is for all low-income working parents to receive child care subsidies. Interviews with providers suggest that they set their rates based on their perceptions of what their least well off families can afford to pay. If subsidies were available to low-income families, providers could increase their rates. Attendance of low-income children in family day care programs would stabilize. It is possible that middle and upper-income families would be willing to pay more if the community base rate were raised.

While this is an ambitious goal, it may not be that far out of reach. The value of pre-school for low-income children is now recognized by the business community as well as the human service community². The recent expansion of the Head Start program was achieved with bipartisan support of the Bush administration and Congress. Funding will be available for all eligible four-year olds in the next seven years. The new sources of child care funding -- the Child Care and Development Block Grant and funding for families at risk of receiving AFDC -- are steps toward universal subsidies for low-income working families.

As a first step, the Department of Human Services should conduct a study to determined the size of the working parent population that is eligible for child care subsidies.

A second step would be for the Department to fund Resource Development Centers to be sources of information about eligibility for existing subsidy programs. Providing a single point of entry for low-income parents would go a long way toward maximizing utilization of existing sources of child care support.

² See the report of the Committee for Economic Development, Children in Need: Investment Strategies for the Educationally Disadvantaged, Research and Policy Committee, New York, New York, 1987.

III. Provide financial and technical assistance to upgrade family day care programs.

Through the Child Care Development Project, Coastal Enterprises Inc. has demonstrated that family day care providers are capable of operating their programs as businesses. Of the 22 family day care businesses CEI has financed, 19 (86 percent), are financially sound. Only one loan has been written off and two are in default. In order to make financing available to more family day care providers, CEI should train local organizations to provide the services that have proved successful in its Child Care Development Project. These organizations could include the Resource Development Centers, Small Business Development Centers and local banks.

Frequently only modest investments are needed to upgrade homes to meet licensing requirements. However, many low-income families cannot afford to make these improvements on their own. The Department of Human Services should make small grants available to these families for this purpose.

Not all providers placed the same value on maximizing their income from family day care. However, even those providers for whom income was important knew very little about the basics of business management or the tax advantages of running a home-based business. This lack of knowledge was not limited to women who were operating under the table but included regulated providers. One way to make family day care more profitable is to make such information accessible to providers. The Small Business Administration supports a network of Small Business Development Centers (SBDCs) throughout the state. CEI should train SBDC business counselors to work with interested family child care providers.

IV. Provide easily accessible basic education about child care regulation and child care issues to parents, existing providers and potential providers.

The following low-cost steps could be taken to provide information about child care in rural communities.

A. Enlist local providers as resource and referral sources.

Department of Human Services licensing workers and regional child care services staff should identify the most visible licensed family day care provider in each community and ask her to be a source of local child care information. She would need to be willing to maintain a supply of materials on licensing and registration and to answer questions about her child care experience. The study suggests that she could also function as a referral source to parents looking for child care.

B. Use local newspapers to educate parents and providers about child care issues and recruit providers.

Every rural community in Maine receives either a daily or weekly newspaper. Regional Resource Development Centers could be responsible for contributing materials for periodic columns on child care to demystify and explain the licensing process and the Child Care Food Program, and to cover such topics as

discipline, child development, provider-parent communication, assertiveness, child abuse and neglect, children with special needs, etc. CEI's recently published Family Child Care Handbook could be used as a resource for these columns. Equally important, the column could be used to educate parents about how they can help their providers better care for their children. It could also be a vehicle for disseminating information about the new child care subsidy programs. The names, addresses and phone numbers of the Department of Human Services Licensing Unit, the regional Resource Development Center, the regional Child Care Food Program sponsor and the local family day care provider described above would be included in the newspaper column.

V. Resolve the discrepancies between licensing and registration requirements.

It may not be politically possible or desirable to eliminate registration as a family day care option in Maine. While registration is a minimal regulatory process, it does bring providers into the formal sector whom otherwise might continue to operate underground. However, state requirements should not allow registered operators to make more money than licensed operators. A glaring discrepancy -- and the one that attracted Dixfield area providers to registration rather than to licensing -- is that registered providers do not have to count their own preschool children in determining the number of children they may legally care for; licensed providers must include their own children. This discrepancy allows registered providers to care for more children and, therefore, earn more money.

APPENDIX A

FOUR-COUNTY TELEPHONE SURVEY METHODOLOGY

FOUR-COUNTY TELEPHONE SURVEY QUESTIONS

APPENDIX A

TELEPHONE SURVEY METHODOLOGY

The survey was conducted as part of Mainewatch Institute's Survey of Western Mountain Region Residents. 784 randomly selected adults living in randomly selected telephone-serviced households in Oxford, Franklin, Somerset and Piscataquis Counties were interviewed. The CEI Child Care Survey was a supplemental interview administered to respondents representative of households which included children 12 years of age or younger. The survey was administered by telephone and required 10 to 12 minutes to complete.

The survey was conducted in two waves. The first lasted between January 21 to June 6, 1990 and the second between July 6 and September 11, 1990. This prolonged period made it possible to interview respondents in even the most difficult-to-reach households.

Using a systematic randomization procedure, telephone numbers were assigned to blocks of telephone numbers known to be in use. In this way, households with unlisted telephone numbers could be included in the sample. Respondents were selected within each of the qualifying households on the basis of knowledge of, and involvement in, child care decisions being made within the household. With an N of 224, the margin of error for the Child Care Survey is plus or minus 6.5 percent.

CHILD CARE SUPPLEMENTAL INTERV'

ASK ALL R's WITH CHILDREN UNDER 13 IN SEHOLD

Issues of child care are very important to us, because it can be such an important consideration for someone who is working outside of the home, or who is thinking about doing so. I'd like to ask just a few questions about your household's experiences with, or concerns about, the child care services that are available in your area.

CC1. First, are you!

- (1) the person principally responsible for----;
 making decisions about child care for
 the children in your household; CONTINUE
- (2) do you know a lot about those decisions, --- [
- (3) are you rarely involved in your household's---- ASK FOR child care decisions, PRIMARY CHILD CARE
- (4) or, does another member of your household | DECISION-make those decisions?----- MAKER

REINTRODUCE IF DECISION-MAKER NOT ORIGINAL RA

CC2. DO YOU (ise chilu car	re services, or a babysincer.	
	(1) (2) (3) (4)	several times a week; weekly; several times a month, but less than once a month;	TO
	(6)	or, never?>SKIP TO	CC2b.
CC2a1 a	How old is child(ren)?	the person who usually takes care	of yourYRS
CC2a2.	How long hav	ve you used this child care provi	der?YRSMOS
CC2a3.	Is that (ch	ild care provider/babysitter):	
	(1) (2)	a relative who lives in your hou a nonrelative who takes care of in your home;	the child(ren) TO
	(3)	a relative who does not live in household;	your
	(4)		
	(5)		sitter en of
CC	2a3a How fa	ar do you have to travel to bring	your child(ren)
		•	MILES
CC2a4.	On average, babysitter)	how much do you pay per hour for you use most often? \$_	the (child care/
CC2a5.		cal week, how many hours do you l ld care provider/babysitter)?	eave your child(ren)
CC2b. (ASK	ALL.) Would	you say that suitable and afford	able child care is:
	(1) (2) (3) (4) (5)	available if you look for it; available, but very difficult to	find;

CC3. If suitable, and affordable, child care were more would you use it (more often)?	ereadily	available:
(1) YES ASK (CC3a.	
(2) NO IF NEVER USES, AS	SK CC3b; E	ELSE SKIP TO CC4.
CC3a. How many (more) hours a week do you think		use it?
CC3b. Why is that? (PROBE THREE ANDF THANK AND		
ССЗЪ1 ССЗЪ2		
CC4. For what purposes (do/would) you leave your child care provider/babysitter? (PROBE THREE.)	(ren) wit	
TO GO TO WORK	1	2
TO RUN ERRANDS/GO TO APPOINTMENTS	1	2
GO OUT OR AWAY	1	2
GO TO SCHOOL OR TRAINING PROGRAM	1	2
PROVIDE CHILD(REN) WITH LEARNING EXPER.	1	2
PROVIDE CHILD(REN) WITH SOCIAL EXPER.	1	2
OTHER1 SPECIFY:		
OTHER2 SPECIFY:		
CC4a. (ASK IF R USES FOR WORK OR SCHOOL) How far a to work or school after leaving your child baysitter?	do you hav	ve to travel provider/
CC4b. What is the main reason you use a child care prov		MILES
IF R DOES OR WOULD USE CHILD CARE 20+ HRS (<6 YR OLD; FOR WORK, TRAINING OR EDUCATION, CONTINUE; OTHERWISE EXIT.), 10+ (6- , SKIP TO	-12 yr OLD), OR CC10 THANK AND
CC5. How many children does the child care provider/bat often generally care for at one time?	oysitter t	that you use most

CC6.	How many adults children?	s/staff people are usually available to care for that many STAFF
CC7.	school, or a to	as any member of your household, missed any days from work, raining program, in the last 12 months, because suitable angements could not be made or fell through?
	(1)	YES DAYS DAYS
	(2)	NO
	(3)	DON'T KNOW (INSIST)
CC8.	work overtime, last 12 months	as any member of your household, lost an opportunity to or to attend an educational or training program, in the because suitable and affordable child care was not he weekends or in the evening?
	(1)	YES
	(2)	NO
	(3)	DON'T KNOW (INSIST.)
CC9.		had to leave your child(ren) in a child care situation with not entirely comfortable?
	(1)	YES
	(2)	NO SKIP
	(3)	DON'T KNOW CC10.
	CC9a. Would yo	u say that you have to do that:
	(1)	very often;
	(2)	sometimes;
	(3)	occasionally;
	(4)	or, rarely?

${\tt CC10.Is}$	the (child	care prov	ider/babys	itter) that	you use	most	often	registered
or	licensed w	ith the sta	ate of Mai	ne?				

- (1) YES
- (2) NO
- (3) DON'T KNOW

CC11.*Would you say that (b-j) is very important, somewaht important, not very important, or not at all important when choosing someone to care for your child(ren)?

b _i .	*	the cost	V 1	S 2	NV 3	Na A 4
c _∞	*	the location	1	2	3	4
d:	*	they have flexible and evening or weekend hours	1	2⁄	3	4
e,	*	they share your ideas about discipline	1	2	3	4
f _∞	*	they provide nutricious meals and snacks for the children	1	2	3	4
g.	*	they have a set map time for the children	1	2	3	4
h.	*	they have a structured play and learning program for the children	1	2	3	4
i.	*	they have a religious affiliation or perspective	1	2	3	4
j.	*	the be registered or licensed with the State	1	2	3	4

CC11a(1).Did you meet the (child care provider/babysitter):

- (1) at the time you first dropped the child(ren) off;
- (2) at the time you were arranging for child care;
- (3) less than a year before choosing them as your (child care provider/babysitter);
- (4) more than a year before choosing them;
- (5) have you known the (child care provider/babysitter) for many years;
- (6) or, have you known them all your life?

CC11a(2). Was the length of time you had been acquainted with the (child care provider/babysitter) of great concern, some concern, little concern, or no concern in your decision to choose him or her?

- (1) GREAT
- (2) SOME
- (3) LITTLE
- (4) NONE

FO.	Finally, a few que	stions about you and your household.	
F1.	Altogether, how man	ny years have you lived in Maine?	YEARS
F2.	Do you ever expect	to move from Maine?	
	(1)	YES	
	(2)	NO	
	(3)	NOT SURE	
F3.	Do you own your hom	e, or do you pay rent to someone else?	
	(1)	OWN	
	(2)	RENT	
	(5)	OTHER:	
F4.	What is your curren	t marital status?	
	(1)	Married?	
	(2)	Divorced or separated?	
	(3)	Single and never married?	
	(4)	Widowed?	
	(5)	Or, what?	
F5.	In general would yo	u describe your health as being:	
	(1)	excellent;	
	(2)	good;	
	(3)	fair;	
	(4)	or, poor?	
F6.	Do you have a valid	drivers license?	
	(1)	YES	
	(2)	NO	

F7.	When you need	to go	somewhere, do you:
		(1)	always;
		(2)	sometimes;
		(3)	rarely;
		(4)	or, never have a (vehicle/ride) available to you?
F8.	What is the hig	ghest	grade, or year, in school that you completed?
F9.	In what year w	ere yo	ou born? IF >30 ASK F9a.
			\$7.50 an hour, in the manufacturing of finished wood available in your area, would you be:
		(1)	very interested;
		(2)	somewhat interested;
		(3)	not very interested;
		(4)	or not at all interested in them?
		(8)	DON'T KNOW (INSIST.)
F10.	How many child	ren ut	nder 18 live in your household? CHILDREN
	F10a. How many	of th	nose children are under 6 years old? 0-5YRS
	F10b. How many	are 6	3 to 12 years old? 6-12YRS
	F10c. So there	are _	13 to 17 year olds living in your household?
F11.	That means that	t in e	all there are people in your household?
F12.	In what county	do yo	ou live?
F13.	Would you say	that y	ou live:
	ři.	(1)	in a city;
		(2)	on the outskirts of a city;
		(3)	in a town;
		(4)	on the outskirts of a town;
		(5)	in a rural community;
		(6)	or, do you live way of the beaten track?

	(2) NO>	SKIP TO F15		
F14a; *Is that	insurance:			
(1)	* MEDICARE?	1-YES	2-NO	
(2)	* MEDICAID?	1-YES	2-NO	
(3)	* EMPLOYER PROVIDED?	1-ALL	2-PARTIAL	3-NO
(4)	* SELF PROVIDED?	1-YES	2-NO	
F15. Was your total \$25,000?	household income, in 1	989, before	taxes, greater	than
>IF NO: Was	s it greater than (150%	POVERTY LEV	/EL)?	
): Was it greater than ES: Was it greater than		/EL)?	
	as it greater than \$50,	000?		
 >IF NO): Was it greater than	\$35,000?		
	(1) POVERTY LEVEL (2) 150% POVERTY LEVE (3) \$20,000 OR LESS (4) \$20,001 TO \$25,00 (5) \$25,001 TO \$35,00 (6) \$35,001 TO \$50,00 (7) MORE THAN \$50,000 (9) DK/REFUSED	0 0 0		
F16. (Do you/Does ar to a nonrelated	ny memeber of your hous I child?	ehold regula	rly provide ch	ild care
	(1) YES>REQUE	ST PERMISSIO	ON FOR LINDA TO	CALL.
	(2) NO			
IF (CHILDREN UNDER 12 GO TO	CHILD CARE	SUPPLEMENT	
GENDER: (1) MALE	(2) FEMALE			

F14. Are you currently covered by any form of health insurance?

(1) YES-----ASK F14a.

APPENDIX B

DIXFIELD AREA FACE-TO-FACE INTERVIEW METHODOLOGY

PARENT INTERVIEW QUESTIONS

PROVIDER INTERVIEW QUESTIONS

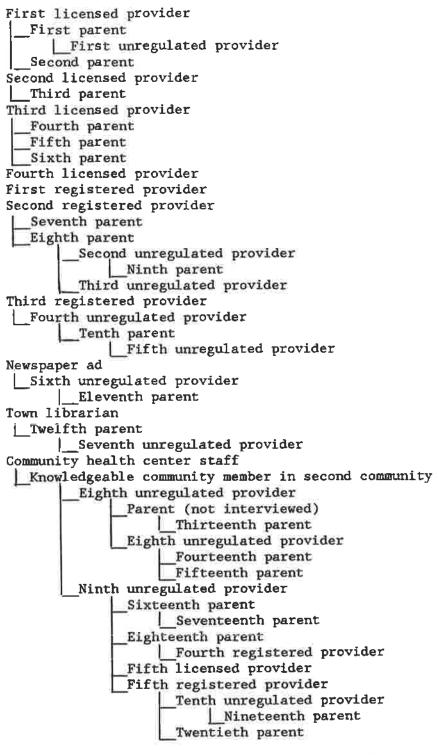
DIXFIELD AREA FACE-TO-FACE INTERVIEW METHODOLOGY

To select a representative community in the Western Mountains Region in which to conduct face-to-face interviews, the most current demographic, economic and social data on the 41 towns in the region that contained at least one regulated child care facility were collected and analyzed. The following variables were included:

total population number of children under thirteen number of children under six percent women in labor force with children under six percent population change average household size per capita income percent per capita income change unemployment rate number of families receiving AFDC number of households receiving public assistance (AFDC and/or Food Stamps) percent of adults completing high school number of state regulated child care facilities number of state regulated child care slots number of children per child care slot

A correlation matrix was generated to determine the extent to which the variables were measuring the same phenomena. From this analysis, five independent variables were selected: per capita income, percent households receiving public assistance, percent population change, percent high school completion, and number of children per child care slot. Standard scores were computed for these items. Differences in scores between the region as a whole and each town were generated for each item as well as an average difference across the five items. Dixfield in northern Oxford County emerged as the town that most resembled the region on these five variables.

Telephone calls were made to the seven licensed and registered providers who lived in Dixfield to arrange an interview. All seven agreed to be interviewed. At the end of each interview, the provider was asked for names of parents and other providers who might be willing to participate in the study. These people were contacted and interviews were scheduled. The area newspaper was read for child care advertisements. Knowledgeable community members, including the town librarian and staff at the health center, were also contacted. This snowball sampling technique produced 21 providers and 20 parents in the following way:



All but four of the 45 the providers/parents who were contacted were willing to be interviewed. Two provider interviews could not be conducted because in one case the provider was not at home at the scheduled time and in the second case the provider was working at another job and could not arrange an interview. Two parents were also not interviewed, the first because her

of government programs like subsidized child care and did not want her to participate; and the second, who did not have a phone, was approached by another parent rather than the interviewer, and refused.

All the interviewees were cooperative. All but one agreed to have the interview tape recorded. The semi-structured interviews lasted between one-half and one and one-half hours. All the interviews took place in the homes of the interviewees with the exception of one which was conducted at the nursing home.

CEI Rural Child Care Study

PARENT INTERVIEW QUESTIONS

1. Let's begin with where you live and how long have you lived there.

lived in area all of life?

2. Tell me something about your family: how many adults, how many children, live with you?

ages
both legal parents
adults working
adults' jobs
dependent adults

3. Now I'm interested in learning about your child care arrangements: the number of children being cared for and your daily schedule.

logistics: travel time to provider(s), travel time to work transportation a problem

4. How about your provider, how did you find her, how long have you been using her.

known previously, in what capacity provider choice if yes, why this one able to visit before making decision, questions asked provider age number of children in care helper, one or several

5. Have you used other providers? Tell me something about them.

length of use reason for stopping

- 6. Often parents have things that are important to them about how their children are cared for. What are some of the things that are important to you?
- 7. Do you and your provider pretty much agree on these things?
 Disagreements resolved

- 8. What sorts of things do you and your provider talk about?
- 9. Do you know if your provider is licensed or registered?

importance
if not, preference for licensing

- 10. Have you ever had to leave your child in a situation with which you were not entirely comfortable?
- 11. How much are you paying for care each week?

subsidies -- state, employer child support do if contribution not available other expenses -- food, diapers pay only when child is present or by week how often exceed regular hours pay for extra hours

12. I would like to know the amount of your family income. This card lists different income amounts. In which category is your family income?

Importance of interviewee's income to family Health insurance

13. Are there times when you have to make other arrangements?

cause solution lose a day's pay if stay a home with sick child husband stays home

14. Now I'm interested in your job, tell me where you work, what you do and your work schedule

hours aweek regular fulltime able to work as much as you would like?

15. How has using child care affected your work?

missed work
arrived late
quit a job or been fired
ever thought of quitting
supervisor understanding
bring sick child to work

- 16. Major advantage and disadvantage in current arrangement?
- 17. If cost or location were not a concern, what would be the best child care arrangement for you?
- 18. Do you have suggestions about what would make working and caring for your family easier?
- 19. (If work is an economic necessity) If you had the opportunity not to work would you prefer to stay at home or would you continue to work?
- 20. Can you tell me how old you are?
- 21. Is there anything else you would like to tell me?

CEI Rural Child Care Study

PROVIDER INTERVIEW QUESTIONS

1. Let's begin with how long you have lived in _____.
lived in area all of life?

2. Tell me how you got started doing child care.

length of time same location particular experience, training prior to starting longest time cared for same child future plans

3. I'm interested in other jobs you have held.

currently holding other job other jobs available in area

4. Now lets talk about the children you are currently caring for.

number
own children
ages
full-time/part-time
siblings
physical/mental problems
typical number
number about right
if more desired, what kind of help needed
waiting list

- 5. I'm also interested in what a typical day is like for you, when you begin, when you end, what you do with the children during the day.
- 6. Different providers have different arrangements with parents. How about you, do you have:

flexible hours caring for sick children/definition parents sign contracts vacation, holidays

7. For some child care providers, it is important that families share their beliefs about how to care for children. Are there things you look for in a family when you are deciding whether to care for their children?

parents visit before bringing children

- 8. What are the most important things you do for children?
- 9. Tell me the kinds of things you are likely to talk with parents about?

ever had kid who seemed to be developing slowly ever worried about child abuse?

10. I'm also interested in how much you are able to earn through child care. How much do you charge?

charge for each day/hour or by week
weekly earnings
only source of income
if second, how important
(if helper) helper wages
parents pay on time
state subsidies
emplower subsidies
total family income
health insurance
business management

11. What is the best thing about doing child care?

working for oneself

12. What is the hardest thing?

get sick
isolation --- limited contact with adults

13. I'm interested in your contact with other people either doing child care or helping people who do child care.

anyone in your area you talk to licensed/registered?
why became licensed/registered if not, ever thought experience with licensing worker benefits/problems
Title XX experience
Food Program experience
RDC experience
WEET/ASPIRE/ experience
Voucher experience
workshops
provider groups

- 14. What would make caring for children in your home easier or better for you?
- 15. Age
- 16. Is there anything else you would like to tell me?

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