MAKING WORK PAY
in the
CHILD CARE INDUSTRY

PROMISING PRACTICES for
IMPROVING COMPENSATION

A Report by the
NATIONAL CENTER FOR THE EARLY CHILDHOOD WORK FORCE
MAKING WORK PAY
IN THE CHILD CARE INDUSTRY:
PROMISING PRACTICES
FOR IMPROVING COMPENSATION

by
Dan Bellm
Alice Burton
Renu Shukla
Marcy Whitebook

National Center for the Early Childhood Work Force
Washington, D.C.
The National Center for the Early Childhood Work Force

Copyright © 1997 by the National Center for the Early Childhood Work Force (NCECW). All rights reserved. No part of this book may be used or reproduced without permission.

Making Work Pay in the Child Care Industry is an expanded version of the booklet, "Investing in Child Care Jobs in Low-Income Communities" (1996), also available from NCECW. Both reports, and NCECW's nationwide survey of community initiatives to invest in child care jobs, were made possible by the generous support of the Ford Foundation.

Thanks to Jack Litzenberg of the Charles Stewart Mott Foundation for suggesting the title of this report.

Printed in the U.S.A. by Harris Lithographics, Inc.

Book design: Elaine Joe

ISBN 1-889956-11-2

The National Center for the Early Childhood Work Force (NCECW)—formerly the Child Care Employee Project—is a nonprofit research, education and advocacy organization committed to improving child care quality by upgrading the compensation, working conditions and training of child care teachers and family child care providers. We are working to create a unified and powerful voice for the child care work force, advocating for fair and decent employment for caregivers and reliable, affordable, high-quality care for families. Our landmark National Child Care Staffing Study (1996; updated 1993) clearly established the link between the quality of care that young children receive and the level of compensation that child care teachers are paid.

NCECW coordinates two major national efforts to promote leadership and career advancement for teachers and providers: the Worthy Wage Campaign, a grassroots coalition working for better-quality care for children and a better livelihood for teachers and providers, and the Early Childhood Mentoring Alliance, an information and technical assistance network for mentors and mentoring programs nationwide.

Our organization was founded in 1977 by child care teachers in the San Francisco Bay Area concerned about the low pay and status of their work. We relocated our offices to Washington, D.C., in the summer of 1994.

To become a member of NCECW—or to learn more about the Worthy Wage Campaign, the Early Childhood Mentoring Alliance, or our other publications and activities—please contact:

National Center for the Early Childhood Work Force (NCECW)
733 15th St., N.W., Suite 1037
Washington, DC 20005-2112
telephone: (202) 737-7700
fax: (202) 737-0570
email: ncecw@ncecw.org

National Center for the Early Childhood Work Force
733 15th St., N.W., Suite 1037
Washington, DC 20005-2112
telephone: (202) 737-7700
fax: (202) 737-0570
email: ncecw@ncecw.org
# Table of Contents

7 Executive Summary

13 Part One: Introduction
16 A National Survey of Program Options
18 Structural and Social Barriers to Investing in Child Care Jobs
20 Standards for Success: Guidelines for Effective Training and Employment in Child Care Jobs

21 Part Two: Promising Practices for Raising Child Care Compensation
25 Federal Initiatives
27 Initiatives to Link Training with Compensation
31 Reimbursement Rate Improvements
40 Center-Based Programs and Initiatives
45 Health Insurance

48 Part Three: Next Steps
49 System-Wide Reform
51 Linking Training and Compensation
58 Health Insurance
59 Reimbursement Rates and Quality Improvement Grants

60 Conclusion

61 References and Further Reading
The single most important determinant of child care quality, according to a growing body of research, is the presence of consistent, sensitive, well-trained and well-compensated caregivers. But high job turnover in the field, fueled by poor compensation and few opportunities for advancement, is causing the quality of services that children and parents receive to decline dangerously. Recent national studies have consistently rated the overall quality of child care in the U.S. as poor. Our nation has adopted a child care policy that relies on an unacknowledged subsidy: the contribution that child care workers (98 percent of them female, and one-third women of color) make by being paid much less than the value of their skilled and vital work.

How can states and communities invest in higher-paying child care jobs? A recent nationwide survey by the National Center for the Early Childhood Work Force (NCECW) has identified a variety of promising program options. Despite the obstacles, there is evidence that in certain circumstances—particularly in well-subsidized sectors of the field—child care is a job that can offer decent compensation, stability and a future. And there is a growing awareness among policy makers and program planners that in order to improve child care quality, child care jobs must be improved as well.

**Promising Practices for Improving Child Care Compensation**

The NCECW survey identified a number of reasons why certain child care job programs have become highly successful. Efforts to increase access to high-paying child care jobs in low-income communities are most likely to succeed when there are:

- a diversity of funding sources;
- a willingness to invest in sound training and education in child care and child development;
- a clear linkage between training and compensation;
- an established career path whereby training and education allow participants to earn credentials or degrees; and
- a strong regulatory environment, at the state and/or community level, that supports the development and maintenance of high-quality child care programs.
Making Work Pay in the Child Care Industry

Many of the initiatives described in this report came to life as a result of the federal Child Care and Development Block Grant (CCDBG), which took effect in 1990 and has recently been reconfigured as the Child Care and Development Fund (CCDF). The CCDBG represented a major advance for efforts to promote child care compensation, because for the first time, raising compensation was put on an equal footing with other efforts to increase child care quality, such as licensing, monitoring and training. While recent changes in the federal block grant system may dampen efforts to strengthen compensation in some states, the states are not explicitly restricted from spending federal funds on compensation, and programs may continue to flourish in states where advocacy for such efforts is strong.

Making Work Pay in the Child Care Industry profiles five varieties of efforts to boost child care worker compensation and program quality:

- Federal initiatives, including those undertaken by Military Child Care and Head Start, as well as the federal block grant system.
- Initiatives to link training and compensation, including mentoring programs in California, Minnesota and Wisconsin, the Child Care Careers Program in Boston; North Carolina's TEACH project; the Wisconsin Quality Improvement Grants Program; and student loan assumption programs in California and Pennsylvania.
- Reimbursement rate improvements in Massachusetts, North Carolina and other states.
- Center-based programs and initiatives, including worker unionization, a pay equity effort by a large Chicago multi-service agency, Chicago Commons; the Childspace worker cooperative in Philadelphia; the Seattle Business/Child Care Partnership; and a number of management training efforts for center directors.
- Health insurance initiatives, including a successful Rhode Island campaign to gain benefits for family child care providers, and coverage of low-wage employees through Wayne County (Michigan) Health Choice.

Barriers to Investing in Child Care Jobs

Programs seeking to develop better-paying child care jobs face a number of common barriers. Many are policy obstacles that are present in the society as a whole, and/or within the child care profession itself:

- The need for the entire U.S. child care system to be infused with major new sources of funding, both public and private, in order to truly meet the demand for quality services and decent worker wages. The present system is based heavily on parent tuition, and since many parents have a sharply limited ability to pay more, fees and wages are held at levels that do not match the actual cost of providing high-quality care.
- The persistence of a low U.S. minimum wage, which keeps child care wages depressed.
- The lack of a guaranteed national health care insurance system, which keeps health benefits out of reach for many child care workers.
- The almost complete exclusion of child care teachers and providers from positions of leadership and influence in the field.
- The lack of a national association or union for the child care work force that can amplify its voice in the political arena, mobilize its activism, and defend its interests.
- The historical resistance to consistent national program standards or regulations. In states where licensing requirements are minimal or absent, better-paying child care jobs are much harder to find, since the market tends to favor unregulated care.
- A widely varying commitment to child care quality among the states—often depending on the department of government which administers subsidized child care services.
- Insufficient state and federal payment mechanisms for subsidized child care—with reimbursement rates set at a percentage of the market rate, for example, or parent fees set at a percentage of the cost of care, rather than based on parents' ability to pay.
- Other barriers are programmatic obstacles that particular initiatives have confronted and have sometimes been unable to resolve:
- The economic realities of an undercapitalized profession. In two northeastern states, for example, child care loan funds set up by capital investment programs went largely unused because center directors and family child care providers were loath to take out loans they could not foresee being able to repay.
- Inadequate attention to helping trainees reach self-sufficiency, placing them in jobs with little regard for earning potential.
- Dependence on a single, usually public, funding source.

Next Steps

Since compensation is generally inadequate across all sectors of the child care delivery system, no single approach is likely to create a comprehensive solution. We therefore recommend that each state develop
a variety of compensation initiatives, recognizing the need to act incrementally and to build on past progress over time. These efforts should:
- encourage the retention of teachers, providers and directors who have made a commitment to their child care careers through education and training;
- promote the pursuit of and reward for professional preparation among those just entering the field;
- meet the particular characteristics of different sectors of the delivery system;
- create opportunities for local communities throughout states to participate;
- encourage private as well as public participation in solutions;
- equalize access to high-quality services among children from all economic backgrounds;
- generate data about the effectiveness of different approaches and their potential for replication or expansion;
- stimulate public awareness of the importance of child care services and jobs, and the link between qualified and adequately compensated caregivers and beneficial outcomes for children; and
- galvanize stakeholders within and beyond the child development community to address the inadequacies of current services for children.

**System-wide Reform**

To make widespread and lasting progress in raising child care compensation, the entire U.S. child care delivery system will inevitably require additional federal funding. But recognizing the need to increase and coordinate child care dollars at the state level, a number of states have taken steps toward developing new financing systems for early childhood education.

Leadership and activism by child care practitioners themselves are also essential, in order to ensure that investment in decent-paying jobs will be a high priority as child care systems are revamped.

**Recommendations**

1. States should devote concentrated attention to the refinancing of their child care systems.
2. Leadership opportunities for child care teachers and providers should be actively promoted by states, communities and the child care profession as a whole.
3. An organizational home should be created for the direct-service, caregiving child care work force.

**Linking Training and Compensation**

Limited training funds are most effectively spent when they are linked to salary enhancement, which can help reduce turnover among well-trained, experienced workers, and when they provide concrete opportunities for career mobility. Training efforts should be carefully evaluated to measure their effectiveness in upgrading and stabilizing the child care work force, and to leverage funds for efforts that show the greatest success.

**Recommendations**

1. States and communities should develop and support mentoring programs for child care teachers and providers.
2. States and communities should jointly establish apprenticeship programs for former welfare recipients who wish to pursue child care careers.
3. States should develop pilot programs to stabilize the child care work force.
4. States should establish salary guidelines to encourage and inform efforts to improve compensation for the child care work force.
5. States, and the federal government, should improve data collection on child care worker salaries, benefits and turnover.
6. States should assess retention and turnover rates among child care teachers and providers who participate in state-funded training initiatives.

**Health Insurance**

A number of states are exploring ways to make health insurance more accessible and affordable for low-income families, and the child care work force should be an integral part of such efforts.

**Recommendations**

1. States should represent and include the concerns of child care teachers and providers as new approaches to coverage for the uninsured are developed.
2. States should develop pilot projects which identify new mechanisms for providing affordable health insurance, and subsidize premiums for child care teachers and providers.
3. States should clarify the health insurance needs of family child care providers.
Reimbursement Rates and Quality Improvement Grants

Public reimbursement rates are the single greatest determinant of compensation for providers of subsidized child care services. Low rates depress a child care program's revenue sources, and in turn deplete its available resources to compensate teachers and providers.

Recommendations

1. States should establish reimbursement rates that allow subsidized child care programs to meet the true cost of providing high-quality services.

2. States should establish “quality differential” rates to reward programs for their additional efforts to improve child care jobs.

The American child care system has suffered a basic structural failure, in which caregivers' wages are almost always based directly on what parents pay for these labor-intensive services. The result is high consumer costs combined with poverty-level earnings for a workforce that is 98 percent female and one-third women of color. In effect, our nation has adopted a child care policy that relies on an unacknowledged subsidy: the contribution that child care workers make by being paid much less than the value of their skilled and vital work. Particularly in low-income communities, where child care is a major service need and a major employment option for women, the dilemmas of low compensation and inconsistent child care quality are two of the major factors that make the cycle of poverty so persistent.

While policymakers and advocates have devoted considerable attention in recent years to improving child care quality, their efforts have focused almost exclusively on the child’s environment, and hardly ever on the adult’s—despite a persuasive and growing body of research findings that the single most important determinant of child care quality is the presence of consistent, sensitive, well-trained and well-compensated caregivers. Although the pedagogical concept of “caring for the whole child” is widely recognized, many have yet to acknowledge how critical it is to care for the “whole adult” in child care settings: the caregivers who not only fulfill a certain professional role, but have a wide array of personal, family and economic needs of their own.

Because of this general disregard for the needs of the child care workforce—not only by government officials and policy makers but by advocacy organizations as well—job conditions in the profession remain woefully substandard.

- Poverty-level earnings. The average center-based child care teacher nationwide earns roughly $6.70 an hour, despite above-average

---

1. While this report focuses primarily on caregivers working within a publicly regulated system, we use the terms “child care jobs” and “child care workforce” as broadly as possible. This diverse workforce includes center-based teachers and assistants in public and private, nonprofit and for-profit, full-day and part-day programs; family child care providers, both licensed and unlicensed, who care for groups of children in their own homes; Head Start program employees; teachers and assistants in school-based pre-kindergarten programs; staff of before- and after-school care programs serving school-age children; and a wide range of unregulated caregivers, typically working in private homes.

levels of education. Roughly one-third of teachers are paid the minimum wage. Even those at the highest end of the pay scale, who are likely to have a B.A. degree and several years of experience, earn on average only $8,94 an hour. Family child care providers, who care for small groups of children in their own homes, earn even lower wages: those who are subject to licensing or other forms of regulation earn an average of $8,544 per year after expenses, and non-regulated providers earn only $5,152. Further, to earn even this modest level of income, providers generally need to maintain high enrollments, and often make costly renovations to their homes to make them safe and appropriate for group child care.

9 Unequal opportunity. Child care is a relatively easy field of employment for anyone to enter. But because of unequal access to training, education and other avenues of career advancement, poor and minority women tend to remain disproportionately in the entry-level, lowest-paid child care jobs.

9 Poor benefits. Despite workers' high exposure to illness and physical strain on the job, fewer than one-third of child care centers provide health insurance. Even fewer offer a pension plan. (In seeking access to health insurance and other benefits, family child care providers fare even worse.) Many center-based child care staff are expected to work without breaks, and often for extra hours without pay. Fewer than four percent of them have a union contract. Ironically, too, child care workers rarely receive assistance with their own child care needs, and many find it unaffordable to purchase the care that their own programs offer.

9 High turnover. More than one-third of the nation's child care work force leave their jobs each year—most often, in order to earn a better living elsewhere. At such a rate of turnover, the shortage of trained and qualified workers has become a national staffing crisis. Those who do remain on the job share the extra burden of constantly training new co-workers, and the quality of services that children and parents receive continues to decline dangerously.

How can states and communities invest in higher-paying child care jobs, and, in particular, how can low-income women's access to such jobs be increased? A recent nationwide survey by the National Center for the Early Childhood Workforce Force (NCECW) has identified a variety of promising program options, but the newly-passed federal welfare legislation also reveals a startling trend toward punitive measures and regulatory short-cuts that could undermine child care jobs even further. We are entering a time of danger—and opportunity—as programs to employ poor women in child care are being developed from a very broad range of motives and in a highly uncertain political climate. We are also on the brink of a dramatic shift in the overall composition of the child care work force: on one hand, there may be a major new influx of untrained, entry-level workers being forced off the welfare rolls, and on the other, a serious teacher shortage in many elementary school districts is creating new incentives for the best-trained, most experienced child care workers to leave the field for better-paying careers.

For better or worse, mandatory employment for welfare recipients has clearly become the thrust of "reform" at the federal and state levels, a policy likely to create a virtually overnight demand for jobs and child care services for millions of families removed from the welfare rolls. As policy makers and program designers scramble to develop work options for welfare recipients, child care employment has appeared high on the list of possibilities. The escalating demand for child care services as welfare recipients enter the work force, it is argued, could be met by a portion of these same women who must now find employment.

The idea seems like a perfect fit: building the child care supply for children in poverty while creating a job opportunity for their parents. But child care jobs can by no means be viewed as a simple or low-cost solution to the welfare-to-work dilemma. With a majority of the child care work force earning poverty-level wages, a job in child care hardly guarantees a welfare recipient a clear path to self-sufficiency. Indeed, many child care workers would be likely candidates themselves for publicly-supported welfare and health care benefits. And without sufficient provisions for specialized training and assistance in job placement, former welfare recipients moving into child care jobs will be unlikely to stay in the field very long, primarily as a result of poor pay, and because caring for groups of young children is considerably more difficult without adequate preparation.

Many of the dangers of the new "get tough" approach to welfare are clearly exemplified in the "Wisconsin Works," or W-2, program set forth by state Governor Tommy Thompson. As currently framed, W-2 will force women into the work force when their babies are 12 weeks old, even though a decent infant care is already very hard to find or to afford. At the same time, W-2 will create a new category of "provisionally certified" child care, through which an adult can care for up to three children at home without any required training. The state has also announced that it will offer subsidized parents a 30-percent discount on their co-payments for using provisionally certified care, or a certified family child care provider, rather than a licensed child care center. This policy could well undermine the state's own child care licensing

---

3 Whitebook et al., 1993.
5 When California implemented its welfare-to-work program, GAIN, in 1995, several counties excluded child care as a possible job option. Because of low compensation in the field, child care work was viewed by GAIN administrators as an unendurable route toward family self-sufficiency.
system, which sets far higher standards for program quality and staffing, and it threatens to create a two-tier system in which poor children are relegated to poorer-quality care.

The pressure on low-wage fields such as child care to absorb an influx of former welfare recipients is also coming at a time when the low-wage labor market is already saturated. The Washington-based Economic Policy Institute has recently estimated that "to absorb almost one million new workers, the wages of low-wage workers (defined as the bottom 30 percent of workers—about 31 million men and women who earn less than $7.19 per hour) will have to fall by 11.9 percent nationwide. Wages for low-wage workers in states with relatively large welfare populations will have to fall by even more: in California, by 17.8 percent; in New York, by 17.1 percent." As a result, action to improve child care compensation will never be more urgently needed than in the coming period.

To date, serious investments in child care employment have most often been motivated by a desire to improve the quality of services for children, while only secondarily providing better opportunities for advancement for low-income teachers and providers. In reality, these two goals should be closely linked, since high turnover and low compensation among caregivers have been shown to have direct and harmful effects on the quality of care that children receive, and on children’s ability to socialize and learn. Research has also shown that poor children are more vulnerable than others to low-quality child care, and that they benefit more than others from better-quality care.

Despite the obstacles, there is evidence that in certain circumstances—particularly in well-subsidized sectors of the field—child care is a job that can offer decent compensation, stability and a future to people in low-income communities. And there is a growing awareness among policy makers and program planners that in order to improve child care quality, child care jobs must be improved as well.

A NATIONAL SURVEY OF PROGRAM OPTIONS

Mindful of the difficulties of investing in good child care jobs, NCCEW set out to document programs and strategies that create high-quality jobs for adults and high-quality services for children—with an emphasis on serving women in low-income communities. Our survey uncovered some encouraging models as well as a number of common challenges and barriers.

---

6 Mishel & Schmitt, 1996.
7 Whitebook et al., 1990 and 1993; Cost, Quality and Child Outcomes Study Team, 1995.

We must note at the outset, too, that child care wages and benefits have only become a recognized issue in the field because of the persistence and dedication over the past 20 years of so many advocates in the grassroots child care compensation movement. Many of the initiatives outlined below grew out of, or were influenced by, the activism of such groups as the nationwide Worthy Wage Campaign, and child care union locals in Massachusetts, Wisconsin and other states. Many have benefited from the persuasive findings of such action-oriented research projects as the National Child Care Staffing Study, and the numerous local salary and benefits studies conducted by activists over the years. The continued efforts of an active advocacy community will be an essential element of partnership as states and communities explore ways to improve child care quality and compensation.

We began by surveying strategies at the federal, state and local levels to improve existing child care jobs, since the field as a whole is already a low-income profession. We were mindful that one cannot focus exclusively on bringing more low-income women into the field, but must also provide advancement opportunities for the current child care work force, many of whom continue to live at or near the poverty level.

Next, we sought to identify specific ways to make child care jobs more viable for low-income women who might wish to enter the field. We consulted with nearly 100 individuals and organizations in order to target the most promising initiatives, and then conducted 17 in-depth interviews with program directors, advisors and consultants in 1995 and early 1996. Respondents included representatives of community development corporations, micro and peer loan funds, facility funds, worker-owned corporations, foundations, and child care training and job placement programs. Five of these 17 programs (the Child Care Careers Program, Boston, Mass.; the Minnesota Child Care Apprentice/Mentor Program, Minneapolis, Minn.; the TEACH Early Childhood Project, North Carolina; Chicago Commons, Chicago, Ill.; and Childspace Management Group, Inc., Philadelphia, Pa.) are described in detail in Part Three of this report.

Our motivation was to provide factual information to advocates and policy makers who are confronting a fast-changing child care policy environment. Recent Congressional actions to reorganize and limit federal funding for child care, and to increase the demand for child care services and jobs through welfare reform, appear to offer little hope for improving either child care employment or services. But the shifting landscape of child care funding does provide an opportunity for innovation. We therefore conclude the report with a series of recommend ed "next steps" for community- and state-level action to improve child care compensation.
STRUCTURAL AND SOCIAL BARRIERS TO INVESTING IN CHILD CARE JOBS

Our survey identified a variety of common barriers faced by programs seeking to develop better-paying child care jobs. Many are policy obstacles that are present in the society as a whole, and/or within the child care profession itself, while others are programmatic obstacles that particular initiatives have confronted and have sometimes been unable to resolve.

First, it should perhaps go without saying that the entire U.S. child care system will need to be infused with major new sources of funding, both public and private, in order to truly meet the demand for quality services and decent worker wages. At present, the system is based heavily on parent tuition, and since many parents have a sharply limited ability to pay more, fees and wages are kept depressed at levels that are incongruent with the actual cost of providing high-quality care. But among broader social barriers, the persistence of a low U.S. minimum wage also clearly keeps child care wages depressed. With an estimated one-third of caregivers working as minimum wage earners, the recent increase in the minimum wage to $5.15 per hour has resulted in an immediate, badly-needed boost for the profession as a whole. Even this increase, however, is not likely to hold much ground against concurrent increases in the cost of living; it has been estimated that to match the buying power of the $2.00 minimum wage of the mid-1970s, the minimum would have to be well over $6.00 per hour. And the lack of a guaranteed national health care insurance system continues to keep health benefits out of reach for many child care workers.

Just as critically, child care teachers and providers are almost completely excluded from positions of leadership and influence in the field. Most child care organizations do not address teachers' and providers' economic concerns, or do so only nominally as one of many issues. Indeed, many have traditionally viewed an active call for better wages as unprofessional or inappropriately political behavior. Unlike other fields such as medicine, law, and even K-12 education, child care spokespeople are generally not practitioners who spend their days in direct service. In many cases, if they did work with children in the past, it was under circumstances dramatically different from today's. When service providers are invited to take part in advocacy efforts, they are generally program directors rather than classroom staff, and it cannot be assumed that directors can or will speak effectively for teachers and providers. When compared with the early childhood workforce as a whole, our leadership is also disproportionately Caucasian and male.

We are convinced that the field will only place work force concerns high on its agenda when a significant number of teachers and providers have reached positions of leadership and are able to represent themselves.

Fundamentally, the direct-service, caregiving child care work force remains unorganized. It lacks a national association or union that can amplify the voice of teachers and providers in the political arena, mobilize their activism, defend their interests, and devote itself to meeting their economic and professional needs.

An historical resistance to consistent national program standards or regulations also remains a severe barrier in the entire child care field. In states where licensing requirements are minimal or absent, better-paying child care jobs are much harder to find, since the market tends to favor unregulated care. The inevitable result is wide variability among the states—and there are rising pressures to chip away at the relatively minimal standards on adult/child ratios, group size and training that do exist. As states increasingly promote unregulated forms of child care under welfare reform, the importance of sound training and education for teachers and providers is becoming more undervalued than ever.

The states' levels of commitment to child care quality vary greatly—often depending on the department of government which administers subsidized child care services. This commitment can be especially undependable if it is tied too closely to certain elected officials' presence in office. Further, state and federal payment guidelines for subsidized child care often act as a barrier to program quality and decent compensation—with reimbursement rates set at a percentage of the market rate, for example, or parent fees set at a percentage of the cost of care, rather than based on parents' ability to pay. A heavy or exclusive reliance on voucher payment systems, in particular, can easily prevent child care centers from being able to predict enrollments and income, which in turn tends to keep wages depressed.

Among programmatic barriers, some child care job initiatives have suffered from too narrow a focus on the business aspects of managing a child care service, to the exclusion of child development training and other considerations of program quality. Others have run straight into the tough economic realities of a highly undercapitalized profession. In two northeastern states, child care loan funds set up by capital investment programs went largely unused because center directors and family child care providers were leath to take out loans they could not foresee being able to repay. Some initiatives have lacked a commitment to helping trainees reach self-sufficiency, focusing too narrowly on job placement with little regard for the earning potential of those jobs. Others have floundered because of dependence on a single, usually public, funding source.

---

8 Wilens, 1990.

9 National Black Child Development Institute, 1993; Whitebook, 1997.
STANDARDS FOR SUCCESS: GUIDELINES FOR EFFECTIVE TRAINING AND EMPLOYMENT IN CHILD CARE JOBS

Conversely, our survey identified a number of reasons why certain child care job programs have become highly successful. Efforts to increase access to high-paying child care jobs in low-income communities are most likely to succeed when there are:

- a diversity of funding sources;
- a willingness to invest in sound training and education in child care and child development;
- a clear linkage between training and compensation;
- an established career path whereby training and education can allow participants to earn credentials or degrees; and
- a strong regulatory environment, at the state and/or community level, that supports the development and maintenance of high-quality child care programs.

As welfare reform proposals increasingly focus on cost-cutting measures and deregulation in child care, it becomes necessary for the child care field to articulate sound principles for training and employment. We have come to believe that the following principles should guide any program to invest in child care jobs in low-income communities, and particularly, to employ welfare recipients as child care providers.10

1. Those who enter the field must choose to do so, and must be able to demonstrate an aptitude for the work. Anyone entering child care work as part of welfare reform must be helped to develop realistic expectations for the future as a child care professional. Each trainee should:

- receive an orientation to the work that inspires a commitment to quality—not just the simple transmission of low-level information.
- participate in assessing his/her own appropriateness for working with groups of children and their families.
- be informed that while many advocates are working to improve conditions in the field, most child care jobs still offer limited earnings, few benefits, and minimal opportunities for advancement.

2. Training programs must address the requirements of child care work as well as the needs of the trainees. A number of approaches for training child care professionals are available. Whichever method is followed, training programs for both center-based and home-based child care providers should include:

- content targeted toward improving trainees’ basic skills (e.g., literacy and math skills, and/or preparation for the GED);
- specific content related to the care and education of young children (including child development, early childhood curriculum and methods, working with parents, and working with other adults in a group child care setting);
- specific content appropriate for the developmental needs of the children served (infants, toddlers, preschoolers, school-age children, and/or children with special needs), and for the type of setting (center-based or family child care);
- information, particularly for family child care trainees, on licensing requirements, accessing subsidies, and small business management skills.
- diverse training methods to meet the needs of a multicultural and multilingual population, and taught by experienced adult educators.
- a substantial practicum experience in an apprentice role, under qualified supervision.

3. Child care training must position new providers for career mobility in the field. Child care training under welfare reform must be of sufficient quality to:

- be integrated into existing training systems in local areas, including Head Start and Child Development Associate (CDA) training.
- award a viable credential, certificate or college credit that can be applied to further job advancement or college-level study.
- provide economic rewards through differential pay scales linked to levels of training completed.
- provide continued access to training after initial employment, in order to help caregivers qualify for roles of increased responsibility and increased compensation in the future.

It will be essential to ensure that welfare reform does not foster a two-tiered child care work force in which former welfare recipients are stuck in the lowest-paying, most dead-end jobs because they are unqualified for higher-paying ones.

---

10 The articulation of these guidelines, first issued by NCCAW in 1994, benefited greatly from the contributions of the following individuals: Aeo Collins, Andrea Genszer, Patty Hatzidak, Beverly Jackson, Sharon Lynn Kagan, Gwen Morgan, Edna Rabick, Carol Stevenson, Enna Tollett and Charbel Walker.
4. Child care providers trained under welfare reform need continued support in order to succeed. This support should include:

- ongoing mentoring by experienced child care providers, or other formal peer support and assistance, once trainees are employed in child care settings.
- financial and technical assistance to family child care providers to upgrade their homes in order to meet licensing and other requirements.
- comprehensive health coverage.
- assistance with child care costs for their own children.

The following sections of this report describe a variety of promising program options from around the country, and set forth an action agenda for better child care compensation. It is our hope that Making Work Pay in the Child Care Industry will significantly help the field to expand the true potential of child care as a livable, sustaining, professional job for people of all communities.

PART TWO: PROMISING PRACTICES FOR IMPROVING CHILD CARE COMPENSATION

The demand for quality child care services and decent worker wages, as we have noted above, will only be fully met when the entire U.S. child care system is refueled and infused with major new sources of funding—sources which must ease the system’s inappropriately heavy reliance on parent fees, and boost the currently minimal level of public reimbursement for a portion of the child care costs of poor families. In partnership with Washington, states and communities must work to confront and solve this long-standing, nationally shared challenge. Short of such a system-wide overhaul, however, the following sections of this report outline a variety of significant interim steps that state and local policy makers and advocates can undertake toward achieving lasting progress on child care compensation and quality.

In clarifying its goals and values, any program to address child care compensation must resolve three basic questions:

1. WHO? Which persons or positions, in which sectors of the child care work force, will be targeted to receive improved compensation? Will family child care and center-based caregivers both be included; for example, or specific program types only? Will all positions, from a beginning aide to a head teacher or director, be included?

2. HOW? Which method to improve compensation will be most feasible with available resources, and most appropriate for the target group? Methods can range from modest to comprehensive: from offsetting some or all of participants’ training costs, to providing a stipend or honorarium as a reward for participation in a program, or creating a more formal career step that permanently connects an increase in skill and/or training with higher wages.

3. ON WHAT BASIS? It is also necessary to consider what kinds of performance and/or service the program is designed to reward. Should caregivers be recognized for one or all of the following: length of service, job performance, education, training, or other criteria? In addition to these considerations, will the program seek to increase compensation across the board, in response to the historic underpayment of all child care workers?

U.S. Army Child Development Services’ Caregiver Personnel Pay Plan, begun in 1989, serves as the most dramatic example of system-wide improvements in child care compensation. Both the Army and, to
a lesser degree, other branches of Military Child Care have been able to carry out far-reaching plans to raise caregivers' salaries across the board, and to substantially reward caregivers who complete additional training. The federal Head Start program, although it has a smaller and less consistent funding base than Military Child Care, has also devoted considerable resources toward a systemic improvement of staff compensation.

A number of other promising programs have been developed in recent years at the state level. In Massachusetts, a $25 million increase in reimbursement rates for fiscal year 1997, targeted to improving teacher and provider wages, represents a significant victory for child care advocates concerned about compensation and quality. In a statewide North Carolina program called Teacher Education and Compensation Helps (TEACH), center-based teaching staff, directors and family child care providers in all program types and at most educational levels are eligible to receive added compensation when they have completed additional training. And numerous mentoring programs around the country, inspired by California's Early Childhood Mentor Program and others, are now linking mentor training with various forms of increased compensation.

Although it is not always possible to adopt one's preferred compensation strategy in total, the above three questions should be kept in mind when reviewing program models or drafting policies. All of the programs considered in this report have grappled with these issues during the design and implementation stages. Many programs, such as TEACH, focus on linking compensation and training, while others, such as the Head Start initiative, have sought to redress the long-standing legacy of underpayment. Some—most impressively by Army Child Development Services—have attempted to do both. The Army and Head Start models focus on a particular segment of the workforce, while TEACH targets all sectors. Financial resources, to a large extent, have dictated the selection of target groups.

Many of the initiatives described in this report came to life as a result of the federal Child Care and Development Block Grant (CCDBG), which took effect in 1990. The CCDBG represented a major advance for efforts to promote child care compensation, because for the first time, raising compensation was put on an equal footing with other efforts to increase child care quality, such as licensing, monitoring and training. While increased federal funding and recent legislative changes in the block grant system may dampen efforts to strengthen compensation in some states, the states are not explicitly restricted from spending federal funds on compensation, and programs may continue to flourish in states where advocacy for such efforts is strong.

**Military Child Care**

Militarv Child Care became a pilot project to increase teacher salaries at some Military Child Care centers, the Caregiver Personnel Pay Plan launched in 1989 is now an ongoing system-wide program that links training to increased compensation. The result has been a dramatic reduction in staff turnover within Army Child Development Services. Major goals of the program are to make early childhood staff salaries competitive with comparable professions within the military, and to break the link between staff compensation and parent fees. Entry-level staff receive increased compensation after completing required training and demonstrating developmentally appropriate practices. The competency-based on-the-job training is modeled after the Child Development Associate (CDA) credential program. Staff with CDA credentials, or associate or bachelor degrees, can also increase their compensation by taking advanced training. Military child care staff now receive regular cost-of-living increases commensurate with those received by all federal employees.

The Army has also begun to reward family child care providers with a “quality care subsidy” in recognition of completing a CDA credential or associate or bachelor degree. Recognizing that many parents could not afford to pay providers a higher fee, Army Child Development Services recommends that base commanders authorize these payments. Training is available to providers and teachers throughout the Military Child Care system free of charge. In 1995, the Army commissioned NCRCW to develop a mentoring curriculum, and looks forward in the coming years to instituting a mentor teacher position as a new higher-salaried step on the career ladder. Mentoring programs for center directors and for family child care providers are also planned.

**Head Start**

The federal Head Start program, recognizing the role that compensation and training play in program quality, has been able to implement salary enhancements and expanded training provisions for all employees after the two most recent Congressional reauthorizations of program funding. The 1990 Head Start Expansion and Quality Improvement Act, renewed in 1994, has led to the allocation of some $470 million in salary increases for approximately 100,000 Head Start personnel—an average per-employee increase of about $1,500 per year from 1991 through 1994.

Head Start employs many former welfare recipients, especially parents whose children have attended the program, and has therefore served an important community development function in low-income areas over its 30-year history. Working in Head Start has been a route
away from poverty for many people, especially for those who have moved into administrative jobs or used Head Start as a stepping stone to other employment. But for those who have remained in Head Start teaching jobs, the earning potential of such jobs remains limited. In 1994, for example, after two years of salary improvements, entry-level teachers still earned only $14,350 per year on average, and those who had been on the job six years or more, many of them with college degrees, earned an average of only $17,885 per year.11

The 1990 legislation provided funds both to increase the number of children served in Head Start and to upgrade the quality of program services by investing substantially in staff salaries. Not less than one-half of the amount reserved for quality improvements (25 percent of any increase above previous funding levels) was explicitly reserved to improve the compensation (including benefits) of staff of Head Start agencies and thereby enhance recruitment and retention of such staff.12 The 1994 reauthorization of the Act maintained, with minor adjustments, the same quality provisions linked to expansion funds. Head Start funding for fiscal year 1997 remains stable, and maintains a comparable commitment to salary enhancement.

Although the original impetus for Head Start salary improvements was the increased federal funding, the actual staff compensation plan varied widely among program management agencies, with each agency given discretion in how to distribute the funds and/or develop new salary schedules. Some programs were able to build consensus or near-consensus to reward training, tenure, a combination of both, or some other valued staff characteristic, whereas other programs became mired in the decision-making process or reached decisions that were unpopular with many staff. The success of salary improvements in Head Start depended not only on having a funding source, but on the ability of administrators and other staff to make complex and equitable decisions.

A study of the Head Start salary improvements revealed that programs paying the lowest wages for each job category in 1992 reported the largest increases between 1992 and 1994. Levels of education and training for Head Start staff also increased during this period. Head Start staff with higher levels of formal education received higher salaries in 1992 and each subsequent year, yet still earn substantially less than those with similar levels of education in the overall civilian labor force.11 The salary improvement programs have made important gains, but additional salary increases will be necessary in order to close this gap.

for some workers, but for the majority, an associate or even bachelor degree in early childhood education or a related field does not reliably lead to an adequately-paid position with benefits. Many well-trained and educated teachers and providers leave the field because they find so few financial rewards there.13

Clearly, then, state and local child care training dollars are most wisely spent on efforts which seek to retain veteran caregivers by linking training with economic advancement, rather than those which simply continue to train one generation of newcomers after another as the experienced caregivers depart. Happily, a growing number of initiatives are being developed that offer financial rewards to teachers and providers as they pursue their training and education.

**Mentoring Programs + Apprenticeship Programs**

Mentoring programs offer experienced caregivers new encouragement to remain in the field by helping them learn to share their skills with others and grow in the profession. By creating a new step on the child care career ladder that is ideally rewarded with improved compensation, by addressing a serious shortage of on-the-job child care training, and by emphasizing excellence in daily practice, mentoring programs have been instrumental in stemming staff turnover and enhancing program quality for young children and their families. Mentoring also offers novice caregivers (often called “protégés”) a practical and supportive way to learn and to overcome the many hurdles of the critical first years on the job.14

While mentoring programs generally share a desire to increase teacher and provider compensation, they have had varying levels of success in achieving this goal. The programs described below have made important strides in rewarding mentor teachers and providers financially.15

**California Early Childhood Mentor Program**

The California Early Childhood Mentor Program (CECMP) has successfully been rewarding teachers’ increased skills and training with higher compensation since it was co-founded as a pilot program by NCECW (then the Child Care Employee Project) and Glubot College in Hayward in 1988. Now operating at 50 community college sites statewide, it is the largest program of its type in the country.

The CECMP was designed with two broad objectives: to support and retain experienced teachers, and in the process, to enlist them in train-

---

15 See also Suber-Beunig & Belin (1996) for an in-depth survey of 19 mentoring programs across the United States.

---

**Part Two: Promising Practices**

What exactly does an early childhood "champion" look like? Are these really teachers or caregivers?

The original funds for the pilot program at Chabot College were provided by the David and Lucile Packard Foundation and United Way. In 1991, contributions from eight private foundations helped to expand the program to nine additional community colleges, and in 1992, federal Child Care and Development Block Grant funds became available to further expand and support it. The statewide program is now administered by Chabot College, with NCECW collaborating to document and assess its effects.

A 1994 evaluation by NCECW identified a number of important contributions the program has made. Above all, it has succeeded in attracting a pool of highly-qualified veteran teachers to serve as mentors to early childhood education students. Thirty-nine percent of mentors had a bachelor degree or higher at the time of their participation in the program, and the reported turnover rate for mentors was only 10 percent, less than one-third of the average turnover rate among child care teachers statewide. Mentors were more ethnically and racially diverse, and more representative of the California child care work force, than were community college faculty. Through the CECMP, mentors were found to improve their self-esteem, form new skills in working with other adults, and renew their commitment to their profession. Although many of the mentors had reached the top of the teacher wage scale at their centers, the program has offered them additional compensation in recognition of their new skills, effectively adding a new step of professional development in their teaching careers.16

Another major success of the program has been its ability to foster leadership in the field by mentors, who have organized a number of meetings, outreach forums at conferences, and other events to advocate for the program and for the value of mentoring. Another promising outcome has been the approval of a revised state permit.
which formally designates a new Master Teacher position, thus helping to recognize and institutionalize the mentor’s role in state-subsidized programs.

- **Minnesota Child Care Apprentice/Mentor Program**
  **Minneapolis and Rochester, Minnesota**

The Minnesota Child Care Apprentice/Mentor Program (MCCAMP) is a pilot program combining training, support services, wage subsidies, and job placement to assist low-income women in finding decent-paying child care jobs. Apprentices work one-on-one with mentors at a child care center for two years, receive a 50-percent tuition reimbursement towards college credit, become qualified as head teachers under Minnesota licensing guidelines. The college credits, articulated with two-year community college degree programs and the four-year community psychology degree available from Minnesota State University. Participating centers are required to meet certain wage goals, and apprentices have averaged about $2,000 in wage increases over the two years. Although not required to do so, the program has been able to secure employment for all the apprentices. The program is currently being replicated in Rochester, Minnesota.

MCCAMP is funded by Hennepin County discretionary funds targeted by the County Commissioners to help low-income residents gain better-paying employment. These county funds, drawn from residential property taxes, pay for participants’ college tuition, evening child care, transportation, and wage upgrades. The two-year cost to MCCAMP for each apprentice/mentor team is $9,651. The total cost, however, is $11,580, which includes $180 paid by apprentices (10 percent of tuition and books), $70 paid by mentors (30 percent of tuition and 100 percent of books), and $1,679 paid by center sponsors (an average of 10 percent of tuition and books, and 75 percent of the apprentice’s wage upgrade).

The program’s first group of apprentices in 1994 consisted of nine women and three men; two were welfare recipients who had not yet worked in child care, and ten were untrained entry-level child care workers who were earning very low wages. The apprentices were more ethnically and racially diverse than their mentors, largely because fewer people of color have had access to the education and training necessary to meet Minnesota’s licensing qualifications for head teachers. The MCCAMP staff, which had considerable experience in anti-bias and diversity work, paid particular attention to bridging cultural gaps among apprentices, mentors and other center staff.

In addition to the training and placement services that assure trainees of decent-paying child care work at the completion of their apprenticeship, trainees receive an array of supports throughout the program. All apprentices are reimbursed for 80 percent of book costs and 100 percent of evening child care and transportation costs; they also receive wage upgrades at six-month intervals to supplement the base wage they earn from their centers.

Welfare recipients enrolled in the program receive the additional support of Transitional Child Care benefits as well as their welfare grant. Initially their wages are deducted from the welfare grant until they earn enough to leave the welfare system. Child care center directors, who might be reluctant to take a chance on an inexperienced employee, have the incentive of needing to make only a small financial investment in wages at first, as the program pays $2.50 of the apprentice’s base wage plus 100 percent of the wage upgrades every six months. At the end of their two-year training, all apprentices earn a minimum of $8.00 per hour from their centers, according to the contractual agreement.

MCCAMP also requires that apprentices receive all benefits offered to other employees. In cases where health benefits are not offered, low-income workers in Minnesota have the option of purchasing a state-funded health plan with costs based on income, family size and number of people covered. This statewide health plan allows apprentices not eligible for Medicaid to receive low-cost health insurance.

Most of the center directors involved in the program have been happy to hire an apprentice, viewing the initial two-year commitment as a win-win proposition in an occupation characterized by high turnover and poor opportunities for training. At the end of the first two-year cycle of the MCCAMP, ten of the apprentices have been placed permanently in the centers where they began their training, and two have taken positions in other centers. The MCCAMP director reports that the limited pool of programs who can afford to pay a staff member $8.00 at the completion of training is the main limitation on the program’s growth.

- **Milwaukee Early Childhood Mentor Teacher Program**
  **Milwaukee, Wisconsin**

The Milwaukee Early Childhood Mentor Teacher Program selects qualified caregivers in child care centers and family child care homes who then enroll in a two-credit seminar to prepare for a new mentoring role. Mentors from both centers and family child care homes also complete applications which are scored by a selection committee. After mentors and protégés have been matched, they enroll in a three-credit course which structures and enhances their one-on-one work. During the semester they are involved in the program, mentors receive a stipend of $500 to cover tuition costs and related expenses. Protégés are reimbursed for tuition, provided they receive at least a B grade, and receive a grant of $150 for classroom materials. Once center-based
Mentors and program directors have completed the program, their directors are required to increase their salaries, and family child care providers are encouraged to raise their rates. The program is funded through the Wisconsin Department of Health and Human Services, as part of a program of Child Care Technical Assistance and Training Grants. In 1994-95, the program budget was $60,000.

With the onset of Wisconsin Works, the state's welfare plan, the program has been reauthorized for funding, but unfortunately, it has been redesigned in line with a mentoring program in Fond du Lac County which did not have specific compensation guidelines built into it. Provisions are in place to recruit former welfare recipients as teachers and providers to help fill the growing need for child care.

Priority for placement in the Milwaukee County program will go to welfare recipients in work experience or community service programs. The ultimate impact of state welfare legislation on this mentoring program remains uncertain, but the move to place welfare recipients into child care training is likely to be a growing trend in mentoring programs around the country. If this is the case, compensation for mentors and stipends for protégés will be more vital than ever for such a trend to succeed.

The Child Care Careers Program
Boston, Massachusetts

The Child Care Careers Program (CCCP), part of Wheelock College's Center for Career Development, offers low-income women from Boston and Cambridge, Mass., a nine-month pre-service training program in early childhood education. Wheelock College awards 15 college credits to the trainee for her work and a certificate which indicates that the graduate meets the Massachusetts Office for Children requirements for child care teacher certification. The CCCP enjoyed a 100-percent placement rate in 1995, and graduates now earn an average salary of between $8.00 and $10.00 per hour plus benefits.

The CCCP is funded through the Economic Development Industrial Corporation (EDIC) and the Massachusetts Department of Education, and financial aid to students comes in the form of Pell Grants. Wheelock College provides in-kind institutional support but no direct funding to the program. The annual cost per student of the program is approximately $5,300—or $6,000, including the in-kind contribution of Wheelock staff.

The majority of CCCP students are Latina or African-American women between 22 and 35 years of age. Most are also parents of young children, and are eligible through CCCP for child care vouchers for use while they are in school. Of the 25 students in the program

accepts each year, 80 percent of the spaces are reserved for welfare recipients. Recruitment for the program is year-long through postings with the Employment Services Program, Department of Transitional Assistance area offices, unemployment offices, Head Start programs, child care centers and multi-service agencies, as well as through word of mouth. Requests for enrollment have also increased each year; on average, the program now turn away four applicants for each one it accepts. Such a high demand allows the program to be selective: students are highly motivated to become child care teachers and to become students in early care and education.

At the completion of their training, many students find jobs at their student internship sites. Wheelock staff put a great deal of effort into preparing students to find jobs, and have an ongoing commitment to graduates' continuing education and professional training. Wheelock offers spaces to CCCP graduates at no cost to attend courses in its part-time bachelor's program. Forty-four percent of the graduates have enrolled, and successful completion makes them eligible for headteacher certification. Students wishing to continue their education are counseled and encouraged to do so. Wheelock staff also assist students in job search activities that include writing cover letters and resumes, conducting mock interviews, role playing in job searches, obtaining referrals to job openings, writing references, and arranging transportation to interviews. Successful placements are largely due to the fact that CCCP is training workers who come from and live in the communities where they are seeking to work. Moreover, students are counseled and trained to select jobs that provide the best compensation and benefits package—not to take the first job offered, but the job that will best meet their needs.

Overall success of the program can be attributed to several factors in combination:

- the reputation of Wheelock College and the dedication of its staff;
- a rigorous student selection process;
- training that brings participants up to a significantly higher professional level, allowing them to command better compensation in the job market;
- strong state licensing requirements, which signal the state's commitment to investing in quality child care; and
- two decades of community advocacy and unionization efforts in Massachusetts in support of better child care and better teacher/provider compensation.

Child care jobs can by no means be viewed as a simple or low-cost solution to the welfare-to-work dilemma.

17 Average starting teaching assistant wages in Boston were $6.10 per hour in 1992, and have not increased significantly since that time.
The TEACH Early Childhood Project
North Carolina

The TEACH Early Childhood Project coordinates a variety of educational scholarship opportunities under one umbrella for people working in regulated child care centers and homes in North Carolina. Participants receive scholarships to offset the cost of earning a North Carolina Child Care Credential or Child Development Associate (CDA) credential, completing course work toward an A.A. or B.A. degree in early childhood education, or becoming an Early Childhood Model/Mentor Teacher. Any teacher, director or family child care provider in a regulated child care setting is eligible to apply for a scholarship. Child care center employees must be sponsored by their center. When center employees reach their educational goal, they receive either a salary increase of three to five percent or a one-time bonus. Family child care providers always receive the bonus because they are self-employed. TEACH participants receive a salary increase or bonus for each contract period that they are in the program, so that each additional educational attainment is rewarded with additional compensation.

TEACH participants' income at the beginning of the program is roughly equivalent to that of other North Carolina child care teachers, one-third of whom live at or below the poverty level. If anything, their income may be lower than average, since TEACH attracts a greater percentage of child care workers with minimal college experience. TEACH staff have built relationships with community colleges across the state, even in less populated rural areas, in order to make the program broadly accessible.

The average scholarship cost for TEACH varies greatly among different programs. Scholarships always cover part of the cost of tuition and books, as well as a per-quarter travel stipend. In some programs, teachers receive paid release time from their center to study, attend class or meet personal needs. TEACH reimburses the center or family child care provider for one-half of the cost of the release time. TEACH staff also provide counseling and administrative support for the program.

The funding for TEACH programs comes from a variety of sources, including the North Carolina Division of Child Care Development, which administers federal child care funds for the state, the North Carolina General Assembly, corporate contributions, and foundation support. In 1995, 1,805 North Carolina child care workers received a TEACH scholarship. The average cost per participant is $520 per year.

TEACH staff have tracked scholarship recipients for up to five years. Teachers and providers who aim to complete an A.A. or B.A. can easily take five years or longer because most work part-time. About 69.5 percent of all TEACH participants currently are pursuing a state Child Care Credential, 26.3 percent an Early Childhood Associate Degree, and 0.8 percent a B.A. degree. The remaining 3.4 percent are pursuing a CDA credential or taking part in the Early Childhood Model/Mentor Teacher Program. TEACH staff have found that at the five-year mark, child care teachers still in the TEACH program earned 30 percent more than when they began—a greater increase than what the program requires of centers.

Recognizing the unique issues in easing the transition from welfare to work, TEACH is now planning a demonstration project, in collaboration with North Carolina Cooperative Extension, that would meet low-income women's needs for health care benefits and child care. Welfare recipients who become TEACH apprentices will work in centers as substitutes for other TEACH participants during their paid release time. It is proposed that welfare recipients who will be attending school part-time will continue to receive child care and health benefits, their welfare grant, and TEACH bonuses when earned.

TEACH has established a program that is clearly accessible to low-income people. Once welfare recipients' benefits expire, however, it is unlikely that child care jobs, even with the TEACH salary increase, can sustain a single head of household with dependents. The average hourly wage for an assistant in North Carolina in 1993 was $5.03, and $5.61 for a teacher; wage increases of 30 percent would elevate these salaries to $6.53 or $7.20. The general lack of fully-paid health benefits for child care staff in North Carolina only aggravates the challenge of self-sufficiency. TEACH is clearly improving the education and skills of a wide span of child care workers in North Carolina, and rewarding the accomplishments of center staff and providers with better compensation. Without comprehensive benefits, however, even better-educated low-income women may not be able to sustain their families by working in child care.

Child Care WAGES
Orange County, North Carolina

Another initiative funded by the state of North Carolina, Smart Start, is built on the assumption that state- and community-level public/private partnerships can address the specific needs of children and families, including access to high-quality, affordable child care. Smart Start is overseen by the North Carolina Partnership for Children, and local county partnerships administer their own community-based initiatives. Orange County's Smart Start partnership supports a compensation-linked training initiative called Child Care WAGES.

Like TEACH, WAGES is designed to offer preschool children more stable relationships with better-educated caregivers by rewarding teacher education and years of tenure. But while TEACH is a broad-
based initiative available to all members of the child care work force seeking to improve their education, WAGES particularly targets salary increases to experienced, well-trained caregivers whose salaries do not reflect their level of educational attainment. Any teacher or provider earning less than $10.32 per hour, and any director earning less than $12.90 per hour, may be eligible. Center-based staff must work in an Orange County center that is licensed, NAEYC-accredited and/or registered, and have some formal child care credential beyond a high school diploma. A teacher, director or provider who has completed a B.A. or B.S. in early childhood education or child development is eligible for an annual supplement of $1,250. One half of the supplement is paid after the worker completes six months of tenure at an eligible program, and the second half is paid at the end of the year. For caregivers who earn a North Carolina Child Care Credential, the annual supplement is $200. Smart Start partnerships in other North Carolina counties may opt to run similar programs in the future.

Wisconsin Quality Improvement Grants Program

Wisconsin

The Wisconsin Quality Improvement Grants Program began in 1992 to help centers and family child care providers boost the quality of care through staff training and retention strategies. The program was developed after a decade of survey findings on low child care worker salaries and extremely high rates of turnover. With an annual budget of about $1.5 million, funded through the federal Child Care and Development Fund, the initiative supports child care programs that seek to improve quality by undergoing accreditation, promoting teacher training, and raising compensation. Programs must certify to the state that they have a plan to improve compensation and reduce turnover. Such strategies have included providing bonuses to teachers and providers who increase their level of training or education. Licensed child care programs can receive up to four years of quality improvement grants.

Between 1992 and 1996, 340 centers and 153 family child care providers participating in the program received a total of over $5 million. Thirty-one percent of participating centers and 45 percent of family child care providers have achieved accreditation within three years of receiving their initial grant. Once programs meet certain levels of quality, as measured by accreditation, they can reapply indefinitely to receive staff retention grants to augment salaries. It is expected that this program will continue as Wisconsin begins its new welfare initiative, Wisconsin Works. Wisconsin policy makers regard the grants program as an integral part of child care capacity building to meet the increased demand for child care as a result of the new welfare legislation.

Provider Merit Pay Awards

Montana

This incentive program, developed by the Montana State University (MSU) Early Childhood Project, rewards teachers and providers who complete an approved training plan, set by the state's Child Care and Development Fund task force, with Provider Merit Pay Awards of $250. A caregiver must work at least 20 hours per week with young children in a child care setting in order to be approved by a committee of early childhood professionals, parents and child care providers selected by the task force. A training plan is submitted by the provider in the fall for approval by the committee, and the caregiver must complete the training plan by September of the following year in order to receive the award. Block grant funds have served about 100 caregivers in each of three years of the program. MSU has also convenes an early care and education career development task force, and is formulating a career development plan.

Loan Assumption Programs

Loan assumption (or loan forgiveness) programs are designed to alleviate the burden of higher education costs on child care teachers and providers. Insofar as better-educated teachers and providers can gain modest salary improvements from earning an associate or bachelor degree, loan assumption programs indirectly contribute to better compensation.

- Loan Forgiveness Program, Pennsylvania

Child Development Teacher Loan Assumption Program, California

Recognizing that training can be costly for child care workers earning low wages, the Pennsylvania legislature has funded a program to offset the expense of child care-related higher education. For those who qualify, the loan forgiveness program is a major form of financial assistance and an important incentive for training. Pennsylvania child care teachers and providers with degrees in early childhood education are eligible to receive up to $2,500 per year in loan forgiveness, with a maximum four-year total of $10,000. To be eligible, a teacher or provider must be certified and earn less than $18,000 per year. Since funds for the program are limited, a lottery system chooses recipients from a fairly large pool of eligible graduates, about 50 percent of whom are currently served. A graduate needs to re-apply for the program each year, and is not guaranteed four years of loan forgiveness. The Pennsylvania legislature allocated $140,000 for the program in fiscal year 1997.

California's Child Development Teacher Loan Assumption Program (CDTAP), which began in 1992 with an annual budget of $200,000 from the California Department of Education, was developed to sup-
port the recruitment and retention of well-trained child care staff. Candidates for a loan assumption of between $2,000 and $4,000 must achieve an instructional or supervisory California Children's Center Permit, and be employed for a year in a center serving children of low-income families. Due to the small number of qualified applicants, however, the Department of Education cut program funding in half between fiscal years 1993 and 1995.

With the goal of making the program more attractive and accessible, the Student Aid Commission (the agency responsible for administering CDTLAP) collaborated with child care advocates and community and state college faculty in 1995 to redesign it as a grants program. The main motivation for the proposed change was the apparent shortage of early childhood education students who had felt confident enough about their earning potential to take out loans in the first place. A bill revising the original legislation to transform the loan assumption to a grants program was drafted, and introduced as legislation during the 1995-96 year, but defeated in the fiscal committee of the State Assembly. The program therefore continues in its original form, and to date, only seven participants seeking a supervisory permit, and 26 seeking an instructional permit, have qualified for loan assumptions.

While Pennsylvania's program has had no difficulty identifying degree staff with outstanding loans who are interested in reducing their debt, California's effort has been unable to arouse significant interest. Publicity and outreach to eligible students and graduates about CDTLAP have probably been inadequate, and the program's eligibility criteria are more restrictive than those in Pennsylvania.

Public reimbursement rates are the single greatest determinant of compensation for center-based staff and other providers of subsidized services.

REIMBURSEMENT RATE IMPROVEMENTS

Public reimbursement rates are the single greatest determinant of compensation for center-based staff and other providers of subsidized services. Low rates depress a child care program's revenue sources, and in turn deplete its available resources to compensate teachers and providers. A number of states have sought to address this pervasive problem by raising reimbursement rates. Some have linked higher rates to higher standards of quality. While increased reimbursement rates do not necessarily translate into higher wages, they can serve as an incentive for programs to improve the quality of their services. Unfortunately, the new welfare law no longer requires states to reimburse programs at the 75th percentile of market rate, although states can maintain this funding level or set higher rates at their own discretion.

In addition to the states described below, Arkansas, Louisiana, Minnesota, Vermont and Wisconsin all offer higher reimbursement rates to programs that have achieved accreditation through the National Association for the Education of Young Children (NAEYC). It must be noted, however, that accreditation alone may be an insufficient guarantor of quality care: in two recent studies, approximately half of programs ranked as mediocre in quality and were characterized by high staff turnover, stemming in part from a lack of commitment to improving teaching staff salaries.

Massachusetts

The Massachusetts Department of Social Services announced in 1996 a dramatic increase in payment rates to programs offering subsidized child care services. The state budget for fiscal year 1997 earmarks a total of $25 million for rate increases for child care centers and family child care homes. All providers whose rates have been frozen since 1989 must receive a rate increase, and providers with the lowest current rates will receive the bulk of the increase.

The new funding is due in large part to an intensive and persistent two-year lobbying campaign by a broad-based coalition called "Fair Rates + Fair Wages = Quality Child Care." The coalition included the statewide child care union local and other worker groups, child care administrators' organizations, family child care associations, and the state network of resource and referral agencies. The campaign built on a long-standing legacy of activism which had led to temporary wage-scale increases in subsidized child care programs during the mid-1980s. Although there is no system of enforcement in place to ensure that programs will translate rate increases into better salaries, the enthusiastic participation of program administrators in the coalition, and the strong level of teacher and provider activism, should guarantee wage increases in most programs. The coalition viewed improving salaries, and in turn retaining staff and building program quality, as key objectives of the campaign. Due to the relatively high percentage of state-subsidized programs in Massachusetts which are unionized, it is also likely that staff needs will be well represented.

North Carolina

As of September 1996, North Carolina reimburses all child care centers at 110 percent of the market rate if they achieve the state-defined "AA" accreditation (a level above the state's minimum standards, yet well below NAEYC accreditation guidelines). County "Smart Start" partnerships can also decide whether or not to pay higher rates, and can determine what the differential would be. Mecklenburg County, in particular, has chosen to use higher reimbursement rates specifically for improvements in staff compensation.

Even in a prohibitive funding environment, employers and employees at child care centers can develop their own methods to improve caregiver compensation. Foremost among these, though still not widespread, is the effort by child care workers themselves to organize and to collectively bargain with their employers.

**Unionization**

Unionization is an important strategy for securing higher compensation for child care teaching staff—one that began as early as 1949 among employees of publicly-funded, preschool programs in southern California. Yet nationwide, only four percent of the center-based child care work force participates in a collective bargaining unit or union.

A collective bargaining agreement can be a valuable tool for securing protections and improvements in child care employees’ working lives. With a union contract, child care employees have a greater voice in defining their working conditions, clarifying their rights and responsibilities. As well as those of the employer, and resolving problems or grievances.

They can also enlist the union’s support in enforcing the terms of the contract, and protecting them from arbitrary or unfair actions and decisions. Finally, membership in a union can mobilize employees from diverse workplaces to work together as public policy activists for a better-funded, higher-quality child care delivery system.

Compensation and staff retention at unionized child care programs have been found to be significantly better than in non-union sector. In a 1995 study of Los Angeles County child care staff, for example, unionized teachers earned significantly more ($10.30 per hour versus $6.98 per hour). Turnover among teachers and assistant teachers in unionized programs was found to be eight percent and three percent per year, respectively, compared with 18 percent and 26 percent in non-union programs.

A number of challenges present themselves, however, to those who would like to unionize more child care workplaces. The typically small staff size of child care centers, along with higher than average staff turnover, can make it difficult to organize a collective bargaining unit, and most centers—apart from regional or national for-profit child care chains—lack major sources of revenue that can be made available for staff compensation. In addition, several for-profit child care chains have invested considerable resources in a variety of efforts to discourage unionization. Several labor unions, however, have shown a growing interest in organizing lower-wage service-sector employees.

Five major unions are presently involved in representing child care workers—the American Federation of State, County and Municipal Employees (AFSCME), the American Federation of Teachers (AFT), the National Education Association (NEA), the Service Employees International Union (SEIU), and United Auto Workers (UAW). Independent local such as the Wisconsin Child Care Union, based in Madison, have also been organized by child care workers themselves. The UAW child care local in Massachusetts, originally launched by the independent union District 65, is particularly notable for its energetic statewide organizing of large and small child care workplaces, for its strong record of activism and coalition partnership in the state and national public policy arenas. In California, the UAW also won a major legal decision in 1991, in which KinderCare Learning Centers, Inc., the nation’s largest for-profit child care chain, was charged by the National Labor Relations Board with a variety of unfair labor practices.

**Chicago Commons – Child Development Program**

Chicago Commons is a community development corporation serving low-income residents of the Chicago area. Its Child Development Program currently has seven sites serving 970 children of low-income families, ranging in age from birth to 12 years old. Services offered include Head Start, state Pre-Kindergarten, child care, and family child care offered through a Day Care Home Network. Each site offers an array of early childhood services; the largest, for example, has two Head Start classrooms and 11 child care classrooms serving children from infancy through school age.

The Child Development Program receives financial support from the Illinois Department of Human Services, the U.S. Department of Health and Human Services, the State Board of Education, federal Title XX funds, and private donors. Private donations largely support the Day Care Home Network, and come from such sources as local foundations and Peltz, a locally-based manufacturing company.

Chicago Commons has demonstrated a commitment to early childhood development, and views it as equal in importance to the other services it offers the community. Six years ago, its Board of Directors appointed a committee to examine pay differentials among the workers providing early care and education services. Their first priority was to eliminate the approximately $5,000 gap between the annual salaries of Head Start teachers and child care teachers employed by Chicago Commons, and they set aside roughly $50,000 per year of agency funds for salary enhancements for child care teachers. Child care head teach-
ers and Head Start teachers are now on the same pay scale, making an average of $21,000 per year and receiving full individual health coverage. The agency's next step is to narrow the pay differentials between these teachers and others in their programs, including pre-kindergarten head teachers who earn an average of $29,000 per year.

Chicago Commons has a hard-working development team which raises funds each year to support the equitable salary schedule, but the agency remains at risk of losing existing services and salary enhancements because of pending cuts in public and United Way funding. If funding is substantially cut, Chicago Commons could face the dilemma, all too familiar in publicly-funded nonprofit programs, of whether to cut services or salaries.

Childspace Management Group, Inc.
Philadelphia, Pennsylvania

Childspace Management Group, Inc. is a worker-owned cooperative whose member-owners staff two child care centers in economically and ethnically diverse neighborhoods of Philadelphia. Staff at both of the Childspace Day Care Centers are predominantly women from low-income communities, serving economically diverse groups of children. The worker cooperative was started in 1988 to create opportunities and incentives for child care workers to take responsibility for delivering high-quality services for children. Childspace is committed to worker empowerment through training, and to participation in work-group and corporate decision-making in an employee-centered culture. Childspace member-owners collectively make management-level decisions on budgets, center policies related to salary scales and benefits, and long-range planning. All Childspace staff, whether cooperative members or not, earn above-average benefits. (Not all staff opt to take on the decision-making responsibility of being a member of the worker cooperative.)

An entry-level assistant teacher at Childspace starts at a minimum of $6.00 per hour, and a head teacher starts at a minimum of $17,000 annually (about $8.17 per hour). These fairly typical child care teaching salaries, however, are supplemented with a generous benefits package: full-time staff (working 30 or more hours per week) receive full family health coverage if needed and full-time child care for one child. Part-time staff (employed 15 to 29 hours) receive full individual health coverage. A benefit virtually unheard of for part-time workers in any profession. As the cost of purchasing benefits increased for Childspace in 1992, a ten-percent staff co-payment was introduced by cooperative members. This difficult decision was viewed as preferable to cutting the benefits of the part-time workers, who make up nearly

50 percent of the staff. The benefit plan is also flexible: staff, for example, can opt for child care for more than one child, or for a yearly bonus if they already receive health coverage from another source. The average annual cost of these staff benefits is $4,675.

While Childspace seeks to reward staff for their educational background and experience, its founders also recognized that low-income job applicants who show promise may lack the educational background to meet requirements for advancement. Directors and head teachers therefore work with entry-level staff to train them on the job as well as to encourage them to gain units in early childhood education. Assistants with extensive experience who demonstrate sufficient skills and understanding of children’s development, and who are committed to earning units in early childhood education, may be promoted to head teacher positions without having achieved a degree.

Childspace’s ability to finance better benefits and working conditions is a result, in part, of its economically diverse parent base. Full-wage-paying parents who appreciate the quality of the care their children receive partially subsidize services for lower-income families. Several low-interest loans from investors also provided the program with startup capital. As the program has grown through enrolling more children and establishing a second site, some economies of scale in bookkeeping, administration, commercial contracts and benefits have allowed the centers to operate more efficiently.

Currently a Childspace team is seeking to replicate this worker cooperative model in other centers around the U.S. Their hope is that in establishing a network of worker cooperatives and resources for these organizations, the gains that have been made at the Philadelphia centers can extend to other communities. Most recently, in collaboration with the San Francisco Bay Area Worthy Wage Campaign and the General Services Administration, Childspace has developed a new worker-owned cooperative center which opened in Richmond, California, in September 1996.

The Business/Child Care Partnership
Seattle, Washington

The Business/Child Care Partnership encourages Seattle businesses to contribute to child care programs that are committed to improving compensation. The creation of such a partnership was a key recommendation of the Seattle Child Care Staffing Task Force, a group which grew out of the Seattle Worthy Wage Campaign. The director and sole staff person of the program, which is housed in a local child care resource and referral agency, has dedicated himself to increasing business leaders' awareness of the importance of child care quality for their employees.

To date, 27 programs in the Seattle area have been paired with businesses that have made direct contributions of materials, funds and
Making Work Pay in the Child Care Industry

The importance of making work pay in the child care industry cannot be overstated. A small consulting firm, for example, has granted paid release time to its business manager to train child care center directors in financial management and accounting. In one center, the training resulted in a financial reorganization and marketing plan that allowed the director to grant raises to all employees. A large employer in Seattle donated a copy machine to a center, which allowed the center to use funds previously budgeted for copying to improve staff salaries. At the end of the first year of the program, a total of $22,000 in wage increases was reported by participating centers. In the current, second year of the program, the goal is $50,000 in wage increases. The Business/Child Care Partnership's annual budget is $47,000.

While the Partnership's program director is encouraged by the contributions of Seattle businesses, he cautions that these contacts and relationships between business and child care need to be actively nurtured to ensure their continuation. Many businesses, in his view, are willing to make a one- or two-year commitment, but without significant encouragement and follow-up, are often unable or unwilling to commit staff or other resources to a longer-term project.

**Director Training**

A number of efforts around the country are focusing on making directors better managers of organizations by giving them skills in the areas of budget planning, marketing, personnel policies and employee benefits. The assumption underlying these programs is that with additional skills and information, directors and their staff will be able to maximize revenue and economize through better management practices and economies of scale. Theoretically, centers could then use these funds to improve compensation in addition to other needed improvements.

**Project Organizational Quality (POQ)** in Minneapolis, Minn., sponsored by the Greater Minneapolis Day Care Association, the Early Childhood Directors Association, and Resources for Child Caring, was a three-year program of this type that demonstrated some gains. POQ worked with 20 target centers over the three years to generate funds to improve staff wages, benefits, and working conditions. An evaluation of the program found that budget surpluses increased in each of the three years at target centers, whereas surpluses decreased all three years in control centers. Improvements in wages were greater at target centers than under market conditions, particularly among lower-income caregivers. Eligibility for benefits increased at target centers, particularly among lower-paid employees, while it decreased at control centers. These improvements in compensation were not made at the expense of staff/child ratios, which improved overall at target centers while they remained steady in control centers.

In the San Francisco Bay Area, NCECW is conducting training for directors and teaching staff in 1997 to assist centers in managing staff turnover. In developing this project, we examined how other industries assess turnover costs and their impact on service quality, and how employers intervene to reduce employee departures—typically, through a three-part strategy addressing compensation, work relationships, and hiring practices. The goals of the Managing Staff Turnover project are to identify program practices which either support or undermine the retention of a skilled staff, and to help centers achieve cost savings which can be invested in staff needs. Topics for discussion include how centers can calculate their own turnover costs, developing turnover management plans, joint strategies with other centers, and mentoring others about turnover-related issues. At the culmination of the training, NCECW will develop a resource publication on best practices for managing turnover.

Typically, however, director training is not focused directly on helping improve staff compensation. Facilities funded in child care, for example, have viewed it as a way to help directors undertake longer-term financial planning to upgrade facilities and other capital improvements. Another current effort is a move to develop a director credential, which could theoretically be awarded, in part, as a recognition of a director's skills in financial management. Unless such a credential is linked to increased compensation for directors, however, it could be unduly burdensome for some directors to achieve it, since directors themselves are generally underpaid as well. Another limitation to management training as a strategy to improve compensation is that programs that lack sufficient funding will likely realize only very modest increases in revenue.

Health Insurance

There has been much discussion about the importance of improving child care workers' access to health care benefits—an initiative that could boost the compensation of a broad sector of teachers and providers, since only a small minority receive fully-paid health insurance from their employers. Child care work involves significant occupational health risks, including repeated exposure to infectious diseases, as well as back injuries from stooping and lifting—and medical conditions can easily worsen when caregivers delay or forego treatment. Because most child care teachers and providers are women of child-bearing age, the need for maternal health care is also significant. But in the absence of broad-based state or national health care reform, most child care programs need help in securing affordable health care coverage for their employees.
Direct Action for Rights and Equality (DARE)  
Rhode Island  
After a four-year campaign, the Providence-based grassroots organization DARE secured an unprecedented commitment from Rhode Island Governor Lincoln Almond and the Department of Human Services, and finally the passage of state legislation in 1996, to provide health care insurance to family child care providers who lack coverage. Under the new law, providers who care for children as part of the state’s welfare-related child care program, and who are not covered by other health insurance, are now classified as state employees and thus become eligible for Right Care, the state employee health program. The insurance plan became available to providers in January 1997. DARE estimates that about 150 providers are eligible, currently receiving such low payment for the children in their care that most of them live well below the poverty line. DARE estimates a maximum total cost to the state of $664,000 per year, but because the plan represents significant savings to the state in Medicaid, welfare and hospital costs, as well as an investment in more stable, high-quality care for low-income families, the final cost should be significantly lower.

Wayne County Health Choice  
Wayne County, Michigan  
Wayne County Health Choice is the first program of its kind in Michigan, and perhaps in the nation. It offers baseline HMO-like health care coverage to low-wage employees of child care centers as well as restaurants, beauty salons and other employers that traditionally do not offer medical benefits. It is designed to help hospitals cut costs by reducing the number of uninsured people who are treated at emergency rooms and are unable to pay their bills. Health Choice is available only to businesses in the county which have not offered health care benefits during the preceding 12 months, have at least five employees, and pay an average wage of less than $10 per hour. Employees, employers and the county each pay one-third of the insurance cost, which for a single person is $114 monthly or $36 per party. The monthly cost for an employee with three or more dependents is $330 or $110 per party. The program began in May 1994, and costs nearly $3 million per year. Of the county’s share, $800,000 comes from state and federal Medicaid funds, and the county itself contributes $150,000 per year.

Health Maintenance Organizations (HMOs)  
California  
In discussions with California’s statewide Child Development Policy Advisory Committee and NCECW, several California-based health maintenance organizations are currently examining the feasibility of offering free or low-cost health insurance to selected California child care programs for a two-year period. The proposed pilot program has been envisioned as a way to link improved benefits for center staff with increased recruitment and retention. Some HMOs already have a time-limited “bridge program” to assist fee-paying members who, because of loss of job or spouse or other calamity, are unable to afford the premium. Child care programs which demonstrate a commitment to purchasing benefits for employees at the end of the HMO assistance period would be given preference in selection. It is proposed that center directors and staff representatives participating in the pilot would work together with other centers and organizations to develop financing for a health insurance plan that would continue once the HMO’s commitment to the center ceased. Health benefits to staff could significantly reduce turnover, leading to savings in advertising, staff orientation, training and administrative time.
S
ince compensation is generally inadequate across all sectors of the
child care delivery system, no single approach is likely to create a
comprehensive solution. Even if all the additional child care dollars
available to the states under the new federal block grant system
were to be used for raising compensation—unlikely, given the
many demands on these funds—they would be insufficient to ben-
develop a variety of initiatives, recognizing the need to act incremen-
tally and to build on past progress over time.

The action steps recommended below offer particular advantages:
1. They are suited to time-limited funding, at least initially; 2. They provide
for testing particular policy initiatives in selected communities before
they are implemented at the state level; and 3. They take a proactive
stance toward tackling large problems even with limited resources,
rather than refraining from taking any action because resources are
insufficient. Since such undertakings will require greater public
commitment for and understanding of quality child care services, all initia-
tives should also include a strong public education component.

With these considerations in mind, we recommend that states devel-
op compensation initiatives which:
1. Encourage the retention of teachers, providers and directors who
have made a commitment to their child care careers through educat-
ion and training;
2. Promote the pursuit of and reward for professional preparation
among those entering the field;
3. Meet the particular characteristics of different sectors of the delivery
system;
4. Create opportunities for local communities throughout states to
participate;
5. Encourage private as well as public participation in solutions;
6. Equalize access to high-quality services among children from all eco-
nomic backgrounds;
7. Generate data about the effectiveness of different approaches and
their potential for replication or expansion;
8. Stimulate public awareness of the importance of child care services
and jobs, and the link between qualified and adequately compen-
sated caregivers and beneficial outcomes for children; and

8. Galvanize stakeholders within and beyond the child development com-

community to address the inadequacies of current services for children.

Our recommendations for action by states and communities to
improve child care compensation are grouped around four major
approaches:
1. System-wide reform;
2. Linkages between training and compensation;
3. Expansion of health care coverage; and
4. Grants programs and enhancement of reimbursement rates.23

SYSTEM-WIDE REFORM

1. States should devote concentrated attention to the refinancing of
their child care systems.

To make widespread and lasting progress in raising child care com-
pensation, the entire U.S. child care delivery system will inevitably
require additional federal funding. But recognizing the need to increase
and coordinate child care dollars at the state level, California, Colorado,
Hawaii, Indiana, Minnesota and Washington are notable for having
taken steps toward developing new statewide financing systems for
early childhood education. Their efforts, while diverse, are all based on
the assumption that new funding sources are needed to meet the

demand for quality child care. As funding decisions shift to the state
and local levels, policy makers in these states recognize that they must
be prepared both to identify new sources of funding and to make rea-
soned decisions to ensure the accessibility and quality of services.24

Even when policy makers and advocates recognize the need for
additional child care funding and coordination, however, it is not a
foregone conclusion that investment in decent-paying jobs for child

care workers will be a high funding priority. Among the states listed
above, only California, Minnesota and Washington have explicitly
adopted the goal of financing improved compensation as a component
of the full cost of child care quality.

23 Several of the recommendations in this section were developed by NCEC in
greater detail, including cost estimates and specific program design consider-
ations, as part of the California Child Care and Development Compensation
Study, conducted in collaboration with the American Institutes for Research
under contract with the California Department of Education. For more infor-
mation about that study, contact the California Department of Education,
Child Care and Development Division, 221 Capitol Mall, P.O. Box 994272,
Sacramento, CA 95824-4272.

24 Groenby & Krantzel, 1996; Mitchell & Stoney, 1996.
The policy initiatives being discussed in these states center around increasing employers’ contributions to employees’ child care costs, raising child care costs for affluent parents through sliding fee scales or other means, and increasing government and community contributions. Each of the three states is also engaged in conducting research to support its policy proposals, and recognizes the importance of increasing public awareness of the need for affordable, high-quality child care with adequate compensation for caregivers. Most notably, child care advocates in Minnesota have recently released a comprehensive analysis of the true costs of a fully-funded child care delivery system in that state, and of several policy options for working toward such a system. Their report estimates that child care teachers and providers, through unacceptably low wages, are currently subsidizing roughly 20 percent of Minnesota’s child care service delivery.25

Conversely, although the link between compensation and child care quality is amply documented, many state and local child policy makers have invested heavily in child care training without addressing the need to improve compensation, or have abandoned all hope of building high-quality services in favor of serving as many children in need as possible. The pressures of welfare reform have also created an emphasis on lower-cost, custodial child care arrangements, and on the recruitment of untrained and even unpaid personnel for child care jobs.

In the current climate, the public funds now allocated will not assure the creation of high-quality child care systems in the 50 states. In many cases, the public contribution will need to be designed to leverage private employer and philanthropic dollars, and compensation initiatives should be crafted to maintain and maximize current investments in the child care industry. Investment should come from all segments of the community, in recognition of the fact that children and families at all points of the economic spectrum experience mediocre-to-poor-quality child care. The burden, of course, falls most heavily on children of low-income families, many of whom do not qualify for or cannot access subsidized care, yet who stand to benefit the most from high-quality early care and education opportunities.

2. Leadership opportunities for child care teachers and providers should be actively promoted by states, communities and the child care profession as a whole.

Effective leadership for the early childhood field must involve bringing all sectors of the profession “to the table”—and child care teachers and family child care providers have a pivotal, often overlooked, role to play as leaders. Teachers and providers are the ones who know best what it takes to offer quality child care. They know intimately the day-to-day realities and needs of America’s children and families, and their daily contact with parents makes them an ideal liaison between policy makers and child care consumers. They can offer unique insight into how policies and programs affect families’ lives—whether it’s children going hungry because of Food Program cuts, or the effect on quality of raising staff/child ratios or group sizes, or the problems of job turnover in the field and of constantly working with new, untrained staff, or more cases of children with special needs going untreated because of restrictions in Medicaid funding. Much of the thrust of current policy proposals has been to pile more and more demands onto the already shaky structure of our child care system, and teachers and providers perhaps know best what the limits truly are.

By helping young children learn and grow, and by helping parents to work and to advance themselves, child care teachers and providers literally hold our society together on a daily basis. And we believe that they should be the foundation of leadership in the child care field, working alongside directors, administrators, and representatives of national organizations to advance the quality and stability of child care services nationwide. Only when good practitioners are able to bring their perspectives to the larger world will we ultimately improve the quality of practice in the field as a whole.

But instead, the leadership potential of teachers and providers often goes unrecognized, and their professional needs for better compensation, working conditions and training opportunities often go unattended—even by fellow child care advocates. Teachers and providers are generally excluded from positions of power through which they might influence decisions, policies, and the distribution of resources to organizations and programs. They are often silent in policy discussions not because they have nothing to contribute, but because they lack access to the latest policy updates and other information, and are rarely invited to advocacy meetings. Few receive release time from the classroom to meet with colleagues or to exercise leadership in the field, and due to typically very poor wages, they often need to hold second jobs. The result is that many opportunities are missed for the early childhood workforce to share their unique perspectives and strengths.

NCECW coordinates two models of building leadership among teachers and providers which we believe particularly merit attention by child care policy makers, advocates, trainers, and program administrators: the Worthy Wage Campaign and the Leadership Empowerment Action Project (LEAP).

The Worthy Wage Campaign is a nationwide grassroots effort begun in 1991 to empower child care teachers and providers to mobilize to reverse the nation’s child care staffing crisis. The Campaign, with members in all 50 states, the District of Columbia and Canada, is organized around three principles:
9. to create a unified voice for the concerns of the early care and education work force at the national, state, and local levels;

8. to foster respect for those who work with young children by improving their wages, benefits, working conditions and training opportunities; and

6. to promote the accessibility and affordability of high-quality early care and education options that meet the diverse needs of children and families.

The Campaign emphasizes the importance of local efforts by teachers and providers to raise awareness of child care staffing concerns in their communities. "Job shadowing," in which political leaders, sports and entertainment celebrities, media representatives and others are invited to work alongside a teacher or provider for a day and to speak publicly about the experience, have been particularly successful. As the Campaign has evolved over the past five years, many teacher/provider leaders have emerged within local membership groups. As one member has written, "The Worthy Wage movement is the place where in the last three years I have grown tremendously as a leader and a believer in myself and my work with children." Along with organizing events for the nationwide Worthy Wage Day held each spring, local campaigns engage in a variety of activities to build the confidence and skills of teachers and providers as spokespersons for the child care profession.

The Leadership Empowerment Action Project (LEAP) was developed in response to local Worthy Wage Campaigns' strong desire to share leadership skills with others and to keep teachers and providers at the forefront of the movement. The LEAP training model has now been used successfully by NCEIW and by local provider groups in over a dozen states. The training is geared to a variety of levels of experience in leadership, organizing, community action and child care advocacy, and seeks to help participants at all levels recognize their own skills and emerge as stronger leaders. The LEAP curriculum, which can be used in many formats ranging from weekend workshops to 15-session, three-credit courses, is designed around the three critical stages of empowerment: coming to awareness, engaging in inquiry and analysis, and taking action. The training helps teachers and providers to articulate their own stories, interpret these experiences in the larger contexts of history and community, and use that knowledge to identify appropriate steps toward change.

We recommend that child care advocates, trainers and program administrators encourage and facilitate participation by teachers and providers in such advocacy and leadership efforts, by providing information, release time and training opportunities.

We also urge state and local child care administrators and policy makers to work with such advocacy groups as the Worthy Wage Campaign to raise public awareness on compensation issues, and to fund leadership training opportunities which can help teachers and providers to take a more active role in creating public policy initiatives for quality child care.

3. An organizational home should be created for the direct-service, caregiving child care work force.

As we noted in the Introduction to this report, the direct-service, caregiving child care work force lacks an "organizational home"—a national association or union that can amplify their voice in the political arena, mobilize their activism, defend their interests, and devote itself to meeting their economic and professional needs. One significant barrier to the creation of such an association has been that currently-existing child care 501(c)(3) organizations—defined as charitable nonprofit groups whose contributions are tax deductible—are strictly limited by anti-trust laws in their ability to advocate for specific wage improvements and working conditions.

We urge and support the creation of a national child care worker association as a vehicle for fostering better working conditions, higher compensation and increased professionalism in the field as a whole. But creating an organizational home for the child care work force within the labor movement will certainly mean rethinking the traditional industrial organizing model, which has had relatively little success in service industries such as child care that function mainly in disparate, small-scale "shops." While such an organization will wish to negotiate with parent/clients and/or with program administrators for better working conditions at members' workplaces, child care workers may well have relationships of close contact and partnership with parents and directors that make a heavily adversarial model unnecessary or counterproductive. Indeed, workers, administrators and parents need more than ever to become a coalition of advocates with the power to influence public officials, policy makers and voters—working together to secure greater public resources for the child care system as a whole.

A new organizational form will be required to resolve potential conflicts, promote new approaches and strategies, and bring about systemic improvement of employment practices in the child care field. The major unions which already represent some child care workers will be essential partners in this effort. But new organizing models that are experiencing success in other fields—such as Living Wage Campaigns and efforts across multiple employers—will also be an important subject of study.

Further, while unions have often seen child care as an important benefit for their members, most unions have yet to recognize child care workers as workers in their own right. Working parents in the labor movement are a potentially very receptive audience to tap into, and collaboration with the broader labor movement would therefore be an important part of launching a new child care worker organization.
LINKING TRAINING AND COMPENSATION

1. States and communities should develop and support mentoring programs for child care teachers and providers.

Early childhood mentoring programs offer experienced caregivers new encouragement to remain in the child care field by helping them learn to share their skills with others and grow in the profession. By creating a new step on the child care career ladder, by addressing a serious shortage of on-the-job child care training, and by emphasizing excellence in daily practice, mentoring programs have been instrumental in stemming staff turnover and enhancing program quality for young children and their families. Mentoring also offers novice caregivers a practical and supportive way to learn and to overcome the many hurdles of the critical first years on the job.

We recommend that states and communities devote a significant portion of their child training dollars to the development and support of early childhood mentoring programs. By linking mentor training with increased compensation, mentoring programs support the retention of the most skilled and experienced teachers and providers in the field, and are therefore one of the most cost-effective uses of scarce child care training funds. The Early Childhood Mentoring Alliance, an information and technical assistance network coordinated by NCCEC, is also available to help mentors and mentoring programs nationwide.

2. States and communities should jointly establish apprenticeship programs for former welfare recipients who wish to pursue child care careers.

Earlier sections of this report have detailed the reasons why, without appropriate modifications, the recent federal welfare legislation is unlikely to lead to viable child care employment options for former welfare recipients or reliable, high-quality child care services for poor children. As one such modification, we recommend the creation of pilot apprenticeship projects by states and communities to create decent child care jobs for former welfare recipients and others, and to foster the development of higher-quality child care services.

A three-year pilot project operated by a local community or government agency, for example, could enable apprentices to be hired to work one-on-one with mentors at a child care program for two years, and receive a full or partial tuition reimbursement for college credits toward attaining teacher status in the state's child care career development system. During these first two years, the child care program and the pilot project would share the costs of the apprentice's wages; in the third year, the apprentice would have a reduced training load, and the child care program would assume the full cost of his or her wages. Local matching funds could be raised from private sources and from county Temporary Assistance to Needy Families (TANF) funds and/or other employment dollars.

Apprenticeship candidates should receive orientation about the level of commitment required to offer quality child care services; help in assessing their own appropriateness for working with groups of children and families; and information about realistic options for compensation, benefits and advancement in the field. Apprentice training should address specific content related to the care and education of young children, including child development, early childhood curriculum and methods, working with parents, and working with other adults in a group child care setting; specific content appropriate for the developmental needs of the children served and the type of setting; content targeted toward improving trainees' basic skills (e.g., literacy and math skills, and/or preparation for the GED); and information on licensing requirements, and the needs of multicultural and multilingual populations. Mentors should also receive advanced training, and stipends, to prepare them to address the particular needs of apprentices. Job placements should then be identified for apprentices which pay at an appropriate living wage standard for the designated community.

3. States should develop pilot programs to stabilize the child care work force.

We recommend that each state pilot a new public/private program that more effectively retains and rewards teachers and providers who invest in their careers through formal education in early childhood or related fields. Such a program presupposes that states will have created a child care career matrix or professional development system which links job titles and responsibilities with required levels of education and training (see Recommendation #1 in this section, below, concerning salary guidelines.) The program would recognize the historic underpayment of the child care work force, particularly those with higher levels of formal education and/or bilingual skills, and acknowledge the limited resources that prevent many programs from adequately compensating staff, despite the fact that centers typically devote the majority of their budgets to teaching personnel costs. A public/private partnership in each pilot community would raise local dollars to augment funds and to heighten community awareness of teachers' and providers' economic and professional needs.

The suggested program would provide stipends to qualified teachers and providers who meet specific educational requirements and who agree to remain on the job for no less than one year after enrolling

---

26 For detailed information about a variety of mentoring program design options, see Stals-Breunig & Bellm, 1996.
in the program. The stipends would be paid in two installments, the first at six months after acceptance and the second at the completion of a year. Participants could apply for stipends in consecutive years if they recommit to remain on their jobs for an additional year. The program would be designed to improve compensation for those full-time employees (e.g., working 30 hours or more per week directly with children) and/or directors who earn less than the state's recommended salary guideline or goal for their job category and level of training. For example, teachers or providers who have completed a bachelor's degree or higher in early childhood education or a related field, but who earn less than the average entry-level salary for public school teachers in the primary grades, would receive a stipend.

In addition, centers employing eligible recipients would be required to certify that no less than 60 percent of their operating budget is dedicated to teaching staff salaries, in order to enable employees to access the funds during the first year. If employees seek funds for a second year, center administrators (or family child care providers, if employees are working in a large family child care home) would agree to institute a salary schedule in their program if one does not exist, and/or participate in a three-session management program geared toward helping them identify ways to reduce turnover and increase staff salaries. Annual rewards should be set at a sufficient level to make a significant difference in income for staff in the various job categories and levels of professional preparation.

4. States should establish salary guidelines to encourage and inform efforts to improve compensation for the child care workforce.

Articulated salary goals and guidelines have been used effectively by U.S. Army Child Development Services and by states such as Massachusetts to determine the distribution of salary enhancement funds. Particularly in states which are creating or have created a child care career matrix or professional development system, linking job titles and responsibilities with required levels of education and training, the next logical step is the development of recommended salary goals for each position.

Such guidelines, if accompanied by information for programs on how to develop or revise salary schedules, as well as new management strategies, can also stimulate small but important changes in compensation at the program level. Guidelines play a critical role in public education and can help programs garner increased support from parents, businesses, local government and others concerned about the quality of child care.

We therefore recommend that each state convene an advisory committee of child care experts to develop salary guidelines and to create and disseminate relevant educational materials. Such guidelines will be critical to the development and success of many of the other initiatives recommended in this report.

5. States, and the federal government, should improve data collection on child care worker salaries, benefits and turnover.

Tracking the efficacy of quality enhancement investments, and assessing the changing dimensions of the child care staffing crisis, require reliable data about salaries, benefits and turnover. Much of the data currently available across the country on these topics has been collected and disseminated by non-governmental private agencies. The National Center for the Early Childhood Work Force, in particular, has conducted approximately 100 such surveys at the national, state and local levels in the past decade.

We recommend that states review, update and (where necessary) expand the collection of data currently available on salaries, benefits and job tenure/turndown in publicly-funded child care programs. Reporting forms for programs receiving public funds should be revised to ensure that data on staff salaries, benefits, background and tenure are regularly collected and periodically made public.

Data collection should also be improved at the federal level. Federal data collection on the child care work force is hampered both by the use of job titles that do not match workplace realities, and by the combination of unlike job categories. Data reports by the U.S. Bureau of the Census and the U.S. Bureau of Labor Statistics, for example, create a false distinction between "child care workers" and "preschool teachers," while placing "preschool teachers" and "kindergarten teachers" in the same category. As a result, salary surveys presented in such reports are not accurate sources of data on center-based child care teaching staff. We recommend that both bureaus revise these occupational categories in order to define the work force more accurately.27

6. States should assess retention and turnover rates among child care teachers and providers who participate in state-funded training initiatives.

Because of persistently high rates of child care worker turnover, state investments in child care training are frequently falling short of their desired goal of building higher-quality services. When well-trained teachers and providers continue to leave the field in order to make a better living elsewhere, the benefits to the public derived from their training are greatly diminished. By contrast, since North Carolina instituted the TEACH program which couples training with scholarships, bonuses and/or salary increases, turnover has decreased significantly and the state has realized a much greater return on its investment.

investment in training.

To help maximize the effective use of child care training dollars, we recommend that all states institute tracking systems to determine the job tenure over time of teachers and providers who participate in state-funded training initiatives.

HEALTH INSURANCE

1. States should represent and include the concerns of child care teachers and providers as new approaches to coverage for the uninsured are developed.

In the absence of comprehensive national health care reform, many states are turning their attention to other ways of increasing access to decent health care coverage for low-income individuals and families. California, for example, has amended its Health and Safety and Insurance codes to expand the definition of small employers for the purpose of access to health coverage, in order to include employers of at least two but no more than 50 eligible employees. This change permits large family child care homes with at least one assistant to participate in the health coverage options available for small businesses throughout the state. Other states have developed proposals to provide health coverage for children whose parents are not insured.

We recommend that state child care administrative agencies track such initiatives and promote the inclusion of low-income child care teachers and providers in state-level health care reform.

2. States should develop pilot projects which identify new mechanisms for providing affordable health insurance, and subsidize premiums for child care teachers and providers.

Federal child care quality enhancement funds should be allocated to help create vehicles for providing health coverage for the child care work force, and to subsidize a portion of the costs of such coverage. We recommend that states support pilot projects in several communities to identify a range of appropriate models. Projects should identify insurers willing to provide coverage for child care workers; designate an agency qualified to administer the insurance plan for purchasing-pool participants; recruit child care centers and/or homes not providing health insurance coverage to participate in the pilot; and conduct appropriate needs assessments of potential participants to determine appropriate premium costs and co-payments. Advisory committees including child care experts and health care planners should provide ongoing technical assistance to the pilot programs, develop public education materials about them, and assist in the design of project evaluation.

3. States should clarify the health insurance needs of family child care providers.

At this time, more information is available about the health insurance needs of center-based workers than of family child care providers. Each state child care administrative and/or licensing agency should therefore develop and distribute a survey to assess family child care providers' health care coverage needs, and analyze the findings in a timely manner. This information will be critical to the success of the health care-related program initiatives recommended above.

REIMBURSEMENT RATES AND QUALITY IMPROVEMENT GRANTS

1. States should establish reimbursement rates that allow subsidized child care programs to meet the true cost of providing high-quality services.

The states must make a renewed commitment to establishing reimbursement rates for subsidized child care programs that are commensurate with providing high-quality care for children and families. We recommend that each state convene a task force, with representatives from appropriate state agencies, to determine appropriate reimbursement rate goals, and to set forth an action plan toward reaching such goals. The task force should also take into consideration the lost income suffered by state-contracted programs if rates have been frozen in recent years, or of step with cost-of-living increases, and petition their state legislature to index future rate increases for child care programs to any cost-of-living increases received by public school programs.

2. States should establish "quality differential" rates to reward programs for their additional efforts to improve child care jobs.

We further recommend a 10-percent reimbursement rate differential for programs that meet certain quality criteria, such as accreditation, but only in cases where programs can also document that they are striving to improve child care jobs—for example, by devoting no less than 55 percent of their budget to teaching personnel wages and benefits, and by holding staff turnover down to not more than 20 percent per year.
CONCLUSION

Prompted by the recognition that what is good for teachers and providers is also good for children, a number of programs nationwide are struggling to make child care jobs into viable careers for low-income women, while at the same time making significant improvements in the quality of care that children receive. Given how challenging both of these objectives are, combining the two is particularly difficult, in light of current funding and regulatory trends.

All of the initiatives described in this report point to the need for more coordinated, well-financed efforts at the state and national levels to address the typically very low wages of child care teachers and providers. But while it may be tempting to believe that little can be done without sweeping changes in financing, these initiatives demonstrate that many groups across the country, large and small, have found the commitment and vision to do something significant about child care salaries and benefits. It is our hope, therefore, that this report will provide policy makers and advocates with concrete strategies for investing not only in high-quality child care, but in high-quality child care jobs.


In recent years, millions of public and private dollars have been directed toward helping child care centers become accredited by the National Association for the Education of Young Children. This study focuses on three communities over a two-year period, examining the extent to which centers achieving NAEYC accreditation improve in quality, and the extent to which NAEYC accreditation contributes to building a skilled and stable early care and education workforce.


Since the passage of the 1990 Head Start Expansion and Quality Improvement Act, nearly $500 million has been allocated to increase salaries for approximately 100,000 Head Start personnel. This report evaluates the salary improvement initiative and identifies features of the process—and of the structure of Head Start agencies—that facilitated or hindered it.


A keystone of any revamped child care system will be an ability to “break the link” between what parents pay for child care—often too much—and what child care providers earn—almost always too little. This report profiles several initiatives to raise child care salaries, and explores strategies for challenging social attitudes, developing new funding and financing options, and building coalitions committed to improving child care jobs and services.


A landmark, comprehensive study profiling demographic characteristics, professional preparation, quality, turnover, pay and working conditions of child care workers in the United States. Four years after the original data collection we returned to the study sites to assess subsequent changes in wages, benefits and turnover.


A comprehensive, flexible teaching tool for mentors and mentor trainers in center-based and family child care programs, including learning activities, handouts and supplementary readings.


Detailed information on 19 mentoring programs throughout the country, covering such issues as program design, recruitment, selection and training of mentors and protégés, compensation, funding, evaluation, obstacles and successes.
Compensatation initiatives.

We've Changed Our Name!

As of January 1998
National Center for the Early
Childhood Work Force (NCECW)
became
Center for the Child Care Workforce (CCW)
733 15th Street, NW, Suite 1037
Washington DC 20005-2112
Phone: 202-737-7700  Fax: 202-737-0370  Email: ccw@ccw.org
http://www.ccw.org