



**EARLY CARE & EDUCATION POLICY FOR LOW INCOME FAMILIES IN WASHINGTON STATE:  
WHAT WE CAN LEARN FROM WHITE CENTER/BOULEVARD PARK**

**Policy Paper  
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Washington Kids Count (WKC) is a project of the Human Services Policy Center at the University of Washington's Evans School of Public Affairs. The WKC mission is to improve public policies for Washington's children and families by analyzing policy-relevant data, collaborating with local partners, and communicating information to state policy makers, civic leaders, and the general public.

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## TABLE OF CONTENTS

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<b>INTRODUCTION.....</b>	<b>1</b>
Background.....	1
The Importance of High Quality ECE for Low Income Families.....	1
What We Can Learn from White Center/Boulevard Park.....	2
<b>WHITE CENTER/BOULEVARD PARK: NEIGHBORHOOD PROFILE.....</b>	<b>3</b>
General Profile.....	3
Profile of Families with Young Children (Age Birth to 5).....	4
<b>ECE UTILIZATION PATTERNS FOR WHITE CENTER/BOULEVARD PARK CHILDREN.....</b>	<b>6</b>
Parent-Only Care.....	8
Home-Based Care Settings (Family, Friend, & Neighbor Care and Family Center Care).....	9
Center Care.....	9
<b>BARRIERS TO ACCESSING HIGH QUALITY ECE FOR LOW INCOME FAMILIES IN WC/BP.....</b>	<b>10</b>
Affordability.....	10
Access.....	13
Cultural Considerations.....	13
<b>POLICY CONSIDERATIONS FOR LOW INCOME FAMILIES.....</b>	<b>15</b>
Addressing Affordability and Quality Issues.....	15
Addressing Access Issues.....	16
Addressing Cultural issues.....	17
<b>CONCLUSION.....</b>	<b>18</b>
<b>SOURCES &amp; ENDNOTES.....</b>	<b>19</b>

## LIST OF TABLES AND CHARTS

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Table 1: Economic and Social Characteristics Families with Young Children (0 to 5) WC/BP 2006.....	5
Chart 1: Child Care Utilization (0 to 5) for Families by Income Level WC/BP 2006.....	6
Table 2: Child Care Utilization Patterns by Characteristics of Children (0 to 5) WC/BP 2006.....	8
Table 3: Median Child Care Prices per Child by Age of Child King County 2006.....	11
Chart 2: Cost of Full-time/Full-Year High Quality Center Care as a Percent of Income by Family Income Category (FPL), King County.....	12

## INTRODUCTION

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### Background

In 2007, Washington Kids Count (WKC) received support from the Annie E. Casey Foundation (AECF) to analyze early care and education (ECE) utilization among low income families in White Center/Boulevard Park (WC/BP) – home to the AECF *Making Connections* initiative. The purpose of this project is to review findings from the *Making Connections Cross-Site Survey* to better understand child care utilization patterns and factors influencing parental choice of care among a diverse neighborhood of low income families. While the data focus on WC/BP, the information is useful to inform both local and state policy, as current state data systems lack the richness of information available on diverse racial, ethnic, and low income populations in Washington.

Over the last year WKC analyzed the data to identify key findings on ECE utilization patterns among WC/BP families. In collaboration with *Making Connections* staff and WC/BP community stakeholders, these findings were reviewed and interpreted to identify key areas that policymakers and advocacy groups should keep in mind as they develop their early learning agendas. This report will be submitted to the Early Learning Advocates Table (ELAT) - a group of advocates, private funders, and service providers in Washington who have come together to improve early learning policy and investments in the state. ELAT exists to foster effective, strategic, integrated early learning policy advocacy designed to make early learning a statewide priority, increase state investments, create better policies, and improve outcomes for all children. Organized by the Children's Alliance, ELAT is engaged in a strategic policy process that will make recommendations to the legislature in 2009.

The goals of this report are to (1) strengthen the policy making community's understanding of the obstacles low income families and communities of color face in accessing high quality ECE, and (2) persuade ELAT to develop policy recommendations for the 2009 legislative session that are necessary and sufficient to close disparities in access to high quality early learning opportunities for Washington's children.

### **The Importance of High Quality Early Care & Education (ECE) for Low Income Families**

Children's success in school and life is significantly affected by the quality of child care they receive, especially in the first five years before they enter kindergarten. Short-term outcomes associated with access to high quality ECE can include enhanced social/emotional, cognitive, and academic development, and school readiness.<sup>1, 2</sup> Long-term benefits include higher lifetime earnings, greater employment stability and labor market success, higher educational attainment, greater family stability, and dramatically reduced involvement with delinquency

and crime.<sup>1,3</sup> Positive outcomes for the child translate into benefits for society as a whole. Estimates suggest that the long-term benefits of high quality ECE are several times the cost.<sup>3</sup>

All children and families deserve high quality early learning opportunities, but accessing affordable, high quality ECE is especially important for low to moderate income families. Research indicates that the benefits of high quality ECE especially accrue to children of color, low income, and moderate income children.<sup>4</sup>

A recent analysis<sup>5</sup> of ECE affordability in Washington shows that while families with the lowest incomes often have access to high quality care through subsidized programs such as *Head Start* and the *Early Childhood Educational Assistance Program (ECEAP)*, and high income families have access to the best ECE options, low to moderate income families often struggle to access high quality care arrangements for their children. Due to limited resources, these families must often make child care choices for their children based on affordability and/or convenience rather than quality, which places their children at greater risk for not entering school ready to succeed.

Understanding the child care arrangements of low income families and the characteristics of various child care settings is critical to identifying effective support and services that will promote healthy social, emotional, and cognitive development for all children. Furthermore, increasing families' access to high quality ECE in all settings can help parents participate in the labor force, maintain economic stability, and increase the chances of educational success for their children.<sup>6,7</sup> Thus, high quality ECE is an essential tool for intergenerational economic security.

### **What We Can Learn from White Center/Boulevard Park**

Deepening our understanding of the ECE choices and constraints of low income families can strengthen our ability to offer support and ensure that all children have access to high quality ECE opportunities. Data from the Annie E. Casey Foundation's *Making Connections* site in WC/BP – a highly diverse, low income neighborhood near Seattle – provides a unique opportunity to develop this critical understanding and contribute to the early learning policy efforts in Washington State. The *Making Connections Cross-Site Survey*<sup>8</sup> can be used to understand ECE utilization patterns by demographic characteristics of the population that have previously been lacking, including immigrant status, citizenship status, race/ethnicity, and poverty level. The data also allow for analysis by various child risk factors, such as limited English proficiency and low parent education.

While the *Making Connections Cross Site Survey* data are specific to White Center, the rich information on such a diverse population strengthens our ability to help families with similar characteristics across Washington State. The analysis of this data can help in the development of evidence-based ECE policy recommendations for low to moderate income families, especially those of color and immigrants, and to inform culturally and linguistically appropriate programs to increase access to high quality ECE for all children.

## **WHITE CENTER/BOULEVARD PARK: NEIGHBORHOOD PROFILE**

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### **General Profile**

WC/BP is an unincorporated area between Burien and Seattle in Southwest King County. The neighborhood is experiencing rapid population growth and boasts a rich and diverse cultural heritage. As of the 2000 Decennial Census, there were over 32,000 residents living in the area.<sup>9</sup> Over one in four (27 percent) residents was born outside of the U.S. Vietnamese and Mexican residents make up nearly half (48 percent) of foreign-born residents, 10 percent are from Cambodia, and the remaining (42 percent) come from countries across the globe, including the Philippines, Ethiopia, Eritrea, Somalia, Bosnia, Thailand, India, Laos, Iraq, and Samoa. One-third (33 percent) of residents in the neighborhood speak a language other than English at home.<sup>10</sup>

WC/BP is also home to a vast network of community-based organizations and citizens' associations that enhance the life of residents. Many of these organizations work collaboratively with each other and other important agencies, such as Public Health of Seattle/King County, Department of Social and Health Services, and community health clinics. According to a recent health scan<sup>11</sup> of the WC/BP community, many organizations and service providers attempt to recruit employees that are representative of the area's rich diversity. WC/BP residents have a strong neighborhood identity and local providers are dedicated to serving the community.

The rich diversity and strong sense of community is a solid foundation supporting the lives of WC/BP families and children. This foundation provides the necessary infrastructure to overcome the social and economic challenges that many WC/BP families and children face. The majority of families are working, but over one-third live below 200 percent of the federal poverty line (FPL).<sup>12</sup> Recent community data suggest that while incomes have grown for the wealthiest households in recent years, they have stagnated or declined for lower- and middle-income households. Fewer employers are offering benefits that pay a livable wage to support children and family members. On a variety of health and social indicators, many WC/BP residents are struggling – families continue to experience a higher rate of food insecurity, lack of livable wage jobs, violent crime, motor vehicle deaths, infant mortality, adult substance use, restricted activity due to poor health, and a lack of health insurance coverage compared to King County as a whole.<sup>13</sup>

## **Profile of Families with Young Children (Age Birth to 5)**

Such an environment poses significant risks to the overall well-being of young children. Data from the *Making Connections Cross-Site Survey* suggest that WC/BP families with young children face economic struggles more profound than the general population (Table 1). Nearly three-quarters (73 percent) of parents with young children are low income (less than 200 percent FPL) even though the majority are working (91 percent); one in five couldn't pay their mortgage, rent, or utility in the last year (26 percent); one in five could not pay for food in the last year (27 percent); and one in six (17 percent) postponed buying medications because they could not afford them. Nearly two-thirds (63 percent) of parents have a high school diploma or less, making it challenging to find livable wage jobs.

The economic instability of families with young children in WC/BP highlights the importance of high quality ECE opportunities for this community. Working adults – particularly single parents – need access to child care so they maintain employment and eligibility for public assistance programs, such as Temporary Assistance for Needy Families (TANF). In addition, high quality ECE in all settings is critical to the social, emotional, and cognitive development of children. Low to moderate income families, however, face significant obstacles in accessing high quality ECE for their children. This report highlights how families in WC/BP use child care and some of the challenges they face in accessing high quality ECE.

**Table 1**  
**Economic and Social Characteristics of Families with Young Children (Birth to 5)**  
**White Center/Boulevard Park 2006**

<b>PARENT RACE/ETHNICITY</b>	<b>Percent</b>
Non-Hispanic	54
<i>White</i>	25
<i>Black</i>	13
<i>Asian</i>	12
<i>PI/Other</i>	5
Hispanic	46
<i>Mexican</i>	36
<i>Other Central or South American</i>	9
<b>CITIZENSHIP AND IMMIGRATION</b>	
Foreign-Born	62
<i>Not a US Citizen</i>	43
U.S.-Born	38
<b>POVERTY</b>	
Less than 100%FPL	44
Less than 200% FPL	73
<b>PARENT EMPLOYMENT</b>	
All Parents Employed Full-Time	43
At Least One Parent Employed Part-Time	48
Not Employed	10
<b>PARENT EDUCATION</b>	
Less than High School	33
High School	30
Some College	25
College Degree or Higher	11
<b>HOUSEHOLD RISK FACTORS IN LAST YEAR</b>	
Didn't Pay Mortgage, Rent, or Utility	26
Couldn't Pay For Food	27
Postponed Prescription Drugs	17

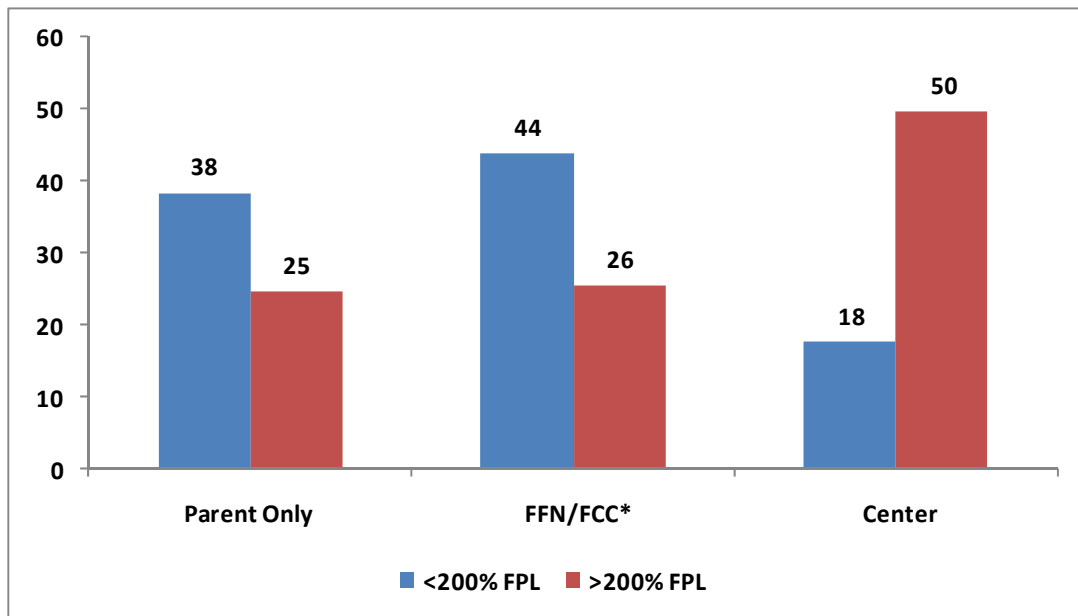
*Source: Adams, Gina and Leah Hendey (2007) Making Connections Child Care Brief: Child Care Patterns in White Center. The Urban Institute, April 2007.*

Note: Columns may not add up to 100% due to rounding.

## ECE UTILIZATION PATTERNS FOR WHITE CENTER/BOULEVARD PARK CHILDREN

Patterns of ECE utilization vary for families at different income levels. Nationally, young children with low income working parents are slightly less likely to be in ECE settings than the general population. They are also less likely to be in center care and more likely to be in parent-only care or a home-based care setting (Family, Friend, and Neighbor (FFN), Family Child Care (FCC)) than their higher income counterparts.<sup>14</sup> Children in WC/BP parallel national trends – 18 percent of children age birth to five are in households with incomes below 200 percent FPL are in center care, compared to 50 percent of children in households with incomes over 200 percent FPL (Chart 1).

**Chart 1**  
**Child Care Utilization (0 to 5) by Family Income Level**  
**White Center/Boulevard Park 2006**



Source: Adams, Gina and Leah Hendey (2007) *Making Connections Child Care Brief: Child Care Patterns in White Center*. The Urban Institute, April 2007.

\*Only 16 cases in the survey were identified as FCC.

However, it is clear that parents of all income levels use each type of ECE setting to care for their children. **Parents' utilization of a variety of ECE settings highlights the need to address quality in all of these settings to maximize child well-being and outcomes.**

National research suggests that ECE quality across all types of settings is medium to low quality, regardless of family income.<sup>14, 15</sup> However, some research also suggests that the quality of ECE arrangements accessed by low income families is cause for concern. For example, while families from all income levels use – and often prefer – FFN care for children (especially infants

and toddlers), lower income families are somewhat more likely to use FFN than their higher income counterparts. Little data exist evaluating the quality of FFN settings, but the majority of existing studies suggest that this type of care is lower quality than other settings.<sup>16, 17</sup> The informal nature of FFN care often disconnects providers from the child care agencies in their communities.<sup>18</sup> Quality may be compromised in FFN settings because providers may not be accessing the training and technical assistance available to more formal arrangements. However, most studies evaluating quality in FFN settings do not account for other important factors, such as cultural continuity between caregivers and parents, the quality of caregiver-child relationships, and the benefits that FFN care offers to parents beyond care, such as emotional support and trust.<sup>14</sup> Therefore, the evaluation of quality of care in FFN settings may be misrepresented in current research.

In addition, center care and FCC arrangements do not necessarily translate into higher quality for low income children. Center-based and FCC for subsidized children has consistently been found to be lower quality than those attended by non-subsidized children.<sup>15</sup> Even Head Start and state subsidized pre-kindergarten programs fall below the “good” rating on national quality rankings.<sup>14</sup>

**In sum, low income families often lack access to high quality child care arrangements no matter which setting they choose.** Because low income families are disproportionately of color and/or recent immigrants, children in these groups are most at-risk for the negative outcomes associated with low quality ECE.

The ECE utilization patterns of low income families are influenced by access and also family preferences and constraints. In addition to family income, ECE patterns are affected by a child’s age and characteristics of their parent(s), including race/ethnicity, employment status, family structure, cultural background, and preferences for different ECE arrangements. It is also important to note that families often use multiple ECE settings during the day to care for their children – national and state data have consistently shown that about 20 percent of children are in more than one care arrangement in a typical week.<sup>19, 20</sup>

While parents use all ECE settings to care for their children, each setting does disproportionately serve children with specific characteristics. Table 2 summarizes each type of child care setting for WC/BP and the characteristics of children who use them.

**Table 2**  
**Child Care Utilization Patterns by Characteristics of Children**  
**White Center/Boulevard Park 2006**

	Parent Only Care	Home-Based Care (FFN/FCC)*	Center Care
<b>Child Age</b>	%	%	%
0-2	51	43	6
3-5	16	33	51
<b>Race/Ethnicity</b>			
White (Non-Hispanic)	24	49	27
Black (Non-Hispanic)	25	21	54
Asian (Non-Hispanic)	20	65	15
PI/Other (Non-Hispanic)	29	51	20
Hispanic (of any race)	44	29	28
<i>Mexican</i>	42	34	25
<i>Other Central or South American</i>	52	10	39
<b>Parent Education</b>			
Less than High School	46	41	13
High School Diploma	24	47	29
Some College Experience	33	34	34
College Graduate or Higher	18	19	63
<b>Family Income</b>			
Less than 200% FPL	38	44	18
More than 200% FPL	25	26	50
<b>Parent Employment</b>			
All Parents Employed Full-Time	10	59	31
At Least One Parent Employed Part-Time	50	22	28
Not Employed	50	25	24
<b>Nativity</b>			
U.S.-Born	17	47	36
Foreign-Born	42	33	24

Source: Adams, Gina and Leah Hendey (2007) *Making Connections Child Care Brief: Child Care Patterns in White Center. The Urban Institute, April 2007.*

\*Only 16 cases in the data set were identified as FCC. Therefore, the majority of the analysis for Home-Based settings is for children in FFN care arrangements.

Note: Columns may not add up to 100% due to rounding.

### **Parent-Only Care**

A substantial proportion (51 percent) of infants and toddlers (age birth to 2) in WC/BP are in parent-only care. While children are more likely to enter center (51 percent) or a home-based care arrangement (33 percent) as they get older, one in six (16 percent) 3 to 5 year-olds is cared for solely by their parents.

Many parents prefer to stay home with children, particularly when they are very young. Important differences exist for WC/BP children who are predominantly cared for by parents compared to other types of care. Compared to children in center care, for example, children in parent-only care are more likely to be low income, have a parent without a high school or college degree, have a parent who is not working or working part-time, and have a parent who was born outside of the U.S. and/or is not a citizen. In addition, children in parent-only care are less likely to be read to by a family member and have a parent that does not know any of their friends (data not shown).

### **Home-Based Care (FFN/FCC\*)**

*(\* Only 16 cases in the Making Connections Cross-Site Survey data were identified as FCC. Therefore, the majority of the analysis for Home-Based Care settings is for children in FFN care arrangements.)*

Consistent with national trends, a high proportion (43 percent) of infants and toddlers in WC/BP are cared for in a home-based care setting. Most families prefer to use FFN care for infants and toddlers over other types of care. Reasons include placing children in the care of someone they know and trust as opposed to a stranger;<sup>21-23</sup> having someone who shares the same cultural, values, and language as the family;<sup>24</sup> and the flexibility that FFN care offers compared to more formal care arrangements.<sup>21</sup> The majority of FFN care occurs on evenings and weekends, times when more formal care arrangements are typically not available.<sup>16, 22</sup>

Even as children age, a large proportion of WC/BP families rely on FFN arrangements – one-third (33 percent) of 3 to 5 year-olds in WC/BP are cared for in this setting. Home-based caregivers disproportionately serve children who are low income, white or Asian, have all parents working full-time, and do not have a parent with a college degree. Similar to children cared for exclusively by parents, children in home-based care arrangements are less likely to be read to by a family member and have a parent that does not know any of their friends compared to children in center care (data not shown).

### **Center Care**

Consistent with national trends, young children ages 3 to 5 in WC/BP are more likely to be cared for in centers. Half (51 percent) of 3 to 5 year-olds are cared for in centers compared to just six percent of infants and toddlers.

Slightly over half (54 percent) of African-American children in WC/BP use center care. Center care also disproportionately serves children who have a parent with a college degree. Children in center care are more likely than those in other care arrangements to be read to and have a parent that knows some of their friends (data not shown). The propensity for African-American families and those with higher education to utilize center care is consistent with national research. Center care utilization is typically higher among families with a non-employed mother who qualifies for subsidies as well as more affluent families with a non-employed mother.<sup>24</sup>

## **BARRIERS TO ACCESSING HIGH QUALITY ECE FOR LOW INCOME FAMILIES IN WC/BP**

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**Despite the tendency of some child care settings to disproportionately serve certain types of children, children from all backgrounds are found in each type of setting.** Again, this is a reflection of a complex array of factors, including age of child, parent characteristics and preferences. Low and moderate income families, however, face significant obstacles in accessing high quality ECE for their children.

The following discussion addresses the complexity and the interrelated influences of family income, race, ethnicity, and culture in exploring affordability and access barriers to high quality ECE. We emphasize the barriers immigrant families face, as these make up the majority of families with young children (62 percent) in WC/BP.

### **Affordability**

While FFN care is the predominant form of care for infants and toddlers, a substantial proportion of families in WC/BP rely on center care for preschool age children in general. Studies suggest that low income children have the most to gain from placement in more formal settings.<sup>17</sup> Furthermore, if access to such settings was affordable and amenable to parents' need and preferences, the ECE system could serve as a mechanism for families to achieve economic security as it would provide parents with more opportunities to participate in the labor force.

The high price of center-based care, coupled with limited access to child care subsidies, represent significant obstacles for low-income families. Table 3 lists 2006 prices per child for full-time/full-year center care in Washington State. Full time/full-year center care for an infant costs 20 percent (\$12,896) of median household income per child. Prices decrease significantly when children enter school, but care for preschool children still consumes a significant portion of household median income. Furthermore, 30 percent of children age birth to five has a

younger sibling. Thus, it is likely that a substantial proportion of families are paying a much higher percent of their income for child care than is indicated in Table 3.<sup>25</sup>

**Table 3**  
**Median Child Care Prices per Child by Age of Child**  
**King County 2006**

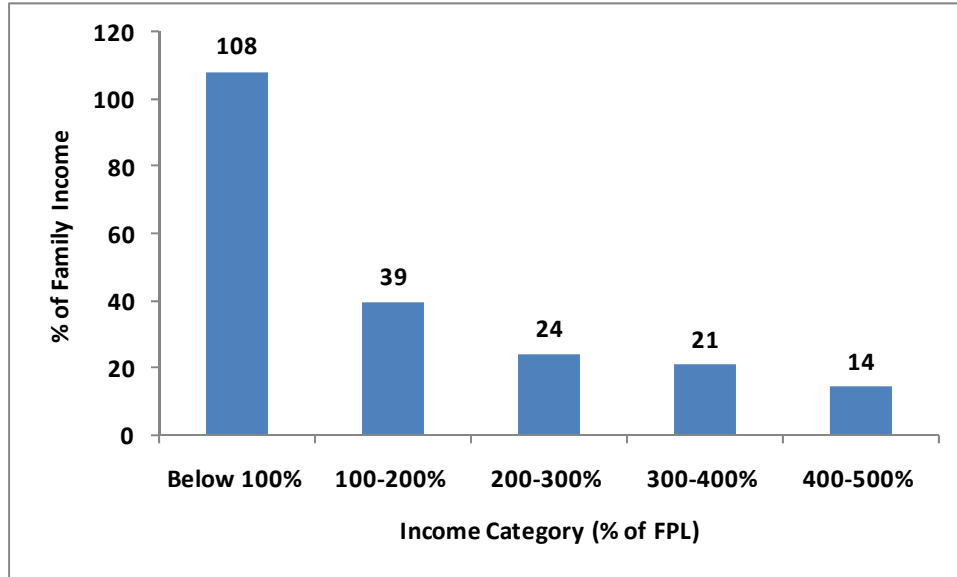
Centers	2006 Median Annual Price Per Child	Percent of 2006 Median Household Income
Infant	\$12,896	20
Toddler	\$10,452	16
Preschool	\$8,996	14
School Age	\$4,888	7

*Source: Washington State Child Care Resource & Referral Network (2007) Child Care in King County ([http://www.childcare.org/community/child-care-kingcounty-report\\_07.pdf](http://www.childcare.org/community/child-care-kingcounty-report_07.pdf))*

These prices will likely increase as a result of state efforts to improve quality in ECE settings. Washington State is currently piloting a Quality Rating Improvement System (QRIS) in several communities across the state, including White Center. In 2007, the Human Services Policy Center conducted an affordability analysis<sup>5</sup> for low income families based on different levels of quality specified by the Early Learning Council – the early learning advisory group to Governor Gregoire’s *Washington Learns* initiative. Chart 2 illustrates the cost to King County families of paying for center care that meets those standards if they did not receive financial assistance. For the lowest income families (incomes below 100 percent FPL), affording child care is impossible without assistance – it would consume all of their income. Even for moderate (100-200 percent FPL) and middle income (200-300 percent FPL) families, child care would consume a significant proportion of their budget if quality were increased to meet the standards recommended to the Early Learning Council (39 percent and 24 percent, respectively).

While quality standards are an essential component to ensure a high quality early learning system, significant disparities will result if subsidies do not keep pace with price increases. And if prices do not increase, providers will not be able to meet the higher standards, especially regarding lower child-adult ratios and staff qualifications. As a significant proportion (73 percent) of WC/BP families with young children fall below 200 percent FPL, access to subsidies is especially important.

**Chart 2**  
**Cost of Full-time/Full-Year High Quality Center Care as a Percent of Income**  
**by Family Income Category (FPL)**  
**King County**



Source: Brandon, R, E Maher, and J Scarpa, (2008) *Accountable investments in early learning to improve student performance in Washington*. Human Services Policy Center: University of Washington

Even when subsidies are available, bureaucratic barriers exist that reduce the likelihood of immigrant families accessing public benefits. Some families may fear utilizing public programs due to citizenship concerns and fear of being reported to immigration authorities.<sup>26, 27</sup> In addition, enrolling in programs can be a confusing and tedious process, both in terms of the application process and interacting with the agencies administering assistance.<sup>28</sup> Families with limited English proficiency are about half as likely to receive financial assistance for child care.<sup>29-32</sup>

The high cost of early care, coupled with the challenges of utilizing care may explain why low income and immigrant parents are more likely to opt for FFN care than center-based care. Low income immigrant children – particularly children from Asian, Mexican, and other Hispanic families – are less likely to receive center-based care than children in non-immigrant families.<sup>33</sup> Latino families are particularly reluctant to use center-based child care for infants and toddlers due to preferences for relatives to provide care for their children.<sup>29</sup>

## Access

**Lack of licensed slots.** Most communities face an inadequate supply of child care, particularly for infants and toddlers. The supply of child care in a neighborhood is affected by the wealth of a neighborhood, maternal employment and education levels, and the presence of advocacy organizations that lobby on behalf of residents.<sup>34</sup>

In King County, child care availability is on the decline. Over the last five years, the overall number of licensed facilities has decreased 13 percent. King County has lost 2,218 potential child care slots since 2002.<sup>35</sup> While data on the availability of slots is not available for WC/BP specifically, vacancies are generally lacking in lower income neighborhoods, oftentimes where families of color and immigrants are concentrated.

**Lack of flexible options to accommodate non-traditional work schedules.** Parents working either full time or during alternative hours (e.g., swing shift, weekends) also experience difficulties finding formal care arrangements. Low income families are disproportionately more likely to be employed in non-traditional jobs with alternative schedules. In King County, the majority of providers offer full- and part-time care during weekdays only. Less than one-third (29 percent) regularly offer care past 6:30 PM, overnight, or on the weekend. Out of all providers who offer care during non-traditional hours, most offer nonstandard care during the evenings (14 percent), fewer offer weekends (9 percent) or overnight (6 percent).<sup>35</sup>

**Transportation.** Geographic barriers also pose challenges for low income and immigrant families. National research indicates that a large number of early childhood programs are not able to provide transportation for families. Thus, programs need to provide transportation or be within walking distance for many families to use them.<sup>27</sup>

## Cultural Considerations

**Knowledge of community resources.** Research suggests that immigrant populations are less likely than U.S.-born citizens to be knowledgeable about health and community resources.<sup>36</sup> Immigrant parents' awareness of and participation in available child care and early education programs is shaped by multiple factors, including the circumstance and period of residence in the U.S., their country of origin, their experiences with child care and early education in their home countries, their own education level, and their proficiency in English.<sup>27</sup> Furthermore, in some countries no formal network of paid child care providers exists and most of the community participates in child rearing; this may contribute to immigrants' preference of using relatives for care. The strong families, communities, and social networks that emerge from these preferences can be an asset to many immigrant communities.

Research also suggests that a number of immigrant families – particularly those new to the U.S. – make the false assumption that they do not qualify for public programs, including Head Start and child care subsidies. Immigrant families are less likely to receive benefits for a range of reasons, including legitimate legal restrictions, families’ confusion over legal restrictions or eligibility rules, and their fear of participation in the public system. Although most state-funded early education programs do not have restrictions based on immigration status, some families and providers incorrectly believe that immigrants’ children are not eligible for these programs.<sup>27</sup>

***Lack of culturally competent and linguistically accessible programs.*** In WC/BP, 97 percent of immigrant families with children under five speak a language other than English at home, highlighting the critical need for culturally competent and linguistically accessible programs. A minimum criterion of appropriate curriculum is that it should be supportive of children’s home culture and language.<sup>37</sup> Lack of cultural competence and linguistically appropriate programs is problematic because young children need support in the development both of their home language skills and their English skills.<sup>38</sup> Furthermore, teachers’ relationships with children of immigrants may be strengthened by a common culture or language.<sup>39</sup> Only a small number of early learning programs have standards or curricula that explicitly address the needs and experiences of young children of immigrants and English language learners.<sup>27</sup>

Research indicates that providers have limited access to learning opportunities that address issues of cultural competence and second-language acquisition. For example, a national survey of state early childhood program administrators identified the lack of bilingual staff and training for professionals to be among the most pressing challenges in serving Latino children and families.<sup>40</sup> In addition, a U.S. Health and Human Services report on the issue of cultural and linguistic diversity in Head Start found that many communities reported difficulty in recruiting and enrolling families who speak languages other than English. These programs cited challenges in finding interpreters of specific languages to help with recruitment. Other difficulties in some regions were the recruitment of well-trained bilingual staff whose linguistic heritage was represented among students in a program.<sup>41</sup>

The limited English proficiency of many immigrants may also affect awareness of child care options. Both culturally competent parent involvement and program materials are key elements of responsive child care settings. Difficulty speaking English makes it challenging to communicate with staff in a child care setting. Spanish-speaking parents are less likely than those speaking English to report receiving certain forms of communication from schools, such as notes or e-mails about the student.<sup>42</sup> Head Start Programs also report communication problems between staff and parents who do not speak English.<sup>41</sup>

Another critical step toward improving cultural competence is increasing the diversity of the child care workforce. Parents often prefer child care providers who share a common culture or language similar to their own. National data indicate that the distribution of licensed child care teachers is roughly the same as that of young children – an estimated 65 percent of the U.S. child care workforce is White, 16 percent is African-American, 17 percent is Hispanic, and 3 percent is Asian.<sup>43</sup> However, current efforts to improve quality by raising the education qualifications of the child care workforce threaten diversity. Imposing such standards without addressing disparities in access to higher education would replicate the cultural mismatch experienced in K-12.<sup>25</sup>

## **POLICY CONSIDERATIONS FOR LOW INCOME FAMILIES**

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If the goal of a high quality ECE system is to prepare all children to be ready for and successful in school, then it is critical that such a system address the needs of low income families, those of color, and immigrants. Furthermore, any policy recommendations should be evaluated through a racial equity and cultural lens to ensure that state policy: (1) is necessary and sufficient to close disparities in accessing high quality ECE, (2) adequately addresses the preferences of families for different ECE settings, and (3) is evaluated for any unintended consequences that may disproportionately impact vulnerable communities.

The diversity of WC/BP challenges us to develop policies that will best suit the needs of an increasingly diverse population. While WC/BP is a small neighborhood in Washington, it is a sign of things to come – the population of the United States and Washington is rapidly diversifying. We will increasingly be challenged to meet the needs of diverse populations and it is in the long-term best interest for our children, families, and communities to invest in high quality early learning opportunities for all children. Below we discuss key areas for policymakers to consider as they work toward developing a high quality ECE system in Washington State.

### **Addressing Affordability & Quality Issues**

- **Parents’ utilization of a variety of ECE settings highlights the need to address quality in all of these settings to maximize child well-being and outcomes. State policy should support the financing and quality of care in all settings.** Parental choice of child care settings is influenced by a wide array of factors – some related to structural factors (e.g., affordability, availability) and others related to individual preferences (e.g., age of child, cultural background of provider). A comprehensive, high quality ECE system should seek to remove affordability and structural barriers to accessing high quality ECE while respecting families’ preferences for care.

- **Eligibility for subsidies should be re-evaluated for their impact on low income communities.** Families often face a “catch-22” when trying to secure child care – subsidies are often tied to work programs, but they cannot afford care until they find work. Restrictions on eligibility for benefits should be loosened to provide a “grace period” in which parents can secure employment *and* care for their children.
- **The QRIS system being piloted by the Department of Early Learning should be evaluated for unintended consequences on low income populations.** The implementation of Washington’s QRIS has the potential to raise prices for low income families if standards are raised and adequate subsidies are not provided. As WC/BP is a predominantly low income neighborhood within the high-wage labor market of King County, the affordability problems of accessing high quality ECE could be excessive unless financial assistance is extended to moderate and middle income families, and reimbursement rates are raised to reflect the cost to providers of meeting high quality standards.

### Addressing Access Issues

- **An undersupply of licensed child care slots impedes low income families’ access to high quality ECE.** An assessment of why there is an undersupply of licensed care slots should also be conducted. While Washington State has conducted several studies of ECE demand and utilization by parents, there has been less analysis of the nature of supply. We need to understand what factors constrain the availability of high quality ECE in different communities, and what policies could effectively address the problem. For example, if undersupply is due to a lack of capital for building new facilities, accessing the Capital Fund may be a possible solution. If undersupply is related to attracting qualified staff to low income communities, special workforce incentives may be an appropriate strategy. It is also essential that Washington continues to move beyond the number of slots to assessing the quality of ECE that is being offered. Several states already assess quality for all or most of their licensed providers and many are implementing quality rating systems statewide.
- **A lack of care during non-traditional work hours is a significant barrier for low income families.** This is a challenging issue that must be analyzed carefully in the context of the community. Many low income parents must work evenings and weekends to support their families. While licensed ECE facilities typically do not operate during these hours, it is not clear what type of ECE parents’ desire for these hours or what constitutes high quality. If parents are working evenings and nights, they may prefer to have their children at a relative’s home where they can go to sleep and be picked up in the morning without being awakened at night to go home. However, for weekends, they may desire a mixture of different activities, including those with family. Some aspects of quality are the same, regardless of time of day or week, such as encouraging children’s

inquisitiveness, handling transitions and responding to children's emotional stresses. However, dealing with transition to a night's sleep or the disruption of being picked up after going to sleep, may require different skills. The types of desirable activities may be different on weekends if the children are in an enriching or educationally oriented setting during the week.

### **Addressing Cultural Issues**

- **Low income families often lack access to high quality child care arrangements regardless of the setting they choose. State policy should address the disparities in quality for low income families across all settings and use a family strengthening approach when implementing policy for FFN caregivers.** In addition, how we define and evaluate quality in each ECE setting needs to be addressed with great care. Methods and measures used for licensed care arrangements are not necessarily applicable for unlicensed care arrangements. For example, most FFN care providers are in a familial rather than professional relationship with the children in their care. A family supportive framework, as opposed to a professional development framework, is a more appropriate approach to policy for these caregivers. In addition, most studies evaluating quality in FFN settings do not account for important factors, such as cultural continuity between caregivers and parents, the quality of caregiver-child relationships, and the benefits that FFN care offers to parents beyond care, such as emotional support and trust.<sup>14</sup> Developing culturally competent evaluation tools and ensuring diversity among evaluators are critical to proper evaluation in these settings.
- **All ECE policies should be evaluated for their impact on families of color and immigrants, who are disproportionately represented among low income groups and at greater risk for the negative outcomes associated with low quality ECE.** Using a racial equity and cultural lens to analyze policy recommendations is critical to ensuring that state policy is necessary and sufficient to eliminating disparities in access to high quality ECE and ensuring that all of Washington's children are prepared to succeed in school.
- **In order to build culturally competent policies that are necessary and sufficient to close disparities, Washington needs to develop state- and local-level data systems that collect detailed information by race and ethnicity.** State-level data systems lack quality information on detailed racial and ethnic categories, especially for immigrant and refugee populations. Our understanding of ECE, for example, is hindered by a lack of information on the diversity of ECE staff and caregivers, child developmental outcomes by income and by racial/ethnic category, and a comprehensive picture of utilization patterns among different racial/ethnic groups. State and local data systems should receive additional funding to include large enough oversamples of diverse racial/ethnic groups so that high-quality analyses can be conducted and appropriate policies can be developed.

## CONCLUSION

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High quality early learning experiences are critical to the social, emotional, and cognitive development of young children and for their subsequent success in school. For low income families in WC/BP, access to affordable, accessible, and culturally appropriate high quality ECE opportunities across the range of child care options is lacking. The racial, ethnic, and cultural diversity of this neighborhood challenges us to develop policies that will best suit the needs of an increasingly diverse population both within WC/BP and across Washington State.

While children with particular risk factors are more likely to be found in certain types of care compared to others, children at risk for not entering school prepared to succeed are found in each type of child care setting in WC/BP. In order to develop a comprehensive ECE system that maximizes a child's opportunities for high quality early learning and respect of parental choice, ECE policy goals should focus on ensuring quality in every setting – center care, home-based care, and parent-only care. This will require a careful look at how quality is assessed in each setting, as each ECE environment has a different set of factors that impact the social, emotional, and cognitive development of children. Furthermore, culturally appropriate benchmarks need to be in place to ensure that children from diverse backgrounds are receiving care that is supportive of their racial/ethnic background, home culture, and language.

But quality is only one aspect of a comprehensive ECE system. As Washington moves toward full implementation of a QRIS, state policies need to adequately address how increases in quality will affect affordability for low income families. State subsidies will need to be evaluated for their ability to help families' access higher quality programs as a result of the QRIS implementation. In addition, access issues – such as increasing the number of licensed child care slots in centers, offering programs that accommodate non-traditional work hours (e.g., evenings and weekends), and providing programs in convenient locations so that families' have easy geographic access to care are also critical to a comprehensive ECE system that suits the needs of low income families.

Research indicates that investments in early learning are several times the cost, especially for low income children. The data on WC/BP contributes to the knowledge base that state and local policymakers, community-based organizations, businesses, and advocacy groups need to further their early learning efforts. The current policy momentum around early learning in Washington suggests that the state is a ripe environment for the implementation of a high quality ECE system that supports the needs of all children. As policies are being developed, the data on ECE utilization in WC/BP and the factors affecting families' access to care should be carefully considered for its implications statewide.

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