ED 161 559   PS 010 224

ABSTRACT

      This paper examines recent empirical evidence and
policy analyses of family-oriented research projects funded by ACYF
in order to identify general principles for public policies affecting
families with young children. An initial definition of the policy
problem focuses on the relationship between families as private
systems that enhance human development and bureaucratic structures
intended to maintain public good. Two levels of policy implications
are identified: policy principles or goals and program options or
choices for implementing principles. A review of the Administration
for Children, Youth, and Families (ACYF) funded research projects on
child welfare programs, child abuse and neglect services, day care
regulation, child development programs, and youth development
services provides a major source of empirical information for the
policy principles and options listed. These policy principles and
options are categorized under (1) preschool child care (care of
preschool children by adults other than the children's primary
caregiver), (2) family participation (aspects of parent or sibling
involvement in policies and programs aimed at strengthening their
child rearing capacities), (3) work place issues (allocation of
adult's time between child caring and market-place activities), and
(4) delivery mechanisms (strategies for implementing federal policies
affecting family life and child development). (CM)

Selected Empirical Research and Policy Analysis on Child Care and Parent Education: Principles for Public Policy

Bruce L. Mallory

Center for Community Studies
George Peabody College for Teachers

and

Center for the Study of Families and Children
Institute for Public Policy Studies
Vanderbilt University

October 1, 1978

Nashville, Tennessee

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As of now, the simple translation of current research
data into policies is impossible. Scientific evidence is
artificial, descriptive, and probabilistic; policy is real,
causative, and affects individuals.

Alison Clarke-Stewart (1977)

The raison d'etre of the Center for the Study of Families and Children
(CSFC) is to make a difference in the formulation of public policies that
affect families raising children within a complex and dynamic social milieu.
The Center operates within a particular social and temporal context that
influences how we define the problem and how we frame the solutions. We cannot
claim objective detachment from the social and economic forces that influence
families' lives. We are members of families, and each of us is in the process
of shaping our own roles as parents, care-givers, mates, and workers. We bring
both scientific and personal predispositions to our work that ultimately will
determine which problems we choose to address and which solutions we find most
appealing. As individuals and as a Center, we operate within a network of
ideas, values, and events that affect how we go about trying to make a difference.

Definition of the Policy Problem

For almost fifty years, the nation has been committed to collective
action to promote both the public and private good. The role and authority
of the federal government has been expanding rapidly as it has sought in-
creasingly to assure that basic life needs are met for all citizens and that
public and private endeavors treat all citizens equitably. The government
has moved from a laissez-faire market approach to a centralized, bureaucratized

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command-and control strategy (Schultze, 1977). Debate centers now not on _whether_ the government should provide collective social support, but to what _degree_ and in what _form_. What is the proper balance of authority between the individual and the state? How do the needs of families with young children influence that balance? The emergence of these difficult questions in the public arena signifies an uncertainty concerning the equilibrium between liberal-pluralistic-progressive social change strategies that lead to incremental change characterized as "progressive status quoism" (Farber & Lewi , 1972) and more radical, long-term efforts that alter or replace existing social institutions.

Participants in this debate come from many quarters. Among the more strident voices (and more successful in being heard) are those that now call for reduced collective action. The neophytic taxpayers' revolt, the anti-ERA Eagle Forum, the right-to-life groups who oppose public funding of abortion, the conservative religious sects that waved red herrings at federal child care initiatives in 1971 and 1975, all indicate a strong skepticism after two decades of increased social action and litigation on behalf of those interests that are divergent from the white, middle-class way of life. As society seeks to strike a balance between the interests of pluralistic factions, many argue that we are losing the essential threads of commonality and mutual commitment that must hold the nation together. Others argue that the strength of the nation rests in its cultural diversity and in its concern for the human and civil rights of those not in the Anglo mainstream.

How can the Center respond to the issues which arise in this conflicted social context? How can we arrive at dynamic, responsive solutions that are workable and acceptable to the myriad interests in America? As scholars and scientists, we are accustomed to seeking answers empirically--to see what works and what does not work; what is true and what is not true. Yet as we pursue

answers in a rational, logical manner, we have trouble. The problems we are addressing do not seem to fit the linear, positivistic science in which we were trained. This is especially clear when we attempt to design policies that will strengthen, enable, or empower families.

Central to this dilemma is the relationship between families as private systems that enhance human development and bureaucratic structures intended to maintain the public good. The recent project carried out by the CSFC and the Center for Community Studies of George Peabody College (Newbrough, Dokecki, Dunlop, Hogge, & Simpkins, 1978) asked the essential question: What relationship between family and bureaucracy can insure that families receive services they need while their natural capacities to perform critical functions for themselves are preserved? This question identifies the basic tension between families and bureaucracies: Families are small, idiosyncratic systems whose primary function is to nurture, protect, and sustain their members, without regard to the nature or scope of individual needs. Bureaucracies, on the other hand, are large, nomothetic organizations seeking to maintain their existence through rigid rule structures, hierarchical decision-making, and the delineation of specific roles and realms of activity. Bureaucratic institutions are by their nature limited in the kinds of problems and needs to which they can respond. Families, however, do not enjoy the luxury of rejecting some problems for attention while addressing others. Families must always respond to the often unpredictable and highly variable needs of growing individuals. Ignoring a problem will not make it go away. The bureaucratic response that, "We don't deal with those problems (or people, or places), look somewhere else for help," is out of the range of possibilities for families. This difference between families and bureaucracies is at the core of the problem of family policy.

This dilemna also forces us to identify basic value positions that will guide subsequent analyses. According to Moroney's (1977) conception of the family as the primary service delivery system, bureaucratic agencies should strive to support families, enabling them to be cohesive systems that can provide a greater range of responses and options to individuals than any single- or multi-purpose social service program. As needs are identified that demand greater resources or capabilities than families can muster, services should be available to supplement families' efforts. Only in rare cases of extreme neglect or harm should bureaucratic systems substitute for family functions. The family should always be the first line of response in helping individuals develop and cope. These values are shared by many persons, and provide a basis for further analysis of scientific and political rationales for a public role in family development.

In the end, the answers to our questions will evolve from a blending of empirical fact developed in scientific research and social values that emerge from personal ethical positions. Yet the blend is neither simple nor obvious. As Clarke-Stewart (1977) warned in the statement that opens this paper, simple translation of research into policy is not possible. Social science research can tell us about general behavioral patterns of aggregates of people. Yet policies, although aimed at aggregates, affect individuals. And policies are not all that affects individuals. The entire social ecology influences the way in which individuals develop. Public policy is one significant but small component of that ecology.

Given this caveat, the following discussion examines recent empirical evidence and policy analyses from a variety of sources in order to begin to identify some general principles for public policies affecting families with young children. The analysis is inductive, and it is infused with the writer's

own value biases. The initial purpose of this analysis was to extend the Newbrough et al. (1978) review of family research projects funded by the Administration for Children, Youth, and Families (ACYF). That review was an evaluation of project findings leading to the delineation of an agenda for ACYF's future research and development efforts. The Newbrough review did not include specific policy and program implications of the research findings. The present paper began as an attempt to identify those implications. However, it soon became clear that the specific focus of the questions asked in the projects, and problems with incomplete reports, would preclude this approach. Therefore, we have attempted to provide a broader picture based on both ACYF projects and other empirical and political analyses.

Many of the sources reviewed for this paper are highly interdependent in the sense that a relatively small cadre of scientists and policy analysts have contributed to a large percentage of the total number of significant works now available. Many of the same individuals have contributed to several of the research projects, panels, and commissions cited below. The appearance of a consensus may be stronger than the reality.

Definition of policy terms

The research and policy analyses reviewed here have policy implications at least at two levels. At the most general, inclusive, and normative level, we can identify policy principles that guide the goals of policies. This level is similar to what Clarke-Stewart (1977) calls "propositions." At a more specific level, subordinate to principles, are program options that evolve from the general principles. The program options represent potential ways to implement and realize policy principles. Although there is a range of

options that could meet particular goals, this paper has sought to be more prescriptive than all-inclusive. It is hoped that readers will use the principles and options listed below as a point of departure and argument to generate alternative means for achieving these principles or goals.

Principles refer to the goals of public policy--the desired state toward which policies will bring us if we adhere to them. Rein (1976) calls these "values" because they involve normative statements about what policy ought to be and how society should look if given policies are implemented. In the terminology of Stufflebeam et al. (1971), principles are meaningful and identifiable only in the context and the products of policy. Principles must be rooted in context because policies seek to change or maintain the existing milieu within which families care for their children. Context "describes the values and goals of the system" (p. 218) and thus is an overarching concept. Products, or the specific outcomes of policies, are hypothetical endstates that are viewed as desirable. To use Vickers' (1968) terms, principles are "functional relations" that describe the "optimization" of outcomes. That is, principles are guidelines to help policy-makers design mechanisms that will enable families to move toward desired goals.

Options imply choices for implementing principles in a variety of ways. Any principle can be operationalized through an infinite number of strategies. Frequently, courts or legislatures evolve principles for social action and then recommend or mandate generally the manner in which those principles are to be realized. The strategy for implementation by an executive agency may represent only one possible approach among many, and the choice of any option will be influenced by value considerations, political feasibility, cost, level of equity, intended outcome, or whateve coiterion is most valued. Options are a link

between general principles and specific program designs. Once a principle is agreed upon, the availability of options for different localities and different population groups may enable the final program design to be congruent with specific and variant local needs.

Program options address means rather than ends. They are metabolic processes, not functional products (Vickers, 1968). Rather than optimizing (an end-state, value-based concept) program options seek to balance resources with outcomes (a means-oriented endeavor). This process is concerned with the allocation of fixed resources to facilitate the implementation of a policy. This is the most local, observable, and measurable dimension of the policy-making process. It is also perhaps the dimension that most directly affects families and children.

In one sense, what follows is a beginning reply to Steiner's (1976) challenge to develop a rationale for a public role in the care of young children. In the policy implications that are presented, it has been possible to identify some broad principles for social action. Empirical research on children and families, although often inconclusive, fragmented, and fraught with methodological problems, has provided a consensus on some basic principles during the past twenty years. In some areas, it is also possible to delineate program options that are derived from or are congruent with existing research and analysis. However, when we attempt to draw implications for specific program design, we are on thin ice. Because of inconsistency, lack of statistical significance, the use of micro-variables, and the confounding effects of ecological conditions, the empirical research does not prescribe program design with much confidence. Nevertheless, experience has demonstrated the success of some program strategies and components. Where there is a consensus in the literature on program design, suggestions are given.

However, the current state of knowledge often limits us to painting broad strokes rather than filling in the fine details. This circumstance may have positive aspects if flexibility is permitted in designing and implementing programs at the local level and, if the intended beneficiaries can influence the design so as to increase its value to them.

Sources of Research Findings and Policy Analyses

The Administration for Children, Youth, and Families. Since 1969, the federal agency charged with implementing policies and programs aimed at families with young children has been the Office of Child Development (OCD) of the Department of Health, Education, and Welfare. Under the Carter administration, the Office has been reorganized and renamed. Now the Administration for Children, Youth, and Families (ACYF), this agency has responsibility for child welfare programs (primarily foster care services), child abuse and neglect services, day care regulation, child development programs (Head Start and Parent Child Development Centers), and youth development services (delinquent and runaway youth programs). Initial concern within OCD was to continue Great Society anti-poverty programs designed to compensate for economic and "cultural" disadvantage, especially for young children at-risk for school failure. Head Start was and continues to be the major program function of OCD/ACYF. Since the early 1970's, under the direction of less activist administrations and with few scientific or political rationales to continue broad-aim intervention programs, OCD/ACYF has turned to more systematic research and development activities intended to provide information on family-institution transactions so that policies may strengthen existing structures while enabling low-income families to achieve economic and/social parity.

The family-oriented research projects funded by OCD/ACYF in the past eight years have sought to identify conditions which have negative effects on children as a result of conflicting aims and structures between families and social institutions (Hurt, 1975). Primary focus has been on identifying the relationship between social service institutions, the child, and the family. The quality of the relationships among these three entities has been examined to assess the degree to which the needs of children and families are being met through collective effort. Also of interest has been the fit (or lack of fit) between diverse ethnic groups with variant family styles and social institutions which are based on modal conceptions of what the family is and what it needs.

In order to clarify the emerging role of ACYF as a family-development rather than child-deficit endeavor, the agency called together thirty scholars, advocates, and service providers in late 1977. A background paper was written prior to the conference to acquaint the panel of experts with the past priorities and broadened role of ACYF in the new administration (Cardenas & Grotberg, 1977). This paper listed research and demonstration priorities in the areas of children (especially pre-school children of low-income families), youth (status offenders, pregnant teens, and runaway youth), and family (as the mediator of the needs of children and youth). Additional activities listed include the "stimulation of institutional changes at the Federal, state, and local level in order to improve the delivery of services" (p. 2) through legislation, technical assistance, and demonstration projects. The central theoretical perspectives that guide ACYF activity include (Cardenas & Grotberg, 1977, pp. 2-3):

a) an ecological perspective in identifying needs and solutions

b) a two-fold emphasis on the family as a unit and on individual family members

c) a view of the family as the primary institution for enhancing child and youth development

d) an emphasis on equal opportunity for development regardless of minority status, place of residence, or income

e) a focus on prevention rather than rehabilitation

f) priority on supportive services that offer high quality and maximum choice rather than substitute services that offer band-aid help through a single source

g) programs and policies that recognize the cultural pluralism of American society

h) a focus on comprehensive rather than fragmented services

i) the enablement of states and localities in service delivery and program planning through technical assistance and research, demonstration, and evaluation efforts.

With these inherently value-laden priorities before them, the experts developed a series of crucial research and policy questions to be addressed by ACYF. At the end of the process, four overarching questions emerged.

1) How can research findings be implemented into programs for children and families?
2) What kinds of forms of help do families need to enhance strengths and reduce stress?
3) What are some of the critical factors preventing families from enhancing their own development?
4) What are some of the ways families are able to enhance their own development?

Subsequent to this effort, twenty-one position papers were commissioned by ACYF and written by recognized experts in the field of day care (Policy Issues in Day Care, 1977). These papers offer extensive analysis of the rationales, delivery systems, decision-making processes, implementation issues, research findings, and cost considerations in federally-subsidized day care programs. The purpose of the series of papers was to provide knowledge

for future day care program development, especially in reference to the appropriateness of standard-setting at the federal level.

A major function of the position papers has been to serve as a basis for an extensive report on the "appropriateness" of federal regulation and subsidization of child care. This report was initially requested by Congress in 1975 during the early stages of Title XX implementation. It was written under the auspices of the Assistant Secretary for Planning and Evaluation, DHEW (ASPE, 1978). The recommendations of the day care papers and the Appropriateness Report contribute to the policy principles and options below.

Thus, ACYF has been engaged in considerable introspection recently in order to develop new research and program directions and modify old ones. The timeliness of this activity, in conjunction with recent shifts in both family styles and family studies, has created the need for a clear delineation of the role of the federal government in family development and the identification of policy options relative to that role.

During a six month period in late 1977 and early 1978, the Center for Community Studies of George Peabody College and the Center for the Study of Families and Children at the Vanderbilt Institute for Public Policy Studies collaborated on a comprehensive review and synthesis of almost forty family research projects funded by ACYF from FY 1974 to FY 1978 and several other major family research projects carried out independent of the ACYF program. The research review project was funded by ACYF on a competitive RFP basis. The goal of the project was:

> to accumulate, review, evaluate, and synthesize the current and
> recent research to locate the salient dimensions of family
> stresses and problems, the effective coping and problem-solving
> strategies, and the ways families/institutions interactions
> relate to these areas and to child development.

The basic assumptions that guided the review of family research projects by Newbrough et al. (1978) were:

1. Families, like institutions, are constantly undergoing change. Myths about the disintegration and isolation of the family must be examined in light of current realities rather than past untested assumptions.

2. Models of effective, adaptive family functioning are required. Past focus on deficits in families have told us less about how families cope than about how they fail.

3. Families, as the primary human development-enhancing system, should be studied from an ecological perspective. This is necessary so that unintended consequences of social change programs may be understood, policy options can be maximized, and the focus of inquiry can be on the interdependence of children and adults within a variety of social systems.

4. The diverse forms of families should be recognized, not to determine which type is better, but to identify those conditions that hinder or enhance any family's ability to function effectively.

5. Family development research must identify the varied sources of stress and strength for families. No single discreet variable or set of variables will guarantee family well-being. There is no perfect environment that will meet the needs of the diverse families in our society.

In addition to these specific tenets, the reviewers operated on the assumption that many previous research and development efforts have been inadequate in so far as they have viewed families that deviated from the archetypal middle-class form as deficient. Rather than taking a bipolar view that families are either modal, therefore successful, on non-modal, thus failing, the reviewers sought to understand a range of family styles with varying degrees of success or failure in coping with family needs and environmental circumstances.

These assumptions represent both value orientations and theoretical biases. They are convergent with the ACYF perspectives outlined earlier. This author shares these biases, and it should be noted that other analysts with different value sets and theoretical models might arrive at principles different from those presented in this report.

The ACYF-funded research projects provided a major source of empirical information for the principles and options listed below (an asterisk accompanying a citation in the Principles and Options section indicates that this ACYF-funded study was included in the review by Newbrough, et al., 1978). This body of literature represents recently completed projects and current activities (in some cases, research projects are still in progress); Much of it relies on an ecological research perspective embodied in the ACYF assumptions discussed earlier. Because of ACYF's central role in federal R and D efforts relating to families and child-rearing, it is assumed that the research findings generated by ACYF projects will most likely influence the future of federal involvement in child and family support services. ACYF is currently under some pressure to increase the use of its research findings in service delivery (cf. GAO, 1978).

Commission reports. The past decade has witnessed a significant increase in the number of commissions and expert panels concerned with family functioning and child care. Some of these panels have been sponsored by private foundations (e.g., the Carnegie Council on Children's report by Keniston et al., 1977), while others were underwritten by public agencies (e.g., the National Academy of Sciences, 1976). These commissions are generally multidisciplinary bodies of recognized experts on family and child development. Historians, lawyers, economists, sociologists, psychologists, and political scientists contributed to these efforts. The multidisciplinary approach to the examination of such a value-sensitive

topic as family and child development frequently led to general, incremental proposals rather than sweeping recommendations for radical change. Both the values held by commission members and the desire to arrive at a consensus on issues may have led to an inability or unwillingness to move away from existing notions about family support. Even the more radical suggestions of those favoring large-scale income redistribution (e.g., Keniston et al., 1977) echo similar calls by social critics of past decades (cf. Harrington, 1962).

Other research reviews and policy analyses. In addition to the above listed sources, several works have been included that are 1) the products of independent reviews of empirical research findings (e.g., Kanter, 1977; Ross & Sawhill, 1975; Young & Nelson, 1973); 2) sub-parts of larger projects (e.g., Clarke-Stewart, 1977); 3) reviews carried out under government contract (e.g., Stanford Research Institute, 1975; White et al., 1973); or 4) various analyses of legislative policies and social trends (e.g., Moroney, 1977; Steiner, 1976; Education Commission of the States, 1971 & 1975).

Principles and Options

The delineation of policies based on research findings, commission reports, and other analyses is limited by the quality, scope, and validity of the research considered. Samples that are culture-specific, measurement instruments with untested reliability, and use of confounded variables are problems that must be recognized in drawing implications for public policy. In addition, most research on family and child development has not sought to answer specific policy questions. Yet, we cannot wait until "all the facts are in." A blending of fact, value, and common sense must guide the development of federal policies in family and child development. That blend will be

a dynamic one, shifting with the emergence of new information and changing values. The current level of knowledge allows us to "discuss, debate, and deliberate, but not prescribe, program, or push" (Clarke-Stewart, 1977, p. 74). Given the quality and quantity of information now available and the current political climate, incremental policy based on planned variation and experimental reform (Campbell, 1972) may be the most appropriate strategy.

As stated earlier, the purpose of the listing below is to identify principles and options for which there is currently empirical and/or political support. They are not necessarily meant to be internally consistant, all-inclusive, or even the "one-best system" for implementing family support policies. Because of gaps in knowledge concerning the effects of intervention and support efforts, there are many areas relevant to child care and parent education not mentioned. These areas await further research and consensus-building before specific policy recommendations can be generated.

Definitions of issue areas. There are numerous ways to categorize policies affecting children and families. The literature reviewed for this paper used many different groupings. The following categories evolved from a cursory factor analysis of the most salient issues found in research reports and policy analyses. The categories are not meant to be mutually exclusive.

Preschool child care means any care and supervision of children from birth to school entry (five to six years) by an adult other than the child's primary caregiver (mother or father). Such care may take place either in-home by a relative, neighbor, or hired sitter, or out-of-home, in informal, small family-like settings or in formal, group settings. In some cases, child care includes an intervention component in which there is a clear intent to alter

the child-rearing patterns of the family or the developmental status of the child. This is often the case in low SES families or with children identified as at-risk for developmental aberrations due to either endogenous or exogenous factors.

Family participation includes any aspect of parent or sibling involvement in policies and programs aimed at strengthening families in their child-rearing capacities. Such participation may include 1) involvement in program operation as paid or unpaid staff, 2) acting as the primary delivery agent of services to the child (e.g., as the child's teacher), or 3) serving in planning and policy-making roles in program governance.

Work-place issues are concerned with the allocation of adults' time between child-caring and market-place activities (employment, job-training, schooling). Employer policies on leave, work hours, scheduling, entry and re-entry into the job market, and federal monetary incentives to work or not work are considered here.

Delivery mechanisms refer to the strategies for implementing federal policies affecting family life and child development. Sponsorship, administrative structures, regulation, coordination, scope, and staffing arrangements are discussed within this issue area.

There are several overarching principles that should guide the development of specific family support mechanisms. First, policy formulation should begin with an assessment of the true status of parent-child interactions and individual development of family members rather than preconceived notions about the needs of a hypothetical modal family unit. Second, policies should

seek to enhance the quality of parent-child, parent-parent, and family-institution interactions rather than just alter status variables such as size, income, place of residence, etc. (Shipman, McKee, & Bridgeman, 1977; Bell, 1975). Third, the diversity of developmental processes within families suggests that program effectiveness may depend on the flexibility of programs for individual families and the provision of a range of choices to families to meet their own perceived needs. Fourth, policies that seek to improve children's development should focus on the first years of life, but should also provide continuing support into the pre-adolescent and adolescent years. Finally, there should be clear goals, consistent definitions, and measurable objectives for federal involvement in child care programs (Morgan, 1977; ASPE, 1978).

In the listing below, policy principles are identified as 1.0, 2.0, 3.0, etc. Options that are possible ways to fulfill these principles are listed as 1.1, 1.2, 1.3, 2.1, 2.2, 2.3, etc.

I. Preschool Child Care.

    A. Program Scope and Purpose

        1.0 Federal and state policies should provide equitable and adequate support for a range of child care arrangements rather than supporting only formal, center-based care (ASPE, 1978; ECS, 1971 & 1975; Hill, 1977).

        1.1 Child care and parent education services should be available through both public and private delivery systems. The distribution of services, especially for currently underserved populations, should be monitored by the federal government (Keniston et al., 1977).

1.2 Policies should make available subsidies for both in-home and out-of-home care on a universal, sliding scale fee basis (ECS, 1971 & 1975; Young & Nelson, 1973).

1.3 In addition to subsidizing formal center-based care, policies should make available federal funds for the support of family day care given its widespread use and its appropriateness for certain age groups and geographic regions (Rowe, 1977; Young & Nelson, 1973).

2.0 Policies should allow for flexibility in child-care arrangements according to age, need, and cultural values (Clarke-Stewart, 1977).

2.1 Where out-of-home care is used for infants, incentives should be provided to encourage the use of individual rather than group care (Hock, 1976*).

2.2 For minority children entering preschool child care or intervention programs, programs should be available to families that provide information and support concerning the transition of the child from home to center (Garcia, 1977*; McClintock, 1976*).

3.0 Policies should continue to support experimental infant and preschool intervention projects in order to test the effectiveness of programs intended to improve child development (Bronfenbrenner, 1974; Lazar et al., 1977*).

3.1 Formative and summative program evaluation should be built into demonstration projects from the initial stages of implementation. Cost-benefit analyses should be an integral part of evaluation. Where possible, experimental control of programs through random assignment should be encouraged to increase the validity of research findings (Lazar et al., 1977*; Love et al., 1976*).

3.2 Policies should encourage the experimental development of
multi-purpose child care and parent education centers to
generate information on usage, administrative procedures,
information demands of families, etc. (White et al., 1973).

3.3 Policies should encourage the development of innovative
multi-unit housing designs to facilitate informal,
shared child-caring arrangements (White et al., 1973).

B. Program Design

4.0 Policies should primarily regulate the size of groupings in child care
rather than child staff ratios (Abt, 1978; ASPE, 1978; Clarke-Stewart, 1977).

4.1 Center-based programs for the care of preschool children
should have no groups larger than twenty, regardless of
child-staff ratios. For children below 18 months, group size
should be no greater than eight children. If child-staff
ratios are used for children below three years, the ratio
should be no greater than 5:1 (Abt, 1978; ASPE, 1978).

5.0 Caregiver-child relationships should be consistent and stable from
day-to-day (ASPE, 1978; Clarke-Stewart, 1977; Meyer, 1977).

5.1 Policies should not encourage the use of irregular or in-
frequent volunteers in center-based infant care (Riccuiti, 1977).

5.2 Volunteers should not be counted in child-staff ratios unless
they are qualified and attend the program on a regular basis
for a long period of time (ASPE, 1978).

5.3 Programs should provide consistent caregivers to meet the needs
of young children living in families with frequent shifts in

size and structure to assure on-going care necessary for normal cognitive development (Grow, 1977*).

5.4 Policies should require bilingual and bicultural curricula in ethnically heterogeneous preschool settings (Garcia, 1977*; McClintock, 1976*).

6.0 A core component of child care programs should be developmental activities with clear, age-appropriate goals for children, and materials and spatial arrangements adequate to meet those goals (ASPE, 1978).

6.1 Programs should provide at least 40 square feet per child in center-based programs and family day care homes. Space should be variable; with rooms for both large group activity and small group and individual activities (Prescott & David, 1977).

6.2 Center-based child care should be physically arranged to provide separate and distinct activity areas as both a cognitive and behavioral management tool (Kruvant et al., 1977).

7.0 Both center and in-home care should assure the maintenance of the physical and psychological health of children (ASPE, 1978).

7.1 Technical assistance should be available to child care programs to increase the competence of caregivers in meeting the immediate health and safety needs of children. Child care programs should maintain adequate and up-to-date health records for each child (Aronson & Pizzo, 1977).

7.2 Out-of-home care funded with federal dollars should especially seek to serve unsupervised, neglected children, or children at-risk for mental or physical crisis or stress (White et al., 1973).

8.0 Child care should foster not only intellectual/cognitive growth, but should place equal emphasis on emotional, social, and physical development (Clarke-Stewart, 1977; Newbrough et al., 1978).

    8.1 Policies should require the provision of nutritional services through child care programs, to include supplemental meals as needed. Specific standards as to the quality and quantity of the nutritional program should be established (ASPE, 1978).

    8.2 Technical assistance, inservice training, and information should be provided to family day care homes to help them implement adequate nutritional programs (ASPE, 1978).

    8.3 Programs should seek to develop curricula and assessment tools in social-emotional areas of development (Clarke-Stewart, 1977; Newbrough et al., 1978).

9.0 Programs should enhance the quality of adult-child interactions in care settings as a central goal. The quality of the physical setting and the materials available for play should be stimulating, but their effectiveness is dependent on the adult-child relationship (Clarke-Stewart, 1977).

    9.1 Programs should seek to identify families at-risk for poor mother-infant relationships, to be ameliorated through the use of parent-targeted educational and support programs rather than child-oriented skill development programs. Such programs should recognize diverse family processes while assuring positive child development (Bell, 1975*).

    9.2 Programs should not label children with developmental delays as inadequate learners, but should encourage positive parental

(or other caregiver) expectations for children's development (Shipman et al., 1977*).

II. Family Participation

10.0 Policies should encourage the provision of information to parents to enable them to make knowledgeable choices among child care options (ASPE, 1978; Keniston et al., 1977; NAS, 1976; White, 1973).

10.1 Specific counseling and referral services should be available to parents to enable them to obtain information about qualified child care providers (both family and center care). (ASPE, 1978; White et al., 1973).

11.0 Policies should require programs to include parents in planning, decision-making, and evaluation. The goal of these requirements should be to 1) improve the quality of child care programs, 2) reinforce parents in their role as the primary caregiver for their children, and 3) provide for continuity of care between parent and child-care worker (ASPE, 1978; ECS, 1971; Kagan, 1977; SRI, 1973; White et al., 1973).

11.1 Programs should facilitate parent-caregiver contact through scheduled, regular, parental visits to the child care site and through direct, voluntary involvement of parents in the daily activities of the program. Periodic parent meetings also should be encouraged in out-of-home care settings (ASPE, 1978).

11.2 To assure continuity of care during the initial period of transition from home to child care setting, parent involvement in the facility for a few hours each day should be encouraged to help the child adjust to the new environment

and to ease the separation from the mother. Parent education efforts should occur simultaneously to inform parents about the transition process, separation anxiety (their own and the child's), and the child's adjustment to the new caregiver (ASPE, 1978).

11.3 Programs should involve parents in goal-setting not only for the program as a whole, but also for the cognitive and social development of their own child. One goal of such efforts should be to reinforce appropriate positive expectations for the child's development (Shipman et al., 1977*)

11.4 Priority should be given to parents for employment as paraprofessional staff in day care and preschool programs (White et al., 1973).

12.0 Policies should not usurp the natural child-rearing and adaptive functions of families but should support and strengthen those functions in order to enhance families' management and coping abilities (ASPE, 1978; Bronfenbrenner, 1974; Clarke-Stewart, 1977; Keniston et al., 1977; Moroney, 1977; White et al., 1973).

12.1 Policies should recognize the existence of supportive kin networks in many families and should seek to involve extended family members in efforts to enhance the development of young children. In addition, programs should encourage participation by families in kin networks that can act as natural sources of support and caring (Farber, 1971; Fein & Kessen, 1975).

13.0 Policies should first strengthen the quality of the parent-child attachment, and then increasingly move toward providing opportunities for interaction with other caring adults in the home and

subsequently out of the home. Policies should enable both mothers and fathers to develop strong atachments to their children, and should leave choice of out-of-home caregiver to the parents (ASPE, 1978; Clarke-Stewart, 1977; Hock, 1976*).

13.1 Programs should be developed to assist fathers in taking on increased child-caring responsibilities and to adopt a more nurturant role in the family unit. The reduction of sex stereotyping and the increase of role options for both men and women should be the aim of such programs (Clarke-Stewart, 1977).

13.2 Home-based programs that help parents teach their children and that provide sustained support (at least two years) are appropriate for some families with children from birth to three or four years. Such programs should use trained home visitors and should not attempt to serve more than twelve families per visitor (Love et al:, 1976*).

13.3 Preschool intervention programs that use parents in the educational process should vary the level of parental participation as the target child approaches entry into first grade. A shifting reliance from the parent as primary educational agent to the teacher is recommended. During the period of transition from preschool or home into the public school setting, families should be given educational support to help them understand the expectations and activities of the kindergarten or first grade. Attention should be paid to the potential lack of congruence in attitudes and beliefs between parents and teachers, so that each may

accomodate to the other's views and expectations. Parent-teacher workshops during the summer before school entry, perhaps led by third-party facilitators, would be one way to move toward reciprocal expectations (Bronfenbrenner, 1974; Fleming & Sussman, 1975*; Schaefer, 1977*).

14.0 Policies should support voluntary educational programs that address the basic processes of child development for family members and potential parents (Clarke-Stewart, 1977; White et al., 1973).

    14.1 The primary focus of education for parents concerning cognitive development should be on language acquisition in the 6 month to 24 month old child, as this is a basic foundation for both parent-child interaction and for subsequent child development. Use of interactive teaching styles with high verbal contact are recommended (Clarke-Stewart, 1977; Shipman et al., 1977*).

    14.2 Parent education programs should be available from the pre-natal period until the child is two or three years old, and should rely more on demonstration and interaction than group lectures or printed material. The characteristics of successful parent education programs include the following:

--neighborhood or, better, home-based instruction
--parents' active involvement and participation in teaching or interacting with their own children
--specific, focused, interactional educational experiences for each child, presented individually, in a one-to-one situation
--goal-specific curricula (to date, curricula aimed specifically at children's cognitive or language skills have been most effectively communicated to parents. Curricula should be extended to include experiences that demonstrate to parents the need for being responsive to children's behavior as well as stimulating their senses)

> --projects determined, planned, and carried out by parents themselves
> --relatively long-term programs that continue instruction and maintain support
> --small, intensive programs with a research/evaluation component (Clarke-Stewart, 1977, p. 106).

14.3 Parent education should be universal, available to adolescents and school age parents, focus on child rearing in the first few years of life, and be provided through a variety of caring settings (home, center, school, hospital, doctor's office, community facilities, etc.) (ECS, 1971 & 1975).

14.4 Parent education programs should include a component aimed at potential mothers to inform them of personal role options and of anticipated sources of stress from future labor force participation, the consequences of marriage and child rearing, financial security, and other issues concerning the transition from independent single wage-earner to family member (Ross & Sawhill, 1975).

14.5 Parent education programs on cognitive stimulation of the young child should be available for parents with delayed or at-risk children, to be offered either in the home or in a neighborhood center (Shipman et al., 1977*; White et al., 1973).

14.6 One purpose of parent education programs should be to develop positive attitudes in unwed mothers toward parenthood in general and toward their own child specifically. Reliance on existing kin and neighborhood networks to encourage positive attitudes should be a feature of such programs (Grow, 1978*).

14.7 Policies should encourage the development of nutrition education for parents, provided through child care settings (ASPE, 1978).

III. Work-place Issues

15.0 Policies should not provide direct incentives that influence mother's decisions either to work or to stay home to care for young children Clarke-Stewart, 1977; Hock, 1976*; Kenniston et al., 1977).

15.1 Policies should emphasize the availability of full and fair employment for both mothers and fathers, with a guaranteed minimum income wnen jobs are unavailable, or when jobs provide inadequate income to meet basic family needs or when a parent must remain at home to care for children (Keniston et al., 1977; NAS, 1976).

15.2 A range of child caring alternatives should be available to families on a free or very low-cost basis so that monetary resources are not diverted from other areas and parental decisions to enter the job market are not determined by the cost of child care (NAS, 1976).

15.3 Programs should be available to nonworking mothers that provide for opportunities for young children to interact with other adults and children during the day in order to lessen separation and stranger anxiety as the child grows older (Hock, 1976*).

16.0 Policies should stimulate work-place flexibility toward employees with young children concerning hours at work, leave practices, seniority, job-market exit and re-entry, etc. (ECS, 1971 & 1975; Kanter, 1977; Ross & Sawhill, 1975).

16.1 Federal tax policies should be amended to provide incen-
tives to employers who support child care services either
at the work-site or in a similar convenient location (ECS,
1971 & 1975; Kanter, 1977)..

16.2 Job sites should provide opportunities for meetings among
employees to discuss work-related family management issues,
identify common problems, and suggest changes in organiza-
tional structures to reduce stress caused by conflicting
demands of work and child-caring (Kanter, 1977).

16.3 Employers should be required to develop "family responsibility
statements" indicating the potential impact of employment
practices on families (Kanter, 1977).

IV. Delivery mechanisms

17.0 Child care policies should be one component of a comprehensive
integrated family support system that allows community child care
programs to be linked with other family support services, especially
health services. Such efforts should be coordinated, complementary,
and consistent (ASPE, 1978; Keniston et al., 1977; NAS, 1976).

17.1 Local community planning and coordinating agencies should
be developed to 1) monitor the provision of child care
services, 2) stimulate and channel supply to meet expressed
demand, 3) oversee the flow of capital funds and operating
monies, 4) assure the integration of child care with other
family support services, and, 5) when appropriate, act as
prime sponsors for child care programs (Young & Nelson, 1973).

17.2 Child care programs should provide comprehensive services
to children with both normal and special developmental needs,

with special reimbursement formulae available when handi-
capped or delayed childre are enrolled (ASPE, 1978).

18.0 Policies should be designed so that they facilitate program implemen-
tation by states, which will need to operate as individual entities
adapting policies to their own needs and resources (Class et al.,
1977; ECS, 1971 & 1975; Rowe, 1977).

18.1 Standards for the operation of child care programs should
be enforced by state-level agencies, and/or local municipali-
ties (ECS, 1971 & 1975; Kagan, 1977; Morgan, 1977).

18.2 Federal standards for child care should provide for at least
two levels of compliance. At one level, standards for
licensing should include minimal provisions that are absolute-
ly necessary for the care and protection of children. Programs
should be judged to be either in compliance or not in com-
pliance with these basic requirements. At a second level,
recommendations or goals for quality care should be provided
that offer quidance but are not linked directly to licensing
or compliance judgements (Kruvant et al., 1977; Prescott &
David, 1977).

18.3 Technical assistance and supplemental funding should be availa-
ble to child care facilities unable to meet state and/or
federal standards. Withdrawal of public funds from noncomplying
programs should only be a last resort option (ASPE, 1978).

18.4 Standards should be established to regulate child care pro-
gram size, with incentives for center-based group care to
serve between thirty and sixty children as an optimal range.

Total program size should vary with the ages of children served (Abt, 1978; Prescott & Jones, cited in ASPE, 1978).

18.5 Policies should require that whenever the federal government subsidizes child care, the Federal Interagency Day Care Requirements should be applied, while recognizing the need for a variety of flexible and accessible child care arrangements (ASPE, 1978).

18.6 The development of standards of quality for family support and child care programs should include the input of those who will be affected by the standards at the state and local level (i.e., administrators, child care staff, and parents) (Costin et al., 1977).

18.7 The specific objectives of local child care programs should not be set by federal policies. However, the government should require local programs to establish child development goals and program objectives appropriate to their own needs and resources and to the cultural context in which they operate. Technical assistance in implementing child development goals should be available (ASPE, 1978).

19.0 Policies should provide for the delivery of services through existing community networks rather than through centralized bureaucratic institutions (Berger & Neuhaus, 1977; ECS, 1971 & 1975; Newbrough et al., 1978).

19.1 The provision of child care services should be primarily through nonprofit, community-based organizations to maximize parental choice, decentralize administration, and avoid counter-productive profit incentives (Young & Nelson, 1973).

19.2 Experimental programs utilizing specific ethnic groups in the administration and delivery of family support services should be established to test the efficacy of this approach. Such programs should be bilingual, include career development plans for staff, and seek to identify indigenous resources and problem-solving methods to assist minority families (Jenkins, 1977*).

20.0 Policies should assure that the qualifications of child care supervisory staff, in whatever form of extra-familial care, should be consistent with the ages of the children in care and with the total size of the program. Training requirements should be flexible and generic, but should emphasize basic familiarity with child growth and development (ASPE, 1978; Abt, 1978).

20.1 Policies should encourage greater use of trained paraprofessional and volunteer staff in service delivery, with greater emphasis on competency-based training than degree-granting programs (Love et al., 1976*; Moroney, 1977; White et al., 1973).

20.2 Policies that require training for child care staff should differentiate between supervisory staff who have budgetary and managment responsibilities and direct care staff who interact with children on a regular basis (ASPE, 1978).

20.3 Training curricula should be developed for caregivers working with infants and toddlers (ASPE, 1978).

20.4 Training and technical assistance in meeting the primary health needs of children should be available to child care programs in order to enable programs to care for sick children, reduce health and safety hazards, and improve record-keeping abilities (Aronson & Pizzo, 1977).

20.5 Policies that mandate training for child care staff should include a component on the use and arrangement of physical space in facilities, to be supplemented by technical assistance when necessary (ASPE, 1978).

21.0 Policies should make clear the specific responsibilities of federal agencies, state administrating agencies, grantee and delegate agencies, and local programs. These responsibilities should be coordinated, provide for a separation of administrative duties, and should allow for both top-down and bottom-up communication and policy-making (ASPE, 1978).

21.1 Administering agencies rather than direct child care providers should be responsible for supplemental social service information and referral for clients (ASPE, 1978).

21.2 Administering agencies rather than direct child care providers should be responsible for addressing problems of high staff turnover in programs, inadequate reimbursement rates, inconsistent sliding fee scales, and temporary staff shortages to improve the continuity of care for children (ASPE, 1978).

21.3 Programs should provide for close and frequent contact between administering agencies and child care providers to identify organizational problems and improve services through technical assistance. Such efforts should be aimed at the implementation of federal policies and standards at the state and local level (ASPE, 1978).

21.4 State-level administering agencies should separate licensing/ monitoring activities from technical assistance, consultation, and training functions either through specialized staff roles,

subcontracting, or changes in departmental jurisdiction to avoid loyalty conflicts within licensing and support personnel (ASPE, 1978).

21.5 Licensing standards at the state level should be appropriate and specific to child care programs and should be developed and implemented by a single agency with authority for enforcement (Aronson & Pizzo, 1977; ASPE, 1978; Morgan, 1977).

21.6 Policies that regulate child care should separate requirements for administering agencies from requirements for the direct providers of care (ASPE, 1978).

Conclusion

The policy principals and options briefly outlined here cannot exist in a political vacuum. Before policy makers arrive at specific options to meet given goals, there must be a consensus of values concerning the appropriateness of a public role in child care and parent education, and there must be clear, acceptable rationales for adopting a particular policy strategy. The generation of options based on empirical research and sociopolitical analyses is meaningless until we address the question: To what end is federal intervention in family functioning aimed? But let us assume that a definitive answer to that difficult question is not forthcoming in the near future. What can we do now to support families without "a further undermining of family functions by the public sector (White et al., 1973, III: 86)?"

First, let us admit that we do not know nearly enough about how to develop environments that nourish people. We may think we know what those environments ought to contain in terms of warmth and interaction, but even here value judgements are made. Some excellent studies have told us much about the basic needs

of children and a little about the needs of adults, but, we need to know much more about children and adults as interdependent family members developing over time. A primary policy strategy should be to continue to pursue an empirical understanding of families as they develop and grow, and to try to understand those elements of society that help and hinder growth.

Second, policy makers and social scientists must acknowledge that intervention can be harmful. The DES and infant formula tragedies are public manifestations of the mistakes and misjudgements that professionals make. Recent evidence of harmful effects of psychosocial experiments or intervention should remind us to ask more questions before we provide more answers. We also need to develop new concepts of "accountability" that move beyond cost-benefit analyses and quantitative, summative evaluation methodologies. The process of implementation, the changing effects of programs over time, and the unintended consequences of social action all must enter the evaluation calculus.

Third, the move toward answers should be based on federal support for experimental reform and planned variation (Campbell, 1972), neither a new nor a radical idea, although much controversy has been generated over this concept. If social institutions can provide varied resources that complement the internal resources of diverse families, the relationship between family and institution can be symbiotic rather than parasitic. Public intervention should be supported by the general society but should be responsive to individual needs.

One way to develop such institutions would be to design public policies with the people who will implement and evaluate these policies, and receive the intended benefits of them.(cf. Dokecki, 1977). This is also neither new nor radical, but it, too, is an unexplored source of knowledge and social change. Families should have every opportunity to participate in the decisions and operations

of public institutions that directly affect their lives--child care centers, welfare departments, schools, mental health centers, hospitals, asylums. To enable them to participate actively, families must have adequate monetary resources so that options are not limited by budgets that create financial dependency on the institutions with which they seek to work. In order to work effectively as decision makers, parents should have available to them training and technical assistance in program planning and budgeting, managerial skills, organizational change, and community advocacy--skills that will be helpful as parents carry out their "executive functions" vis a vis society (Keniston et al., 1977, 17).

Finally, policies may best enhance family development if they are implemented through proximal social institutions rather than centralized bureaucracies (cf. Hobbs, 1978). Increased use of decentralized administrative structures for the allocation of public funds is one way to provide support to families through a blend of income supplements and social services. Observational studies and experimental programs utilizing mediating structures such as kin networks or neighborhood organizations should be carried out to generate knowledge about their efficacy in meeting local needs. The use of existing social structures in which people have a natural membership and commitment may begin to resolve the recurring tension between the antonomy of private families and the accountability and efficiency demands of services.

The approaches suggested here are meant to spark further criticism and debate. The inherent dilemmas that arise from the proposed principles and options are rather clear. How can we make use of federal dollars so that locally-controlled, flexible, supportive programs are accountable to the taxpaying public, create greater equity, and are congruent with both empirical knowledge and national political priorities? At what point will the behavioral sciences provide "facts" that

can determine policies and program design, and how will these "facts"
interfere with an emphasis on flexibility, variation, and choice? How can
bureaucratic structures regulate programs and enforce standards while recogni-
zing individual needs and existing social support networks? Will the American
liberal-progressive political system based on incremental change without long-
range planning be able to support collective efforts to enhance the quality of
family-institution relationships?

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