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**Sustaining Employment
Among Low-Income
Parents: The Problems of
Inflexible Jobs, Child
Care, and Family Support**

A Research Review

Final

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I. INTRODUCTION

Low-income parents face significant challenges in combining employment and child-rearing responsibilities. Parents with low-wage jobs often lack the flexibility they need at work to manage family responsibilities. For example, many of these workers do not have control over their work schedules. Low-wage jobs tend to offer few benefits such as sick or annual leave. Often, when a child is too sick to attend child care or the child's regular provider is unavailable, parents who must take time off from work to care for their children risk losing their jobs (Hershey and Pavetti 1997; and Rangarajan 1996).

At the same time, only a very limited number of regulated child care arrangements offer flexible hours to parents with inflexible, low-wage jobs (Collins and Li 1997; Hofferth 1995; Kisker and Ross 1997; Siegal and Loman 1991; U.S. General Accounting Office 1997; and Willer et al. 1991). Low-wage jobs often require work during early morning, evening, night, or weekend hours, and they often have schedules that change on a weekly basis. However, most regulated child care centers and family child care homes are not open during nonstandard hours and require a regular schedule of attendance. Furthermore, although many parents lack sufficient leave time from work to care for sick children, most regulated child care providers will not accept sick children in group care settings.

Inflexible jobs and child care arrangements pose serious problems for a large number of low-income working parents, especially those trying to leave welfare and enter the workforce. These parents struggle to manage both employment and child-rearing responsibilities. Ultimately, most parents are forced to take time off work, which, in turn, may lead to fewer work hours or job loss (Rangarajan 1996). Some parents can rely on relatives and friends to provide child care when problems arise, but many do not have such resources.

The difficulties of balancing work and child-rearing will affect a large proportion of families leaving welfare, because many families receiving cash assistance have young children. In 1995, nearly half the children receiving cash assistance were under age 5, and one-third were in grade school; all these children would have needed child care if their mothers had worked. Furthermore, single women head most families receiving cash assistance, and for many of them, there is no other adult in the household who can help provide child care (U.S. House of Representatives 1998).

In this paper, we review the literature that addresses flexibility in family situations, jobs, and child care as it relates to the ability of parents to be employed over time. Our purpose is to develop a research agenda to inform the design of child care policy regarding families leaving welfare for work and low-income working families in general. A companion paper will review the research on the links between the cost of child care and employment. Another companion paper will focus on the relationship between the quality of child care and employment.

This chapter addresses the way inflexibility in jobs and child care arrangements can lead to problems in managing work and child-rearing responsibilities. Chapter II examines research measuring the extent of inflexibility in low-income parents' family support, jobs, and child care arrangements. We consider ways in which flexibility along these dimensions may be related to employment retention. In Chapter III, we describe what we know about policy options for increasing flexibility in family support, low-wage jobs, and child care. Chapter IV concludes with a summary of what we know about flexibility and employment retention and proposes an agenda for future research.

A. A FRAMEWORK FOR ADDRESSING FLEXIBILITY ISSUES

Arthur Emlen has identified flexibility as a major criterion parents use when choosing a child care arrangement (Oregon Child Care Research Partnership 1997). For example, parents with inflexible jobs (airline flight attendants, for instance) who need care for children in an emergency may seek out child care arrangements that are reliable and will permit them to change their work schedules or pick up children late on short notice. Families with in-home care providers (nannies or au pairs) often have this flexibility. Many parents who choose to use high-quality, center-based care, which tends to keep inflexible hours, have more flexible jobs and greater family support so that the inflexibility of their child care arrangement is not a problem. Emlen's research suggests that employed parents select an affordable and good-quality child care arrangement that complements the flexibility they have in their job and family circumstances (Oregon Child Care Research Partnership 1997).

Emlen notes that three sources of flexibility seem to stand out: (1) job flexibility, (2) family flexibility, and (3) child care flexibility. Job flexibility is the ability to change work schedules or take leave time to care for children when child care arrangements break down or children are sick. An individual with a high degree of job flexibility would always be able to respond to a child-care-related emergency by taking time off work, working at a different time of the day, or working at home while caring for children. Family flexibility is the presence of a trusted adult--a family member or friend--to care for children whenever regular child care arrangements are not available and the parent must work. A parent with a high degree of family flexibility would always have someone to ask for help when a child is sick, when the regular child care provider takes a day off, or when the parent cannot leave work at the regular time and needs someone to pick up the children

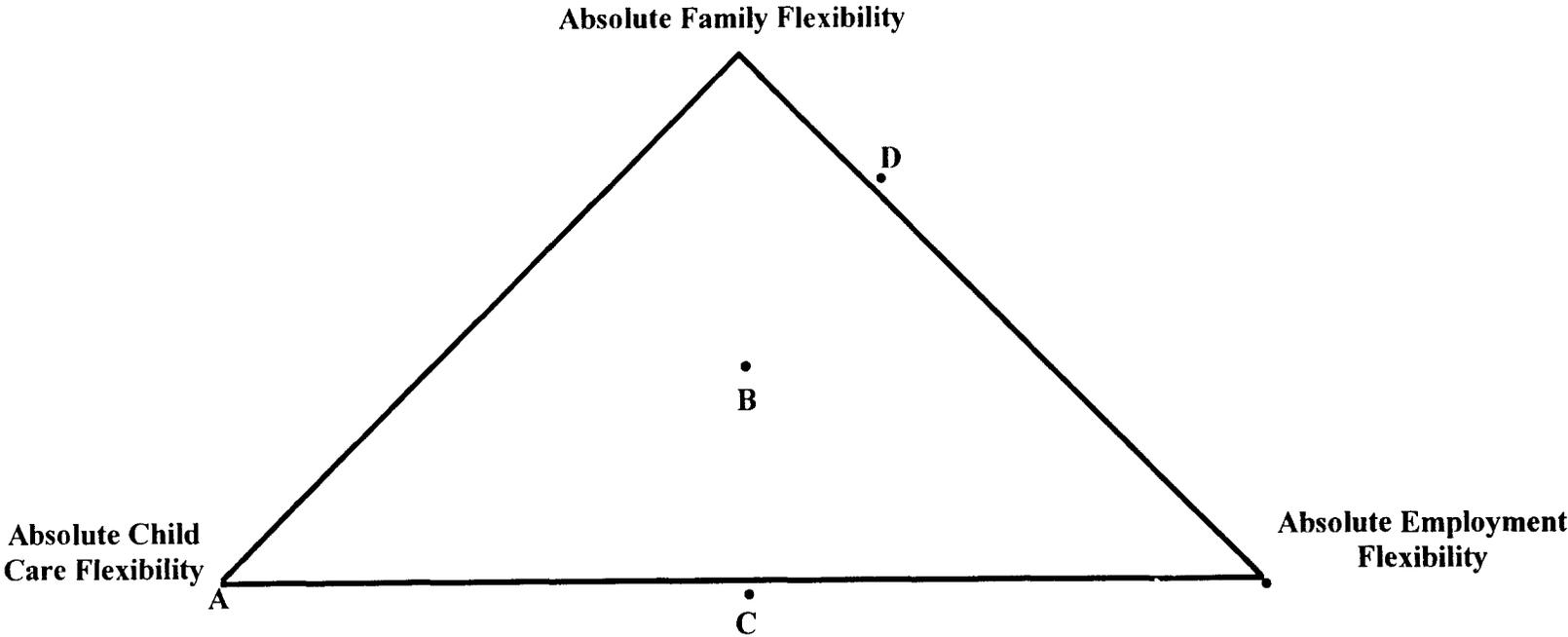
from child care and care for them until the parent gets home. Child care flexibility is having a child care provider who will care for the children any time the parent has to work. A parent with a high degree of child care flexibility has a child care provider who never misses a day of work, who cares for children when they are sick, and who can stay late or come at any day or time the parent is asked to work.

Figure I.1 displays these sources and variations of flexibility. Each corner of the triangle represents absolute flexibility in each of the three sources identified by Emlen (families, jobs, and child care). Points farther from the corners represent lower levels of flexibility. Thus, a parent with flexibility at point A has absolute flexibility in her child care arrangements but little flexibility at work and no help with child care from family. At point B, a parent has moderate amounts of flexibility in equal amounts in all three areas. A parent at point C has a moderate (and equal) amount of flexibility in child care arrangements and employment, but no family flexibility. Finally, at point D, a parent has a highly flexible family situation, some limited flexibility at work, but no flexibility in child care arrangements.

Emlen also notes a fourth source of flexibility worthy of mention--the parents initiative in arranging backup child care and developing a flexibility solution that works for them (Oregon Child Care Research Partnership 1997). This initiative, however, is not measured separately in Emlen's studies of flexibility. In fact, Emlen feels initiative is reflected in flexibility in the other three areas, since parents who have shown initiative in developing flexible solutions to support their work activities will experience flexibility in one or more areas.

FIGURE I.1

FLEXIBILITY IN FAMILY SITUATIONS, EMPLOYMENT, AND CHILD CARE ARRANGEMENTS



B. ADAPTING THE FRAMEWORK TO THE EMPLOYMENT SITUATIONS AND CHILD CARE NEEDS OF LOW-INCOME PARENTS

Welfare researchers and policymakers have used Emlen's framework to consider the problems that low-income single mothers who are leaving welfare may face. Many of these parents will obtain inflexible jobs; as single parents, they may also have low family flexibility in responding to child care emergencies. Most low-income single parents do not have help with child care emergencies or the financial resources with which to find good, flexible child care solutions. In a sample of an Oregon population of child care assistance recipients, Emlen found that these low-income parents had extremely low family flexibility, average work flexibility, and high caregiver flexibility (Oregon Child Care Research Partnership 1997). However, if low-income single parents cannot find flexible child care arrangements, they may have serious trouble sustaining employment. Although Emlen's research does not address the link between flexibility and continued employment, flexibility in at least one of these dimensions appears to be essential for parents to sustain employment over time (Oregon Child Care Research Partnership 1997).

We suspect that inflexibility in employment, child care, and family situations may be most significant as a barrier to retaining employment over time, not entering employment. Initially, many parents can make child care arrangements that allow them to start work. However, child care arrangements that were hastily made with relatives or friends in order to provide parents with the necessary flexibility to start work may break down because a provider is not available, quits, or because a young child is too ill to attend child care. Employers may ask the parent to adjust her schedule, and the new times may conflict with the current regular providers' schedule. Unless parents have family members or friends who can help provide child care during such crises (a flexible family situation), or can take time off from work to care for the child or to make alternative

arrangements (a flexible employment situation), they will not be able to meet their child-rearing responsibilities and sustain their employment.

Many low-income single parents may not consider the need to develop backup child care arrangements to protect them from losing time from work in a child care emergency. Other parents will lack the social resources to make satisfactory backup arrangements. As we consider the degree of flexibility low-income working parents have in each area (family support, child care, and employment), we feel that many low-income single parents could learn to develop their own contingency plans for work and child care emergencies, which would enable them to find a less stressful balance between their work and child-rearing responsibilities.

Even with careful planning, however, more flexible employment and child care options may be needed for this population because many low-income parents cannot address employment and child care emergencies by relying solely on support from family and friends. Research is needed to explore how flexible employment options like job sharing, flexible work places, and flex time options could benefit both employers and parents. Research is also needed on how best to structure policies that would encourage the development of a supply of flexible child care options for low-income families.

II. FLEXIBILITY AND ITS RELATIONSHIP TO EMPLOYMENT

To sustain employment, parents must find flexibility in family support, job schedule, or their child care arrangements. Parents who lack flexibility in one area may compensate for that by having higher flexibility in one or more of the other dimensions. Parents who cannot find a flexible solution will probably not remain employed for long. Therefore, to understand the scope and nature of the flexibility problem, it is important to measure the degree of inflexibility along all three dimensions simultaneously.

This chapter discusses how low-income parents can find a flexibility solution, given the constraints of their family situations and the available job and child care options. However, except for Emlen's work in specific population subgroups (Oregon Child Care Research Partnership 1997), the existing literature measures the degree of inflexibility in only one dimension at a time. Therefore, our review of the literature looks at inflexibility along each dimension. Unfortunately, this yields incomplete information about the extent of the inflexibility problem because inflexibility in one dimension can be compensated for by flexibility in one or more of the other dimensions. While we know a lot about inflexibility along each dimension, we know very little about the system as a whole. A final section of this chapter examines what is known about the relationship between inflexibility and employment for low-income parents. We find that no research studies have rigorously examined this relationship.

A. MEASURING THE PROBLEM

This section reviews what we know about inflexible family situations, employment, and child care arrangements among low-income parents and describes the extent to which the lack of flexibility in each of these areas has been measured.

1. Inflexible Family Situations

Some parents entering the workforce will not be able to rely on family members to help with emergency child care arrangements. Families below poverty and those receiving welfare are less able to rely on their child's father to share child care responsibilities than are all families. For example, although fathers provided 18.5 percent of child care to preschoolers from all families in 1994, fathers provided 17.6 percent of child care in families with income below the poverty line and 14.9 percent of child care in families receiving Aid to Families with Dependent Children (AFDC) (see Table II.1). Families receiving AFDC were more likely than all families to use the child's grandparent as a child care provider. Poor families and families receiving AFDC were more likely than all families to use other relatives to care for children while their mothers worked.

We have found no recent, nationally representative measures of the extent to which single-parent or low-income families can rely on family or friends to care for children during work or child care emergencies. The available research contributes some information, but none of it is very recent or definitive. Findings from two recent studies of interventions for young welfare-dependent mothers indicate that about half the program participants lived with other adults--their own mothers, their husbands or boyfriends, or other adults--who potentially could help with child care (Tables II.2 and II.3), but these data do not indicate whether these adults are available to help with child care in an

TABLE II.1

PERCENTAGE OF CHILDREN YOUNGER THAN AGE 5 IN
CHILD CARE PROVIDED BY A RELATIVE WHILE
THEIR MOTHERS WORK, FALL 1994

Caregiver	All Families	Families Below Poverty	Families Receiving AFDC
Father	18.5	17.6	14.9
Grandparent	16.3	16.9	21.2
Other Relative	9.0	17.8	14.3
All Relatives Other than Mother	43.8	52.3	50.4

SOURCE: Casper 1997, Table 2.

NOTE: This table is based on data from the Survey of Income and Program Participation (SIPP), fall 1994. The SIPP provides information on the child care arrangements of the youngest three children of employed mothers in fall 1994. Fathers may have any employment status.

TABLE II.2

LIVING ARRANGEMENTS OF YOUNG MOTHERS IN THE TEENAGE
 PARENT DEMONSTRATION SIX YEARS AFTER ENROLLMENT
 (Percentage)

Living Arrangements	Camden	Newark	Chicago
Living with Another Adult ^a	50.7	50.9	48.4
Husband/partner	16.4	16.9	16.1
Parent/grandparent	22.6	23.2	24.8
Other adult	23.1	25.2	22.0
Living with Children Only	46.6	46.8	49.3
Living Alone	1.0	0.9	0.9

SOURCE: Kisker, Rangarajan, and Boller 1997, p. 114.

NOTE: Most young mothers in this sample enrolled in the Teenage Parent Demonstration program when they were 17 to 19 years old. By the time of the six-year follow-up survey, sample members were, on average, 24 to 25 years old.

^aComponents add up to more than the percentage living with another adult, because some sample members live in households with several adults.

TABLE II.3

LIVING ARRANGEMENTS OF YOUNG MOTHERS ENROLLED
IN THE NEW CHANCE DEMONSTRATION 42 MONTHS
AFTER RANDOM ASSIGNMENT

Living Arrangements	Percent
Living with Parent or Grandparent	21.3
Living with Husband or Partner	30.7
Living with Children Only	35.7
Living in Another Arrangement	12.3

SOURCE: Quint, Bos, and Polit 1997, p. 17.

NOTE: Sample members are young mothers who, as teenagers, had children and dropped out of high school. At 42 months after random assignment, the average age of these mothers was 22 years.

emergency. While it would be helpful to know the extent to which extended family members living together help each other with child care--either as main providers or backup providers--no one has analyzed information on living arrangements and child care arrangements to explore this issue. Differences by ethnicity and income level would likely show interesting patterns of family support across different cultural groups, although this would be limited to regular child care arrangements. Survey information would provide useful information on the use of family members for backup child care and how ethnicity and living arrangements affect the level of support.

Because welfare reform requires that all able-bodied adults work, other adults in the household may not be available to provide child care in emergencies. A study of Illinois AFDC recipients and recently employed former recipients found that only 25 percent of the parents interviewed lived in households with other adults and that 67 percent of these parents had no relative or friend who could help with child care (Siegal and Loman 1991).

We found that at least half the parents in households that receive welfare do not have other adults who are available to help with child care when regular arrangements break down or children are sick. Because fewer fathers are available to provide help with child care when parents are not married, single mothers appear to have less flexibility than married parents.

We expect even higher rates of inflexible family situations will be associated with welfare reform because parents with more family support or other forms of flexibility would have made the transition to employment already (Pavetti and Duke 1995). Moreover, work requirements and time limits imposed by welfare reform mean that other adults may also have to work. In a strong economy like the current one, fewer relatives and friends are available to provide child care because they will be working at jobs that would pay higher wages. Although working mothers may be able to make "split shift" arrangements with boyfriends or other relatives who could then provide child care in emergencies, such arrangements may not consistently meet the need for family flexibility and may be stressful to maintain.

2. Inflexible, Low-Wage Employment

Inflexible, low-wage jobs pose challenges for arranging child care. Characteristics of jobs held by low-income parents include nonstandard and changing work schedules, lack of sick or annual leave, and lack of health insurance.

The problem of inflexible jobs may be most acute when low-income parents begin working. Many jobs are most inflexible initially, which may unfortunately coincide with the parent's period of learning how to make reliable child care arrangements and the child's initial year of illness in group care. Most new jobs include a probationary period of six months to a year, when time lost from work for any reason may be more carefully monitored and could lead to dismissal. Even if the probationary period is short, the new employee will not have built up a stock of good will with the employer during the initial months of employment, when child care problems may be more common. This may also lead the parent to experience more negative repercussions in the event of a child care disruption.

a. Nonstandard and Changing Work Schedules

A high proportion of workers in many occupations work nonstandard schedules. In 1997, approximately 15.2 million full-time wage and salary workers, or almost one out of five full-time workers ages 16 and older, worked nonstandard hours (U.S. Bureau of Labor Statistics 1998).^{1,2} Furthermore, in 1997, only 82.9 percent of full-time workers were employed during regular daytime hours in a standard five-day work week (Monday through Friday), a slightly lower proportion than worked nonstandard schedules in 1991. The 1997 study did not look at part-time workers, but in 1991, only 32.7 percent of those working part time worked standard hours and days (Presser 1995).

The proportion of working mothers employed in jobs with nonstandard schedules is also high. Data from the fall 1991 Survey of Income and Program Participation (SIPP) indicate that approximately 37.3 percent of working mothers with children under age 15, or 7.2 million mothers, worked nonstandard shifts. Of these, about 2.5 million worked rotating or irregular schedules (Casper et al. 1994). Similarly, one-third of working-poor mothers responding to the *National Child*

Care Survey 1990 worked weekends, and just under 10 percent worked during the evening or at night. Almost half of the working-poor respondents worked on rotating or changing schedules (Hofferth 1995). The 1993 and 1994 child care modules of the SIPP also asked working mothers about nonstandard work schedules, but the data have not yet been analyzed by the Census Bureau.

Mothers who leave welfare for work are even more likely to have jobs with nonstandard schedules. Presser and Cox (1997) analyzed work schedule data from the May 1991 CPS for a subsample of civilian women ages 18 to 34 with a high school education or less and a child younger than age 14. Because most welfare recipients have a high school degree or less and are young, we think that the work schedules of mothers leaving welfare for work are likely to be similar to those of this subsample (Burtless 1997).³ Presser and Cox's results indicate that, in 1991, only a little more than half (56.7 percent) of low-educated, employed mothers worked a standard daytime and weekday schedule. Furthermore, almost 16 percent of these mothers worked nonstandard hours and weekends.

The high rate of nonstandard work schedules among this population can be attributed primarily to the characteristics of the industry in which many low-wage, low-skill jobs are found. Although workers in almost all occupations may work nonstandard hours and days, service industry workers are more likely than others to work nonstandard schedules (Presser 1995; and Bookman and Furia 1995). The low-educated mothers in the subsample analyzed by Presser and Cox worked primarily in the service industry in relatively few occupations (Presser and Cox 1997). Almost half (45.9 percent) worked in just 15 occupations, with one-quarter working as secretaries, cashiers, nursing aides, waitresses, or child care providers. High proportions of mothers in these occupations worked during nonstandard hours or days. For example, about two-fifths of cashiers and nursing aides and

almost half of the waitresses in the subsample worked nonstandard schedules (Presser and Cox 1997).

Service sector jobs in which a high percentage of those employed work nonstandard hours and days are among the occupations expected to grow the most in coming years (Bookman and Furia 1995). Seven of the 10 occupations expected to grow the fastest over the next decade predominantly require nonstandard work schedules; of those seven occupations, six employ predominantly women (see Table II.4). Thus, the number of low-income mothers who work nonstandard schedules is likely to increase in the future. Almost half of all women with a high school education or less, and children under age 14 say that they work these schedules because the job requires it or because they could not get another job (see Table II.5).

Some mothers prefer to work nonstandard schedules. About one-quarter of mothers with a high school education or less say they prefer to work nonstandard hours because they can obtain better child care arrangements that way, presumably because a spouse, grandmother, or other family member is available to care for their children during nonstandard hours. The remaining mothers working nonstandard hours cited the availability of better care arrangements for other family members, time available for school, better pay, and other reasons. A preference for nonstandard hours because better child care is available is somewhat more common for married women and mothers of children younger than age 5 with a high school education or less (Presser and Cox 1997).

A study of shift work by all mothers found a higher incidence of involuntary shift work (Casper et al. 1994). About 71 percent of working mothers with children younger than age 15 said that their work shift was determined by job requirements rather than by personal choice. Only approximately

TABLE II.4

OCCUPATIONS WITH THE LARGEST PROJECTED U.S. JOB GROWTH

Job Growth Rank	Occupation	Projected Job Growth ^a (in Thousands)	Percentage Working Nonstandard Hours and Days ^b (May 1991)	Percent Female ^b (May 1991)
1	Salespersons	786	75.2	55.5
2	Registered nurses	766	67.4	96.7
3	Cashiers	670	80.2	80.2
4	General office clerks	654	17.5	80.5
5	Truck drivers	648	42.8	3.6
6	Waiters and waitresses	638	90.0	84.1
7	Nursing aides, orderlies, and attendants	595	75.9	89.0
8	Janitors and cleaners (including maids and housekeeping cleaners)	548	56.2	41.2
9	Food counter, fountain, and related workers	525	86.5	71.7
10	Computer scientists and systems analysts	501	14.4	33.6

SOURCE: Presser 1995, p. 594.

^aProjected job growth based on 1992 actuals and moderate estimates for 2005 derived by the U.S. Bureau of Labor Statistics.

^bThese data are based on the May 1991 CPS. The May 1991 CPS included a supplement about work schedules of first and second jobs.

TABLE II.5

LOW-EDUCATED MOTHERS' MAIN REASONS
FOR WORKING NONSTANDARD SCHEDULES

Main Reason for Working Nonstandard Shift	Women Ages 18 to 34 with a High School Education or Less and Children Under Age 14				
	Total	Youngest Child Under Age 5	Youngest Child Age 5 to 13	Married	Single
Better Child Care Arrangements	26.8	30.7	18.3	31.0	19.1
Could Not Get Any Other Job	5.9	7.1	3.3	4.7	8.0
Requirements of the Job	39.7	35.2	49.5	37.6	43.6
Other	27.6	27.0	28.9	26.7	29.3

SOURCE: Presser and Cox 1997, p. 29.

NOTE: These data are based on the May 1991 CPS. The May 1991 CPS included a supplement about work schedules of first and second jobs. To conduct their analyses, Presser and Cox used a subsample of May 1991 CPS respondents who were civilian women ages 18 to 34, had a high school education or less, had at least one child younger than age 14, had worked in at least one job for pay in the previous week, and whose primary job was not in an agricultural occupation.

14 percent listed obtaining better child care arrangements as their reason for choosing a work shift. Among mothers of preschoolers, 18 percent cited better child care arrangements as their reason for choosing a shift. Of the 7.2 million mothers working nonstandard hours, 1.4 million, or 19.4 percent, listed child care arrangements as their reason for choosing a nonstandard work shift.

The most recent empirical study of the incidence of nonstandard work schedules among low-income parents indicates that about half the parents who leave welfare to work are likely to work nonstandard schedules, and this proportion is likely to grow in the future. Moreover, about half of low-income parents who work nonstandard schedules do so because they have no alternative employment options rather than because they prefer these schedules. Although the data supporting these conclusions is somewhat old, and the studies cited need to be replicated with more current data, trends indicate that the magnitude of the problem is increasing rather than declining.

b. Lack of Sick or Annual Leave

Employed parents need leave time from work to care for sick children. Of all working mothers who responded to the National Child Care Survey 1990, 35 percent reported that one of their children had been sick on a work day during the previous month, and more than half of these women missed work to care for that child (Willer et al. 1991). Leave time to care for sick children is especially important for parents of young children. A recent study found that children in child care centers and family child care homes in San Diego and Seattle were sick for an average of four days per year, primarily with respiratory illnesses. Infants (under 1 year), however, were absent because of illness an average of eight days per year (Cordell et al. 1997). Many mothers leaving welfare for work are likely to have young children who will need care during frequent illnesses. In 1995, almost

half of welfare recipients' children were younger than age 6, and about one-quarter were younger than age 3 (U.S. House of Representatives 1998).

Poor children and children in welfare families are more likely to have more serious health problems. Children from low-income families are more likely than those from higher-income families to have been born prematurely and at low birthweight, which can put them at risk for a variety of physical health problems (Institute of Medicine 1985). These children are also more likely to suffer from intrauterine exposure to drugs or cigarettes, which can lead to a range of health problems (Klerman 1991). They are more likely to be reported as having fair or poor health and to have an activity limitation because of health (Zill et al. 1991). They are more likely to suffer from asthma (Wissow et al. 1988). These health problems may lead to even more absences from child care, causing parents to miss work.

Many women who leave welfare for work find employment in low-wage service occupations that offer no fringe benefits such as sick or annual leave (Hershey and Pavetti 1997). For example, focus group participants from a job-retention program for former welfare recipients said that they had no paid sick leave and could not adjust their schedules to care for sick children (Rangarajan 1996). Many of these mothers did not have other family members who could provide backup care for a sick child, and some said they had been fired or given a reduced number of work hours because of absences to care for sick children.

More flexible employment policies may be the best way to address the problem of caring for sick children. Research is needed on the costs and benefits to employers of providing paid or unpaid leave or flexible work schedules to allow employees to care for their sick children.

c. Lack of Health Insurance

Because young children frequently have illnesses, and because this problem is exacerbated by group child care, family health insurance coverage is essential for mothers who leave welfare for work. Research suggests, however, that fewer than half of those who leave welfare have health insurance after three years (Moffitt and Slade 1997). For example, a study of AFDC recipients who received employment and training services through New Jersey's Realizing Economic Achievement Program (REACH) found that 47 percent of those who left welfare for work had health insurance three years later. A study of California's Greater Avenues for Independence (GAIN) program found that 25 percent of those who left welfare for work had private health insurance two to three years later. In addition, an analysis of data from the National Longitudinal Survey of Youth (NLSY) on mothers who left AFDC showed that 23 percent of mothers and 21 percent of children had health insurance through an employer one year after leaving welfare. After three years, these figures rose to 38 percent of mothers and 47 percent of children. However, half of those covered by employer-provided insurance after three years had coverage through a spouse's health plan, and the rate of coverage through the women's own jobs remained low.

The rate of employer-paid health insurance coverage for women leaving welfare for work under Temporary Assistance for Needy Families (TANF) will probably be lower than the rates cited in these studies. Women who left welfare for work under the former AFDC program tended to be those with higher levels of education, more job experience, and fewer children. These women were more likely to find higher-wage jobs with health insurance benefits (Moffitt and Slade 1997). The time limits imposed under TANF will require a much larger group of women, including those with low levels of education and job experience, to leave welfare for work. These less skilled women are not as likely to find jobs that provide health insurance.

However, the Balanced Budget Act of 1997 created the State Children's Health Insurance Program (S-CHIP) to enable states to expand Medicaid coverage or other health insurance programs for children from families with incomes below 200 percent of the poverty level (Weil 1997). Under this program, states have the option of expanding Medicaid coverage for children by raising the maximum allowable family income for this program. States can also expand existing state health insurance programs for children by increasing the number of slots available or increasing the family income limits for these programs. Therefore, even though children of parents leaving welfare for work may not have private health insurance coverage through their parents' employer, many may have access to coverage through state S-CHIP programs.

3. The Limited Supply of Flexible Child Care

The existing supply of child care poses challenges for parents with inflexible jobs and nonstandard work schedules, and research has explored the incidence of these problems. Issues include the availability of child care options during nonstandard schedules, substitute providers when regular arrangements are not available, child care for children who are ill, and child care options for school-age children during school holidays and summer vacations. The use of family or friends for child care can address many of these issues, but it raises others.

a. Limited Supply of Child Care During Nonstandard Schedules

Based on empirical research reviewed in Section II.A.2, we estimate that about half the parents leaving welfare for work are likely to work during nonstandard schedules and that this proportion may increase over time. About one-quarter work nonstandard hours because they can arrange better child care, while the other one-quarter worked nonstandard hours because the job required that they do so. These parents do not necessarily have access to better child care during these work hours.

Most observers have noted a mismatch between the job schedules of many low-wage workers and the schedules maintained by centers and regulated family child care providers. A comparison of the proportion of parents working nonstandard schedules to the supply of these regulated child care arrangements indicates that supply appears to fall far short of the projected need for child care arrangements during nonstandard hours (GAO 1997; Collins and Li 1997).

Most of the data about the supply of child care during nonstandard hours (including weekends) have been collected about regulated child care providers by accessing the databases of resource and referral agencies. These sources provide good coverage of licensed and regulated providers, but only limited coverage of child care arrangements outside the state regulatory system. For example, the U.S. General Accounting Office (1997) recently estimated the supply of child care in four communities using information from resource and referral databases and found that care during nonstandard hours and days was available from 12 to 35 percent of providers, depending on the community. Most providers who offered care during nonstandard hours and days were family child care homes rather than centers.

Similarly, Collins and Li (1997) estimated the supply of regulated child care in Maryland and Illinois during April 1996 by extracting data from statewide child care resource and referral databases. Their study included data on all licensed family child care homes, licensed child care centers, and "license-exempt" centers in Illinois. The results indicate an extremely limited supply of regulated child care arrangements during nonstandard hours, especially in poor communities within these states.

Collins and Li (1997) estimate that there are 211 regulated child care slots per 1,000 children under age 13 in the state of Maryland. Of those slots, 99 are open for extended hours (from at least 7:30 A.M. to 6:00 P.M.). However, in zip codes with the highest proportion of families living below

or near poverty, only 41 extended-hour slots are available per 1,000 children. Only 0.1 slot per 1,000 children provides overnight care, and only 1.2 regulated child care programs per 1,000 children provide weekend care.

In Illinois, Collins and Li (1997) found approximately 148 regulated child care slots per 1,000 children under age 13. Of those, 61 provide care during extended hours, and most of these slots are in high-income communities. In zip codes with low proportions of poor families, 130 extended-hour slots are available per 1,000 children. In contrast, only 55 extended-hour slots per 1,000 children are available in zip codes with the highest proportion of poor families. Availability of overnight and weekend care is also severely limited. In Illinois, only 0.5 slot per 1,000 children is available for overnight care, and 0.3 program per 1,000 children provides weekend care.

These studies indicate a severely limited supply of regulated child care arrangements during nonstandard hours and days, especially compared to the expected proportion of low-income parents who will need to work during these hours. However, lack of information about parents' preferences for child care arrangements during nonstandard work schedules makes it difficult to determine whether this supply of regulated child care arrangements is sufficient to meet the demand among low-income parents. During evening, night, and early morning hours, many parents may prefer to place their children in the care of relatives or friends in a homelike setting, rather than in child care centers or even in the homes of unrelated family child care providers.

However, we expect that about one-quarter of low-income parents have inflexible job situations and may not have trusted relatives or friends who can help with child care. For these parents, child care centers may be the preferred option even during evening, night, and early morning hours because low-income parents may find regulated care more trustworthy than unregulated care (Porter

1991). We do not know how much the scarcity of center-based care in low-income neighborhoods contributes to parents' choice of relatives and neighbors for child care.

We found two studies that provide data on the supply of unregulated child care arrangements during nonstandard hours, but both are somewhat dated. *A Profile of Child Care Settings*, a national survey of child care providers conducted in 1990, collected data on the supply of child care during nonstandard hours from both regulated and unregulated providers (Willer et al. 1991). According to these data, 10 percent of child care centers provided care during weekend hours and 3 percent provided care during evening hours. Six percent of family child care homes provided care during weekend hours. A higher percentage of family child care homes--13 percent of regulated homes and 20 percent of unregulated homes--provided care during evening hours (Willer et al. 1991).

Siegal and Loman (1991) collected data on the supply of center-based and home-based child care arrangements available during nonstandard hours and available to parents leaving welfare for work in Illinois in a study of the child care needs and experiences of AFDC recipients. This study included a survey of single parents with children under age 14 who received AFDC or had recently left AFDC for employment and a survey of child care providers across the state. Half the parents who were employed had jobs that included some evening or weekend hours. About 64 percent of all parents surveyed reported difficulty arranging child care during weekend and evening hours. Only eight percent of child care centers surveyed provided care after 6 P.M., and only three percent provided care during weekend hours. A much higher percentage of family child care providers (35 percent) provided care during evening hours and on weekends. Relatives and friends supplied the most care during nonstandard hours, with 6 out of 10 of these providers caring for children after 6 P.M. and on weekends.

In addition to working nonstandard hours and days, many parents who leave welfare for employment will find low-wage jobs that require frequent changes to their work schedules. A changing schedule represents a serious obstacle to arranging child care because most child care providers require regular attendance (Hofferth 1995). Siegal and Loman (1991) found that many employed parents in their sample worked part time, intermittently, or on changing schedules. However, most of the child care centers and licensed family child care providers they surveyed said that they would not accept children on an intermittent or changing basis. Most parents with these types of schedules used relatives, friends, and multiple providers. We do not know how many parents in the study preferred using relatives and friends and how many used these providers because they did not have other alternatives.

b. Lack of Substitute Providers When Regular Arrangements Are Not Available

Although relatives and friends may be willing to provide child care during hours that match parents' schedules, these arrangements are less dependable because providers quit, become ill, or are unable to provide care for other reasons. When this happens, many parents do not have leave time from work or the financial ability to take unpaid time from work to arrange for a substitute provider. Siegal and Loman (1991) found that 70 percent of the parents in their study reported problems arranging care when their regular providers could not work. All these parents used relatives or friends as their regular child care arrangement. Furthermore, parents reported that frequent breakdowns in child care arrangements with friends and neighbors drove them to use a series of arrangements rather than one regular provider.

Focus group participants from a job-retention program for former welfare recipients said that child care arrangements with family and friends often broke down because the provider found a job,

moved, or decided that providing child care was too difficult (Rangarajan 1996), although the study did not indicate how successful these parents were at finding backup care arrangements. Gilbert et al. (1992) reported similar findings in a study of GAIN participants. During the first three months after enrollment in GAIN, 36 percent of mothers reported needing alternative arrangements because their regular child care provider could not work or because children needed care during a school holiday. Even when relatives or friends provide a stable source of child care, parents will need backup arrangements for provider illness and other emergencies, but they may not have other resources.

Although the Siegel and Loman (1991) and Gilbert et al. (1992) studies provide important information about the problems parents face in arranging substitute child care, both are dated and are each limited to employment and training participants from a single state prior to welfare reform. The extent of problems with making backup child care arrangements needs to be measured among a broader and more current population of low-income parents.

c. Lack of Care for Ill Children

Taking time off work to care for sick children remains a serious problem for parents, but child care options for even mildly ill children are extremely limited. Children who are too ill to attend their regular child care arrangements need to be cared for apart from other children, a fact that presents serious cost and logistical implications for child care providers. Poor children may have a high incidence of health problems and illness, which make this an ongoing problem for parents. In this section, we review what is known about the supply of child care arrangements for children who are sick, although we recognize that out-of-home care for children who are ill is difficult to structure and is not necessarily the best policy option for addressing this problem (see Chapter III).

Data from A Profile of Child Care Settings indicate that family child care homes, especially unregulated homes, are much more likely than centers to care for children who are sick (see Table II.6). Results of a survey of AFDC mothers conducted by Sonenstein and Wolf (1991) indicate that centers are the least likely child care setting to accept sick children. Mothers in this study who used centers reported that they missed an average of six days of work or school in the previous eight months because of a child's illness, compared to one day on average for mothers who used other types of care. Cordell et al. (1997) also found a higher incidence of reported illness among children in home-based care compared to center-based care, but children in centers had a higher rate of absence.

TABLE II.6
 AVAILABILITY OF CHILD CARE FOR SICK CHILDREN

Type of Child Care Provider	Percentage of Providers Willing to Accept Children with Various Conditions		
	Severe Cough	Feverish Appearance	Rash
Center	10	6	3
Regulated Family Child Care	25	20	10
Unregulated Family Child Care	50	50	36

SOURCE: Willer et al. 1991, pp. 28-29.

NOTE: These data are taken from the National Child Care Survey 1990.

Siegal and Loman (1991) found similar results. Approximately two-thirds of parents in their study reported problems arranging child care for sick children. Of the child care centers surveyed, only one in eight said they would provide care to children with an illness such as a cold, fever, or flu. In contrast, 59 percent of regulated family child care providers said that they would care for children with such illnesses, and an even higher proportion of unregulated providers said that they cared for sick children.

In a survey of single mothers participating in California's GAIN program, Gilbert et al. (1992) also identified lack of care for sick children as an obstacle to working or attending school. During their first three months of participation in GAIN, 59 percent of mothers had to make alternate arrangements for sick children, and 48 percent missed work, school, or training to care for a sick child.

The survey results from these studies indicate that about 90 percent of centers, 50 to 75 percent of regulated family child care providers, and about 50 percent unregulated child care providers will not accept children who are ill. Most low-income parents have difficulty arranging alternative care for their sick children and frequently miss work to care for them. Broader and more current measurement of the supply of child care for sick children and the extent of work-related problems associated with the lack of such arrangements is necessary to solve this problem.

d. Lack of Child Care for Children With Special Needs

Children from low-income families are more likely than other children to have health problems and behavioral problems that can make it difficult to place them in child care arrangements (Zill et al. 1991; Klerman 1991). Providers may be unwilling to accept a child with chronic or potentially life-threatening health problems because they may feel unprepared to handle a medical emergency.

Parents may have a greater preference for relatives or trusted friends to care for the child who has a health condition to ensure appropriate surveillance of the child's condition and appropriate treatment in the event of a problem. However, high-quality child care with trained medical staff available could be even more effective in alleviating concerns about the medically frail child while the parent works. In the Infant Health and Development Program, low-educated mothers of premature, low-birthweight infants returned to work two months earlier and worked more continuously when they had access to high-quality, center-based care for their one-year-old children (Brooks-Gunn et al. 1994). The control group had access to community-based child care, but not the high-quality centers used by children in the intervention group.

Children from low-income families are more likely than those from higher-income families to have behavioral problems or learning disabilities that make it more difficult for children and adults to interact with them (Zill et al. 1991). These characteristics may make it more difficult to place these children in a care arrangement, or to maintain that arrangement over time.

e. Lack of Child Care for School-Age Children During Holidays and Summer Vacations

Parents of school-age children need affordable child care arrangements for school holidays and summer vacations. In their study of implementation issues in states' welfare reform efforts, Pavetti and Duke (1995) found that program participants experienced difficulties in arranging child care for their school-age children during school holidays and breaks. Some parents may be able to make child care arrangements with relatives, friends, or neighbors. Other parents have inflexible family situations and will not be able to rely on relatives or friends to help with child care during school holidays. These parents will need to search for child care centers or home-based providers who could care for their children on those days.

In their study of welfare recipients and former recipients who had recently left welfare for employment in Illinois, Siegal and Loman (1991) found that 74 percent of centers and 82 percent of family child care homes were open on school holidays. However, 64 percent of parents in their study reported problems arranging care for school-aged children during holidays and breaks. Parents may have had difficulties arranging care despite the availability of regulated arrangements because regulated providers, although open, had a limited number of available slots. In addition, parents who need child care only when school is out are not likely to have ongoing relationships with child care providers and may not be aware of their options for child care on school holidays.

4. The Adequacy of Parents' Social Networks as a Solution to the Child Care and Job Flexibility Problems

Many low-income parents use relatives, friends, and neighbors as caregivers. These choices partly reflect parents' preferences and degree of trust. Parents prefer to have children cared for within the family itself. If the parent must go outside the immediate family for child care, the second choice is a close relative, such as a grandmother or aunt. The next level includes the parent's very close social network--a friend who is "like a sister or a mother." A parent who must cast a wider net then turns to people in the neighborhood.

After exhausting all of these familiar sources, a parent might consider market child care and seek out names from a bulletin board or a referral list, or look to the recommendations of friends. However, this may be less preferable--the parent would feel that she knows a great deal more about the quality of child care if it were provided by a close relative or friend than if it were provided by someone on a licensing or referral list. Child care provided by a close relative or friend may also be more flexible because the caregiver is more involved with the family and may be willing to

provide extra support when needed. Parents may also choose relatives to care for children in order to keep money in the family.

Another factor in child care choice may be ethnic background or shared language and special family situations (for example, the degree of closeness between the child's mother and grandmother may influence whether the child's grandmother is asked to provide child care).

Nevertheless, the observed patterns of child care demand--low-income parents choose relatives and unregulated providers more frequently than licensed providers--are contingent on the current supply of child care in low-income neighborhoods, its quality, and its cost. In dangerous neighborhoods where the quality of centers and registered family child care homes is poor, it is not surprising that parents would choose familiar people to care for their children. Many parents would agree that having close family members care for children is preferable to using someone outside the immediate family. However, not everyone would agree that relatives, friends, and people in the neighborhood are better caregivers than someone who provides child care as a profession and runs a high-quality program that is responsive to parents' concerns that the child be in a cultural and language environment similar to the one at home. If the quality and cost of market options were improved dramatically, some parents might not choose to use relatives and unlicensed neighbors as often.

The difficulty of finding centers that operate during nonstandard hours, as well as a preference for home-based care arrangements during nonstandard hours, leads more parents to choose relatives or familiar adults to care for children during those times. A substantial proportion of parents choose to work nonstandard hours so they can use family members or relatives who could not care for the children during normal work hours. In 1994, relatives provided care for 55 percent of all preschool-age children whose mothers work a nonday shift, compared to only 35 percent of children whose

mothers work during the day (see Table II.7). Furthermore, 71.4 percent of children whose mothers worked non-day shifts received care in their own home or their provider's home, compared to 59.1 percent of children whose mothers worked during the day.

Even when a parent prefers having a relative or friend care for the child, problems may arise. A number of studies indicate that child care arrangements with friends, neighbors, or relatives end to be more unreliable than regulated arrangements, providing less support for the mother's

TABLE II.7
PERCENTAGE OF CHILDREN YOUNGER THAN AGE 5 WHO ARE
CARED FOR BY RELATIVES, BY MOTHER'S WORK SCHEDULE

Child Care Provider	Mother's Work Shift	
	Non-day Shift	Day Shift
Relative	55.4	35.4
Father	28.3	11.6
Grandparent	17.1	15.6
Other relative	10.0	8.2

SOURCE: Casper 1997, Table 2.

NOTE: This table is based on data from the Survey of Income and Program Participation (SIPP), fall 1994. The SIPP provides information on the child care arrangements of the youngest three children of employed mothers in fall 1994.

employment activities (Gilbert et al. 1992; Hofferth 1995; Presser and Cox 1997; Rangarajan 1996; and Siegal and Loman 1991). Because child care provided by friends, relatives, and neighbors often breaks down, parents who rely on these arrangements tend to change child care providers frequently, which can be stressful for both the child and the mother. Siegal and Loman (1991) found that because these arrangements were often temporary and unreliable, many parents used a sequence of temporary providers rather than one regular arrangement. In fact, during follow-up interviews, most parents using friends or relatives to care for the child said they had changed providers in the previous 90 days. Most of these changes were caused by changes in the providers' ability to provide care, such as changes in employment status, work hours, school hours, or residence. Other parents reported that they changed child care arrangements because providers were unreliable.

In addition to changing providers frequently, many low-income parents use more than one relative or friend and "patch" together child care to accommodate their work and school schedules and to arrange substitute providers when regular arrangements break down. Of all low-income respondents to the National Child Care Study 1990, 24 percent of children under age 5 had been placed in more than one regular child care arrangement (Brayfield et al. 1991). The use of multiple arrangements was highest for low-income families headed by an employed, single mother. In those families, 45 percent of children under age 5 were placed in more than one regular child care arrangement. Siegal and Loman (1991) reported that one of every five children in their study population was cared for by two or more providers each week. Parents who worked nonstandard schedules, single parents who worked part-time schedules, and single parents who worked and attended school were more likely than others to use multiple providers. Similarly, Gilbert et al. (1992) reported that nonstandard and changing work schedules led to reliance on multiple providers among parents. However, when parents turn to multiple friends and relatives to provide child care

that meets their scheduling needs, they have to worry about potential breakdowns in several child care arrangements, rather than just one.

To address these issues, the problems and benefits associated with the use of informal child care arrangements must be measured among a broad-based sample of low-income parents. The Low-Income Child Care Study⁴ could provide measures of the frequency of disruptions in these care arrangements and the reasons, as well as the frequency with which parents need to coordinate several of these arrangements. What kinds of information would help parents set up more reliable child care arrangements with family and friends, and what supports might increase the reliability of these arrangements?

B. LACK OF FLEXIBILITY AND EMPLOYMENT RETENTION

This section discusses the impact of inflexible jobs and child care on employment retention. Very little research has focused on this relationship, so we also consider research questions that need to be answered to understand the relationship between flexibility and employment retention.

1. Inflexible Jobs and Child Care Arrangements: Impact on Employment Retention

Information from some state-specific surveys and focus groups of working parents who received AFDC or recently left welfare indicates that child care difficulties associated with inflexible jobs and nonstandard work schedules causes work-related problems for parents. These parents have experienced reduced hours, change in status from full- to part-time work, and even job loss because of child care problems (Rangarajan 1996; Siegal and Loman 1991). Focus group participants in a job-retention program for former welfare recipients said that difficulties matching child care and work schedules were a major source of work-related problems (Rangarajan 1996). Those who were able to arrange child care often had so little flexibility that minor scheduling problems caused them

to be late for work and affected their employment. Many of these mothers did not have reliable backup arrangements when their children were sick or regular providers could not work, so absences from work also resulted in employment problems.

Siegal and Loman (1991) found that parents faced similar difficulties with employment. The child care arrangements available to parents who worked nonstandard schedules were so unreliable that sustaining full-time employment was almost impossible. The study found that the type of employment parents could obtain limited their child care options, and the unreliable child care that parents found, in turn, limited their ability to find better employment. In fact, 20 percent of parents in the study population had returned to welfare in the past year because of child care problems.

2. Understanding the Link Between Flexibility and Employment Retention

Identifying the best option for increasing employment retention for parents leaving welfare for work requires more research about the relationship between flexibility and employment retention. Ideally, this research would combine Emlen's insight that the three dimensions of flexibility must be measured simultaneously with some of the measures developed in the separate literatures on each type of inflexibility (for example, job schedules, paid leave time). The research would also relate flexibility to employment outcomes. In addition, research should attempt to learn more about the degree of flexibility necessary in family situations, employment, and child care situations to have an impact on employment retention. Little is known about the types of inflexibility faced by low-income families who cannot balance employment and child-rearing because those who do not remain employed are not likely to appear in cross-sectional studies of workers who are asked about the degree of work, family, and child care flexibility they have. Once we understand better what types

or combinations of inflexibility pose the greatest stumbling block to employment success, we can focus on solutions to those situations.

Research about the links between flexibility and employment retention should examine the following questions:

- How can we best measure the degree of flexibility in each of the three dimensions identified by Emlen: family situations, employment, and child care arrangements?
- Does flexibility in each of these domains have the same impact on employment retention, or is flexibility in one of them preferable to the other two? For example, is flexibility in child care arrangements more important for maintaining employment than flexibility at work?
- What is the cost to employers of increasing job flexibility, and how much impact would this have on employment retention? Employer costs might include more absenteeism, disruptions to productivity caused by absenteeism, and more management time required to monitor employees' work hours and productivity. How could flexible policies benefit employers? What incentives might encourage employers to adopt flexible policies?
- What would be required to help low-income parents develop more flexible family support arrangements, and how much impact would this have on employment retention?
- What is the cost to child care providers of increasing child care flexibility, and how much impact would this have on employment retention? Provider costs might include greater stress from working longer hours on short notice; for home-based providers, more stress from balancing child care business needs with the needs of their own family members; and for center-based providers, paying higher salaries for qualified staff to work during nonstandard hours. How could greater flexibility benefit child care providers?
- In what other ways does a lack of flexibility in family situations, employment, and child care affect employment? To what extent do flexibility problems result in negative employment outcomes other than job loss (such as reduced number of work hours, reduction from full-time to part-time status, or failure to advance in a job)?

In the next chapter, we discuss options and models of good practices for increasing flexibility for low-income working parents.

¹These estimates were taken from a special supplement to the May 1997 Current Population Survey (CPS), which included questions about work schedules. A previous survey was conducted in May 1991. Unfortunately, most of the analyses of the work schedules of part-time workers and low-skilled women have not yet been updated using the 1997 data.

²Nonstandard work hours are work shifts that include early morning, evening, night, or changing hours.

³National data on AFDC recipients in 1995 indicate that about 46 percent of those with a high school education or less fell into the subgroup with less than a high school degree (U.S. House of Representatives 1998). These AFDC recipients face particular labor market disadvantages because they lack a basic educational credential. While it would be helpful to also have information on work schedules for this more educationally disadvantaged group, the authors did not present information separately for this subgroup.

⁴The Low-Income Child Care Study is a five-year project that will examine the supply and demand for child care and the effects of child care and welfare policy on child care markets in 25 low-income communities within 17 states. In 5 of the study communities, researchers will also conduct a parent survey on employment and child care choices and measure the quality of child care arrangements. The study is being sponsored by the Administration for Children and Families, DHHS, and is being conducted by Abt Associates, Inc., and the National Center for Children in Poverty, Columbia University.

III. POLICY OPTIONS

Empirical research suggests that, under welfare reform's more stringent work requirements, many parents may be obliged to accept inflexible jobs. Many of these parents may not be able to arrange safe, flexible, reliable child care. Although the available data do not document clearly the extent of this problem among low-income parents, evidence suggests that some welfare recipients fall into this category. To support the work efforts of this group, parents need help to make arrangements with family and friends who can respond to work and child care emergencies. Incentives or requirements for employers to offer greater flexibility in jobs or the use of community-based talent and organizations to develop systems of flexible child care options would also help meet the needs of low-income families in the community.

In this chapter, we review policy options and promising models for increasing flexibility in family support, employment, and child care arrangements. The literature identifies ways in which employers and community agencies have developed employment policies that provide flexibility to meet child care problems and child care options to accommodate difficult or inflexible job requirements (Bookman and Furia 1995). These employment and child care solutions tend to be the exception rather than the rule, however. The literature does not go beyond a description of the models to discuss the circumstances under which these models occur, why they are not more common, and how they can be adapted for low-wage workers.

We have considered the economic rationale underlying the existence of these promising models and the way the models could be extended to more adequately meet the need for flexible jobs and child care arrangements for low-wage workers. Because many of the models have been developed by large employers, their approaches must be adapted for parents who work for small businesses.

In some cases, the models have been developed for middle-class and higher-wage workers, so we discuss the economic rationale for and/or barriers to extending these models to a lower-wage population. In many cases, the economic constraints on extending the models to a low-wage and small-business employee population are so great that involvement of community-based organizations and the public sector may be needed to bring together parties with a common interest, generate ideas, implement a solution, or help subsidize a program.

A. INCREASING FAMILY SUPPORT

Although we do not expect the public sector or private employers to influence family structures, they could help provide working parents information about how to manage their work and child-rearing responsibilities. This information could focus on the need to plan for contingencies like sick child care or a provider's absence and on creative strategies for meeting these contingencies. Emlen identifies the parent's initiative in developing flexible solutions for the family as a fourth source of flexibility (Oregon Child Care Partnership 1997). One answer to the problem of inflexible jobs and child care is counseling and assistance for parents who are just beginning to combine work with child-rearing or who have not previously been successful in finding flexible solutions.

Several opportunities already exist for providing information and assistance to low-wage employees with children. Employers could provide this information during job orientation, and they may benefit from doing so to prevent lost time from work or employee turnover later on. Agencies that help welfare recipients prepare for jobs through orientation to the world of work or job search assistance seminars could include information about finding child care arrangements that support inflexible work schedules and creative planning for child care emergencies. In addition, community-

based child care resource and referral agencies that provide other child care counseling to welfare clients could include this information.

We have not found an organization that has developed information and counseling to encourage parents to think about jobs, child care, and family support together and to understand that one or more of these need to provide some flexibility. Some organizations may address these issues in part by emphasizing the need for reliable child care arrangements. We believe, however, that a fuller treatment of these issues and individual counseling for parents who are finding it difficult to develop solutions would help low-income parents succeed as parents and employees.

Without the ability to evaluate the effectiveness of this counseling, it is difficult to determine which organizations might be most successful in offering it, how intensive the counseling needs to be, when it should occur to have the greatest impact, and how much impact the counseling might have on absenteeism or job retention. We feel this is a relatively low-cost and potentially beneficial policy option that could be implemented either alone or in combination with other options.

B. INCREASING FLEXIBILITY IN LOW-WAGE JOBS

Increasing flexibility in employment is one strategy for helping low-income parents successfully manage work and child-rearing responsibilities. Some jobs provide a great deal of flexibility, permitting workers to choose their work schedules or take sick or annual leave to provide backup care for their own children when providers are unavailable or children are sick. Employers are aware of how flexible jobs can help workers balance jobs and family responsibilities and of what types of policies can be most useful to employees.

However, employers who pay very low wages and provide no benefits, including sick or annual leave, they may view these policies as too costly. Jobs that are part of a production process may

require punctuality and regular attendance because the work cannot be done as well when someone is absent. Employers have no incentive to tolerate absences, because they can easily replace workers who cause disruptions. Similarly, rotating schedules and nonstandard hours may be necessary because of production schedules or the nature of the work, making it impossible to accommodate those who have difficulty finding child care during these work schedules. These problems are exacerbated in job markets with a few major employers of low-wage workers, because employers do not have an incentive to increase flexibility even if they could be more accommodating.

We have found no studies that look systematically at the conditions under which low-wage employees have benefits such as sick or annual leave or evaluate what it would take for employees to acquire these benefits in a firm that provides benefits to one group of employees but not to another. For example, how common is job tenure as a condition of receiving benefits? What other criteria are used to qualify employees for benefits? Is it possible for low-wage employees to qualify for benefits like sick or annual leave, or do other characteristics of the job (for example, temporary employment) preclude some employees from qualifying?

Some creative strategies use technology to bring a measure of flexibility to an inflexible, low-wage work situation. The J.C. Penney department store chain has implemented a computer system for employee scheduling that enables parents to change their schedules almost daily and to match their scheduling needs with the company's need for workers. In addition, the company permits employees to work at any of the stores in a broad geographic area, rather than at just one store, which provides increased scheduling options.¹

Additional research on the benefits and costs to employers of work-place flexibility options like flex time and flex place would be helpful. Additional options for increasing parents' flexibility range from creating job-sharing opportunities or employee backup systems to increasing scheduling

flexibility. Many creative options for improving job flexibility should be evaluated in a cost-benefit framework. Employers are more likely to create these alternatives when they see that the economic benefits outweigh any costs. These policies have been easy to justify for skilled workers because turnover costs can be extremely high. It has been more difficult for employers to see the benefits of such policies for low-wage workers. Nevertheless, employers can overestimate the risks of a new policy. Research examining the costs and benefits of such policies, and ways they can efficiently be set up, might give employers the necessary impetus to adopt flexible policies.

Another tool the government has is to regulate changes in employer behavior. Historically, the government has used regulations to ensure basic, universal labor standards, such as the minimum wage, the length of the work week, and the minimum age at which children may work. Most recently, the Family and Medical Leave Act (FMLA) of 1993 required employers to provide 12 weeks of unpaid, job-protected leave in a 12-month period for employees to accommodate a specific family or medical reason such as the birth or adoption of a child. The act applies to all public agencies and to private sector employers who employ 50 or more employees and who are engaged in an industry or activity affecting commerce. At the time the law took effect, one-quarter to one-third of formal employer policies matched FMLA rules regarding the length of and reasons for leave (U.S. Department of Labor 1996). Currently, only about one-tenth of private sector U.S. worksites are covered by FMLA, but approximately two-thirds of the U.S. labor force work for employers (both public and private) covered by the FMLA. Fewer employees actually qualify for FMLA benefits, however, since the FMLA also contains individual worker qualifications. Only 55 percent of the labor force actually qualifies for FMLA benefits by also meeting the FMLA length-of-service and hours-related eligibility requirements (U.S. Department of Labor 1996). The proportion of employees who are eligible for FMLA benefits and qualify for them is even lower for workers who

earn \$20,000 or less annually (42 percent), who have never married (41 percent), and those who have less than a high school education (47 percent) (U.S. Department of Labor 1996).

A recent study surveyed employers and employees about the effects of the FMLA (U.S. Department of Labor 1996). Nearly 17 percent of employees surveyed in 1995 had taken leave for a reason covered by FMLA, while another 3.4 percent said that they needed leave, but did not take it, usually because they could not afford the loss of wages (U.S. Department of Labor 1996). A significant majority of employers report that the policy is easy to administer and entails small or no costs. Most employers also report that the FMLA has no noticeable effect, either positive or negative, on productivity, profitability, and growth (U.S. Department of Labor 1996). Thus, the FMLA is an example of a government regulation that encouraged employers to adopt a policy that has benefits for workers with no or very low costs for employers.

Recent policy proposals have tended to favor increasing job flexibility by extending the FMLA. For example, President Clinton has proposed requiring employers to offer one day per year for parents to take their child to the doctor or to attend a parent-teacher conference. However, before these proposals to expand the types of approved absences can provide a solution to the problem of inflexible jobs for low-income workers, the population of workers covered by FMLA needs to be expanded to include more low-income workers. Research is needed on the cost to employers of extending the FMLA to cover more workers, as well as the potential benefits, so that lawmakers have the information they need to consider closing the large gaps in FMLA coverage among low-educated, low-income workers.

C. INCREASING THE SUPPLY OF FLEXIBLE CHILD CARE ARRANGEMENTS

Many different kinds of job inflexibility can be addressed by a broader range of child care options and greater flexibility from child care providers. A variety of child care responses may be necessary because working parents face several different job-related issues that require different kinds of flexibility from child care providers. For example, some parents need child care during nonstandard or rotating work hours, while others simply need access to backup child care arrangements when their regular provider cannot work.

In this section, we discuss policy options for increasing the supply of child care for parents who work nonstandard hours and days, for parents who work rotating schedules, for parents who need some type of backup child care arrangements, and for parents with sick children. Any child care solution that is put forward must be acceptable to parents who make decisions about how their children will be cared for while they work.

1. Increasing the Supply of Child Care During Nonstandard Hours and Days

Very little formal child care is available during nonstandard hours and days. Child care providers usually prefer to work during the day while they are caring for their own children, or while their own children are in school. They can generally find enough children to care for during these hours to generate an income. If they cannot find enough children to care for during standard work hours, they can look for other jobs that pay as much as or more than child care work. As a result, child care providers may require greater compensation to work during nonstandard hours. Usually, the need for child care during nonstandard hours is less common, so providers who decide to work nonstandard hours cannot fill enough of their slots to generate sufficient income. For this reason,

employers, unions, and community organizations have tried to develop child care options that address the need for child care during evening and weekend hours.

The most direct way to address the problem of finding acceptable child care during nonstandard hours is to find or establish child care slots that will be available on a reliable basis during those hours. To encourage parents to choose this care, it may be necessary to ensure that the care is less expensive to parents than other options, that the quality is high, and that the site is near the workplace or the homes of families, thus reducing commuting costs relative to other options. Employers and community-based organizations have used several strategies to provide child care with these characteristics.

Large firms that employ shift workers 24 hours a day may decide that on-site child care is a worthwhile investment. This type of child care is most commonly provided by employers in the manufacturing and service sectors. Notable examples are hospitals, the military, and an automobile manufacturing company. When employers design on-site child care centers, they can tailor the programs to meet the specific needs of their businesses and workers and to complement the child care arrangements already available in their communities. Hospitals and the military are extremely inflexible employers--they need their employees to arrive at work on time every day, and they require staff to work at all times of the day and at night. An on-site center could provide flexible child care when the job allows little flexibility. For example, the Toyota Child Development Center, in Georgetown, Kentucky, operates an on-site child care center that is open 24 hours a day and can serve up to 230 children ages 6 weeks to 13 years. In addition to meeting the needs of workers from all shifts, the program is designed to accommodate parents scheduled for overtime work. When the plant operates on weekend days, child care is available at the on-site center. Parents pay fees that are approximately 40 percent below the market rate for child care (Bookman and Furia 1995).

In each case, on-site child care is affordable, of high quality, and located near work. Subsidizing the care and making sure it is of high quality increases parents' willingness to use the care. When workers live in geographically dispersed neighborhoods, the workplace is the most acceptable location for the child care facility. On-site child care also enables the employer to demand sufficient flexibility from child care providers to accommodate the inflexible demands of the job.

Employers will have an interest in providing flexible child care if they face high turnover costs when employees leave. The three primary reasons employers cited for investing in on-site child care are attracting employees (especially during second and third shifts), retaining employees over time, and increasing employee morale (Bookman and Furia 1995). Establishing an on-site child care center entails substantial up-front costs and high ongoing costs if the care is to be subsidized (necessary for low-income workers). For many low-wage employers, however, workers can be easily replaced, the cost of training new workers is low, and only a few workers are needed. In such situations, on-site child care is not worth the investment for employers without substantial assistance from other organizations or public sources.

Community-based organizations can encourage and help employers with on-site care. In Burlingame, California, for instance, a group of community members representing unions, local governments, employers, and other community groups formed a nonprofit organization called Palcare to provide child care for workers at San Francisco International Airport and surrounding communities (Bookman and Furia 1995). Using public and private funds, the organization created a child care center licensed to serve 150 children 24 hours a day. A small employer investment, combined with public funds and funds from interested organizations and many relatively small employers, can thus establish a child care center for low-wage workers in an area of concentrated,

round-the-clock, service employment. We need to learn more about the incentives and costs of forming such a consortium, as well as the conditions under which such an arrangement could be replicated elsewhere.

Employers can also form partnerships with community child care providers to extend their hours to cover the work schedules of their employees. For example, Con Agra Refrigerated Foods collaborates with Northwest Arkansas Head Start in Huntsville, Arkansas, to provide child care for its low-wage workers over a period of nearly 24 hours. Con Agra provided funds for initial start-up costs, which allowed the agency to expand its early childhood program to provide child care for children of all ages from 5:00 A.M. to midnight and on Saturdays when the company's plant is in operation. Con Agra purchases a specific number of slots from the agency and provides child care subsidies to employees (Mitchell, Stoney, and Dichter 1997). Learning more about the conditions that make this model appealing to the employer could help in designing ways to replicate it elsewhere.

A strategy that could require less initial investment and less control by employers, but that may yet help employees find acceptable child care during nonstandard hours is to reserve slots in existing child care centers and family child care homes for children of employees. In such a strategy, slots would be subsidized, located near employees' homes or the workplace, and operated in accordance with certain quality standards. A related strategy is to recruit and train family child care providers in target neighborhoods (near the workplace or employees' homes) when few such care options exist. These options permit smaller investments in child care slots, which can be targeted to meet urgent needs or to help retain employees when training costs are high.

The strategy of reserving slots may be used when employers are large but both workplaces and homes are dispersed over numerous geographic locations. For example, the Massachusetts Bay

Transportation Authority (MBTA) operates the Reserved Slot Child Care Program, designed for employees who work a variety of schedules at a large number of locations. The MBTA contracts with 32 licensed child care centers in the Boston area to provide child care for its employees. When evaluating providers for inclusion in the program, the MBTA Child Care Committee considers geographic location, hours of operation, and ages of children served to ensure that contracted slots meet employees' needs. The MBTA subsidizes child care for its employees on a sliding scale based on income, ages of children, and employee status (Bookman and Furia 1995).

All the strategies have been developed by large businesses or to serve large numbers of employees concentrated in one location, such as at San Francisco International Airport. These strategies would be more difficult to implement for parents who work in small businesses, where developing on-site or near-site child care is not feasible. As shown in to Table II.4, some occupations with the largest projected U.S. job growth and high percentages of employees who work nonstandard hours are service industry jobs, where many employees work for small businesses (for example, salespersons, cashiers, and waiters/waitresses). Thus, a substantial proportion of parents leaving welfare for work are likely to be employed in small businesses for which on-site child care is not an option. Multiple strategies will be needed to address gaps in the supply of child care available to these parents. For example, part of the solution may be to encourage large employers who offer on-site or near-site child care to make a portion of their slots available to other employees in the community.

In addition, public agencies could extend Con Agra's approach of forming partnerships with Head Start or other early childhood education providers to areas of concentrated, low-wage, nonstandard-hours jobs that may also be home to high-quality early childhood programs. With community support and parent fees, early childhood programs such as Head Start, public preschools,

and other center-based arrangements could expand their hours of operation to provide extended care for children in their programs. State governments could fund extended hours from Head Start programs, prekindergarten programs, or other center-based care arrangements through Child Care and Development Block Grant funds or other state child care funds. Community groups could also join forces to assess the need for flexible child care and then develop child care options.

Recruiting and training family child care providers can target resources toward gaps in the supply of child care during nonstandard schedules for parents who work for large and small businesses. This strategy can enable a large employer to help employees with the greatest child care need, or, with some organizing effort, a group of small employers could pool resources to support child care recruitment and training efforts. The Close to Home project in Phoenix, Arizona, is one such consortium of local employers. Consortium funds are used to (1) support efforts to recruit and train family child care providers in geographic areas where employees live or work, (2) offer financial incentives and support services for new providers, (3) train providers in ways to accommodate parents with nonstandard schedules, and (4) match new providers with experienced mentors (Bookman and Furia 1995).

Any solution based on family child care slots, however, will need to overcome the concerns of low-income parents about trust and safety. Many low-income parents are reluctant to use family child care if they do not know the provider (Larner and Phillips 1994; Phillips 1995; Porter 1991; Polit et al. 1989; and Siegal and Loman 1991). When low-income parents do not have a trusted relative or friend who can provide home-based child care, they prefer the public setting of a child care center. In addition, studies of low-income parents uniformly suggest that these parents prefer center-based care for their older preschool children, reflecting their desire for an arrangement that provides learning opportunities for preschoolers (Hofferth 1995).

However, when parents work during evening, night, and early morning hours, the quality of the learning environment may not be as high a priority, because children are asleep for most of this time. For these parents, concerns about safety and security are likely to be a higher priority. Nevertheless, if strategies to provide child care during nonstandard work hours are to be successful, organizations will need to provide a high level of training and oversight to providers, and they will need to convince parents that the providers receive adequate supervision. The need for training and oversight may make this strategy more expensive than purchasing slots in a child care center or establishing a center in an underserved neighborhood. However, no studies have yet examined the cost-effectiveness of these strategies in low-income neighborhoods.

A less direct way of helping parents secure child care for nonstandard hours is to provide financial assistance to help them pay for their own child care arrangements. Because of the scarcity of formal child care arrangements during nonstandard hours, parents may need financial assistance to compensate providers for working nonstandard hours. Many states have already acknowledged this issue by increasing the child care subsidy rate for care provided during nonstandard hours. Organizations that seek to establish child care slots during nonstandard hours may need to pay higher rates for such care, although other benefits of the network (for example, a steady supply of children to fill slots and guaranteed payment for services) may lessen the need for higher reimbursements. Research needs to focus on the effectiveness of higher reimbursements and other incentive strategies in developing a supply of reliable child care arrangements during nonstandard hours.

Most low-income parents who must find child care on their own for nonstandard hours rely on relatives and friends. Parents often prefer these providers because they are trusted individuals who can be more flexible than regulated providers, especially during nighttime hours. Friends and

relatives, however, tend to be more unreliable than regulated providers, and they may not be committed to providing child care on a long-term basis.

Another option for increasing the supply of child care during nonstandard hours is to develop systems of support for home-based providers that could increase their reliability, their skills as child care providers, and their commitment to providing child care. One study of family caregivers indicates that this group would not respond positively to offers of formal training but that they would respond to less formal support among other local community-based organizations, which have achieved the best success reaching out to kith and kin providers and parents using a family resource and support model (Butler, Brigham, and Schultheiss 1991). However, no studies have examined how such programs might affect the job tenure or quality of these providers or the cost of this strategy. Furthermore, we are not aware of any organization that has implemented such a strategy in a low-income community.

2. Increasing the Supply of Child Care for Parents Who Work Rotating Schedules

Parents' rotating schedules pose a different problem. A provider who cares for children who attend on unpredictable schedules cannot operate at capacity without on-call, flexible staff to respond to higher- or lower-than-average attendance. Most center-based programs do not accept a child whose attendance is unpredictable. Licensing rules require that the center employ one adult to supervise a specific number of children; if schedules are unpredictable, too many children may attend at one time. If we consider that a single 24-hour period would require three shifts of full-time-equivalent (FTE) staff members, a child who attends on a rotating schedule that changes each week may necessitate the hiring of three FTEs to cover attendance during only one of those shifts, unless center staff themselves work rotating schedules. The cost of child care for rotating schedules would,

therefore, be higher than for standard or unchanging schedules, either because the provider must maintain some excess capacity or because the unpredictable schedule requires close management of staff resources.

The employer-sponsored on-site or near-site child care is one response to the problem of unpredictable schedules where the employer subsidizes the cost of maintaining unused capacity or closely managing labor resources so that the center can meet licensing rules under any possible configuration of attendance. Central Atlanta Hospitality Childcare, Inc. is a nonprofit organization founded by a group of hotels in the Atlanta area to operate a child care center (called the Children's Inn of Atlanta) for children of low-income service industry workers. This center accommodates workers with nonstandard schedules by permitting parents to change their children's schedule of attendance on a regular basis. Parents using the Palcare center can also change their child's attendance on a monthly basis, according to the parents' work schedules and family needs. Parents who need to work overtime or who have unanticipated schedule changes can request additional hours of care (Bookman and Furia 1995).

Other options for addressing the problem of rotating work schedules include setting aside slots at centers for parents with work rotating schedules, providing financial incentives to child care providers who allow parents to change their children's schedule of attendance on a regular basis, and developing ways to support informal child care providers who can care for children whose parents work changing schedules. In addition, child care centers and family child care homes could be paired to provide a package that covers the hours of care a family needs and accommodates changes in the regular schedule. However, this solution would involve more disruption for the child than other options, and the problem of both the center and family child care homes needing to maintain excess capacity may be greater. To learn more about the costs, benefits, and feasibility of these

approaches, research must focus on models of formal and informal child care that accommodates rotating work schedules for employees of large and small businesses.

3. Increasing the Supply of Backup Child Care Arrangements

Backup child care arrangements may be needed—for crisis situations and for special needs (for example, when the child care provider is ill) or with some amount of warning (for example, when the child care provider or the school takes a holiday). This causes a problem for parents, especially if they do not already have an established relationship with another provider. Newly employed parents should plan ahead and investigate potential backup arrangements with relatives, friends, or neighbors so they will be prepared for anticipated or unanticipated breakdowns in their regular child care arrangements. Another option is for employers and community groups to develop backup child care options that parents can use in the event of a breakdown in their child care arrangements.

Although few employers provide regular child care for employees, some provide drop-in or emergency child care arrangements by purchasing a small number of slots in selected child care centers or family child care homes. Some child care providers are organized in networks that offer backup care to parents who use providers in the network. For example, Monday Morning, Inc., in central New Jersey, operates a family child care network in which parents are given lists of other providers in the network who are located near where they live or work and who are available to provide backup care. On days when their own provider is ill or on vacation, parents can call a provider on their backup list to arrange care.

Most low-income families, however, do not use regulated family child care providers and do not have access to such networks. To meet the needs of these families, resource and referral agencies and community organizations could create networks of backup child care providers. Community

or neighborhood organizations would provide information about the availability of backup arrangements at the neighborhood level. Community organizations that create support networks among informal providers could also use these networks to create backup care options for families. For example, Monday Morning, Inc. is a family child care network. Some administrative services are necessary to organize the network and provide sufficient oversight of providers to assure parents that the substitute providers offer care of acceptable quality. These administrative services increase the cost of child care. Research is needed to examine the conditions under which these models could meet the need for backup child care in a low-income community, as well as the costs of providing such care and the benefits of this option for employment retention.

4. Increasing the Supply of Child Care for Sick Children

Sick children present a special case requiring backup child care. Most group child care settings will not accept sick children, and illnesses are frequent when children are very young. Furthermore, children who are too sick to attend their own child care setting cannot go to a different group care setting; they need to be cared for apart from other children. Although we present existing models for providing child care to mildly ill children, we recognize that most of these models are not attractive options for sick children and their parents. This problem may best be addressed by exploring ways to provide workers with leave time to care for their sick children at home.

When parents themselves cannot care for their sick children, one alternative is to provide a room at the child care center or provider's home for sick children. Some centers employ a health care specialist to care for sick children in the sickroom, which provides a place and provider familiar to the child. The care provider can also give the child care and attention during the day. In family child care homes, however, the segregated child who is sick may present serious supervisory

problems for a single provider who must care for both sick and healthy children. Local hospitals or clinics may establish a "sick child center." However, children who are not feeling well may be uncomfortable in a new setting with a new provider, and parents may be reluctant to leave the child there. Finally, some employers will pay for a caregiver who goes to the child's home when the child is ill, which eliminates the problem of going to an unfamiliar place. However, the child is with an unfamiliar provider.

Family child care homes can also be used to provide child care for mildly ill children. For example, a family child care home could be used as a satellite for a child care center to provide care for children who become ill during the day or for children too ill to attend the center. Family child care homes can also be used to provide care for sick children from the broader community, rather than just one center (Rodgers, Morgan, and Fredericks 1986). Problems remain, however, in providing supervision and care for a sick child who must be segregated from healthy children and in the sick child's level of comfort in an unfamiliar care setting with an unfamiliar provider.

More than half of informal providers are willing to care for mildly ill children. Consequently, providing support to informal providers that could increase their reliability and skills as providers is another strategy for increasing the supply of child care for sick children.

Research is needed to evaluate the costs and benefits of all these strategies, as well as their acceptability to parents and providers. We also need to identify the conditions under which these strategies might be either necessary or desirable to parents and employers.

¹Personal communication from Ellen Galinsky, January 16, 1998.

IV. CONCLUSION

Recent research emphasizes working parents need for sufficient flexibility in their family support, jobs, and child care arrangements to meet their employment and child-rearing obligations (Oregon Child Care Research Partnership 1997). However, the inflexibility of low-wage jobs, combined with single parenthood and a scarcity of formal child care options in low-income neighborhoods and during nonstandard hours, suggests that some women leaving welfare for employment may be particularly disadvantaged in finding a “flexibility solution” that will support their employment activities.

This discussion has reviewed the available research on the extent of the flexibility problem for low-income parents, its relationship to continued employment, and policy options for improving the flexibility of support for combining employment with child-rearing. We also have noted several areas in which additional research is needed to understand more fully the extent of the problem and to assess the usefulness of possible solutions.

This review of the literature reveals significant gaps in our knowledge of the extent of the problem facing low-income working parents as they try to develop child care solutions that complement the requirements of their jobs. Based on our review of available literature, we conclude that we cannot answer the most basic questions:

- What is the proportion and what are the characteristics of low-income parents who face significant inflexibility in their jobs, family support, and child care arrangements?
- To what extent does lack of flexibility in jobs, family support, and child care arrangements lead to negative employment outcomes, including job loss?

Each problem of inflexible job, child care, and family situation has been documented individually, but in some cases with out-of-date or narrowly-defined samples. We summarize our conclusions and recommendations for research on the extent of the problem in each area as follows:

- **Family Support.** Based on the available information, we conclude that only about one-half of welfare recipients would have a family member who could help out in a child care or work emergency. The literature in this area is so spotty, however, that we do not really know which parents currently have good support through family networks, and no one knows how welfare reform will affect these arrangements (both regular child care and family backup support). Data on the proportion and characteristics of welfare recipients and low-income working parents with such family support are needed on a post-TANF and more nationally representative sample, since family support can significantly reduce the need for other types of public and private support.
- **Employment.** Based on the employment literature, we conclude that about half of parents leaving welfare for work are likely to have nonstandard schedules. However, the number of such jobs is growing over time, and the most recent estimates for low-skilled working mothers are from the early 1990s. Employee leave policies provide an important source of flexibility to parents, but we found no studies that estimate the availability of paid or unpaid sick or annual leave among low-income parents and the extent to which employees used this leave when it was needed (apart from a comprehensive study of the types of leave covered by the Family and Medical Leave Act of 1993).
- **Child Care.** Based on the child care literature, we conclude that few center-based or regulated family child care options exist during nonstandard work hours, and these may not be the type of child care most preferred at these times. We need information on the types and characteristics of child care that parents would like during nonstandard schedules and how the supply of child care by friends and relatives responds to economic and regulatory variables.

As we evaluated the information on family support, employment, and child care flexibility, we found that we know very little about how successful low-income parents are at arranging a job, family, and child care package that provides sufficient flexibility to support their employment activities. Only Emlen has measured all three, but since the sample included employed parents, we

do not know the proportion of welfare recipients who enter jobs facing high levels of inflexibility along all three dimensions and who, for this reason, cannot sustain their employment.

To address these information gaps, we recommend a descriptive study of a sample of mothers who are receiving welfare and entering jobs. The study would measure the degree of flexibility these women report in their family support, job, and child care arrangements. Interviews would be conducted at about 6-month intervals thereafter, and would measure employment since the previous interview, characteristics of jobs held, wages, and earnings. Interviews would continue to measure flexibility in jobs, child care, and family support. The interviews could also measure job stress, fringe benefits, and the perceived quality of child care. A period of about 18 months would be sufficient to observe how the degree of flexibility in jobs, child care, and family support affected job retention and employment stability.

We would also recommend improving our understanding of the three areas of inflexibility through new studies and analysis of existing data. We recommend exploring family support in a sample of low-income working parents and parents receiving welfare who are entering jobs. The availability of family members who could care for children in an emergency may depend on having another adult in the household or being part of a culture that values family support, whether or not relatives live in the same household. Therefore, a study should survey parents about their regular and backup child care arrangements, the types of child care emergencies they have experienced and how they addressed them, and who they can count on, both inside and outside the household, to provide child care in an emergency. The analysis should examine how ethnicity, living arrangements, and income level interact in determining the degree of flexibility parents have in their family support.

More information is also needed on job flexibility and inflexibility. A sample of low-income parents and parents receiving welfare and entering jobs could provide information on the incidence of nonstandard work schedules, rotating work, and unexpected overtime. Parents should also be asked whether they prefer to work nonstandard hours. Information should be obtained about fringe benefits, particularly paid and unpaid leave, and the ease or difficulty with which employees can use this leave. Information on availability of benefits should be related to job tenure to determine the degree to which employees are expected to work for an initial period before having access to paid leave.

Information should be obtained about the flexibility of child care arrangements and about backup child care arrangements. Parents working nonstandard schedules should be asked about their preferences regarding relatives, home-based providers, or centers caring for their children outside the standard work day. Parents should be asked about what arrangements they made to care for a sick child and what they did the last time a child was sick.

If the descriptive studies confirm that flexibility is an important problem that threatens job stability and employment retention, we would recommend a research demonstration that would test possible solutions to the problem:

- ***Overall Approach.*** We propose following parents over 12 to 18 months, at least, in order to measure the effects of flexibility or a lack of flexibility on their employment. If longer-term employment outcomes would be desirable to measure, the families could be followed for a longer period. Interviews should be scheduled at baseline and at 6-month intervals so that details about employment and child care arrangements can be recalled accurately.
- ***Sample.*** A sample of parents should be drawn from a population of welfare recipients who are required to enter work activities, so that the sample contains a mix of flexibility situations, some potentially incompatible with sustained employment.

- **Interventions.** We recommend three types of interventions for this sample of parents. One would be a supply of flexible, high-quality, community-based child care arrangements that parents could use either when their own arrangements fell through or on a regular basis. A second would be up to five days per year of flexible, paid, family leave for all workers. To encourage cooperation, employers could be compensated for the cost of the program in wages and benefits. A third intervention would provide parents with information that would help them to develop a flexibility solution given their own family, job, and child care situations. A counselor would provide them with ideas and encouragement to think of creative solutions to the problem. These options would need some refinement so that they can be implemented and possibly replicated. One or more of the interventions could be implemented in the context of a random-assignment demonstration with one group receiving no special services.
- **Research Questions.** For the control group, we would ask a set of descriptive questions: What proportion of parents entering employment have inflexible jobs, family situations, or child care arrangements? What proportion of parents have relatively high inflexibility across all three dimensions? How much flexibility is needed across these dimensions to sustain employment activities? How does the amount of flexibility change over time as the parent has more experience in employment? Several more questions involve group comparisons: How effective is the availability of high-quality, flexible child care in supporting employment? How often did parents use these facilities for back-up care? Did parents try out these facilities and then return to use them for regular child care? How effective is flexible, paid, family leave in supporting employment? How effective is information provision in supporting employment? Do parents who received information have more flexibility than families in the control group who did not receive information?

In conjunction with the research demonstration described above, there should be some effort to develop appropriate measures of flexibility across the three dimensions. The measures should be a combination of factual items and parents' perceptions of the flexibility of the situation. Factual measures of family circumstances, employment policies on the current job, and the child caregiver's policies might include the following: the number of days of sick and annual leave parents accrue during a year, under the conditions under which parents might qualify for leave time if they do not already qualify for paid leave, requirements for punctuality, policies with regard to child illnesses, and availability of backup child care arrangements. Emlen has developed a short, 12-item scale that

measures parents' perceptions of flexibility along each of the dimensions, primarily through use of a four-point Likert-type scale.

Learning more about the costs and benefits of flexible employment policies may help convince more employers to adopt these policies. A research study should examine the effects of employer initiatives to increase job flexibility for low-wage workers. Researchers should look for opportunities to work with an employer who is considering an expansion of paid leave and more flexible scheduling, including job sharing or other employee backup systems. The research would measure changes in employer costs before and after the policy change, including absenteeism, management time required to monitor employees' work hours and productivity, turnover, and the cost of expanded leave. The research should also measure the benefits to employees, including their levels of work and family stress, job satisfaction, and job retention.

The costs and benefits of various strategies to increase the flexibility of child care should also be examined. Family child care networks that help link parents with regular and backup providers, various options for caring for sick children in child care, and family child care providers working nonstandard hours should all be evaluated to identify the costs and benefits to parents, children, providers, and other organizations (including the local child care agency or a community-based organization).

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