Investing in our Future

HOW MAINE CAN PREPARE OUR CHILDREN TO BECOME TOMORROW’S LEADERS

A report from the Maine Women’s Policy Center and the Maine Children’s Alliance
INVESTING IN OUR FUTURE
Introduction

Preparing Maine for a prosperous future begins with recognizing that our youngest citizens must receive what they need today to become the adults of tomorrow, those who will pursue new businesses, become community leaders, and advance technology and science. A child’s early development sets the foundation for their physical, social, and emotional wellbeing for the rest of their lives and ultimately determines the health of our state workforce and economy. Children who grow into adults ready to manage life’s challenges and fully contribute to their communities are a product of physical, cognitive, and emotional readiness that begins in their earliest years.

Research demonstrates that young children thrive when they have strong relationships with caring, responsive adults and when they are provided age-appropriate, stimulating environments. We also know that 67% of Maine children under the age of six have both parents in the workforce and will require care from birth until they reach public school.¹

High-quality early childhood programs can help to alleviate the challenges children face, and ensure they are resilient as they grow. Quality early childhood education produces higher levels of future school readiness, social and emotional resilience, and even better long-term physical health. Maine’s future success relies upon the accessibility of high-quality, affordable early childhood education for all Maine families.

Unfortunately, many families are unable to secure quality early childhood education. Over a six-month period, the Maine Women’s Policy Center and the Maine Children’s Alliance gathered stories from hundreds of Maine women confronting the challenges of seeking child care for their children; their voices are filled with frustration, anxiety, and desperation. This report presents a depiction and analysis of the state’s current early childhood education programs and options. Where needed, it provides recommendations for strengthening these initiatives in order to ensure the strongest, longest lasting support possible for our young and growing children. Because so many women told us about their difficulty securing child care, we gave special focus to it, identifying the challenges and some solutions related to access, workforce, cost, and quality.
“It was a long and difficult challenge to find infant care for my 12-week-old baby. I started looking for infant care when I was about 3 months pregnant, knowing that I was only allowed 12 weeks of leave from work. I had heard it was a challenge to find a spot in a quality child care center, so I thought I was getting ahead by beginning my search for child care nine months in advance. We put our name on about five waiting lists as all the centers were full for the month I needed to start care. Affordability was an issue. Perhaps we could have gotten into a center earlier, or hired a nanny, but the high tuition costs didn’t work for us.

We finally were accepted at a center and were grateful for that. I had to go back to work about a week later so we tested out the facility for a few hours to get both myself and the baby used to the center. Being a first time parent, I was not exactly sure what I should expect from a center and the child care providers. I don’t consider myself a super particular person, and I am a fairly easygoing parent. That said, I lowered my standards very much by placing my baby in this particular center. I had a bad feeling about the center, so I scrambled to re-call every single provider on the websites I had previously searched as well as recommendations from Facebook groups. We finally found a child care center located in a neighboring town, and enrolled our daughter. I was so scared of getting it wrong again that I checked in daily to nurse at lunchtime. I was able to observe how the center operated, and again, had hesitations. We started our search once again. Somehow the timing worked out magically and we were accepted into our current center. Not until I found our current center did I understand that yes, we can, and deserve to, have affordable care with a wonderful, caring staff.

Finding the right child care center for us, on top of transitioning back to full-time work and pumping during the day was one of the hardest and scariest tasks I have taken on.”
INVESTMENT BEGINS WITH BABIES

We know that children’s learning and development begins at birth and that parents are a child’s most important teacher. Many parents need support and tools to ensure their children are off to a healthy and strong start. Programs such as Maine Families/Home Visiting, Public Health Nursing, and Early Head Start can support the healthy development of infants and young children by helping their parents and families be knowledgeable and responsive caregivers.

Home visiting programs can begin working with families before a baby is brought home to give expectant parents support during pregnancy and to establish a safe and baby-friendly environment. Home visitors offer parents guidance in areas like optimal nutrition, medical care, developmental milestones, and safety. Because home visitors are given access to young children’s home environments, they are often the first to identify and intervene in serious conditions of environmental safety, neglect, or violence. The program is free to participants of all economic backgrounds. Recent research shows benefits of home visiting programs include: reduced need for remedial education services and increased measures of self-sufficiency in children; increased likelihood of participation in educational or job training programming for parents; and, higher incomes and increased rates of positive parenting activities for families.7

Public health nurses can provide direct nursing care around breastfeeding, healthy weight gain, and support for infants with special health needs. Research shows that parents who receive visits from public health nurses are more likely to follow-up with their pediatrician or family physician to maintain well-baby visits. These visits help parents become confident while supporting healthy babies.

Unfortunately, the Maine Department of Health and Human Services has significantly reduced the number of public health nurses available to support maternal and child health. Unfilled vacancies and shifting the duties of nurses away from maternal and child health has resulted in a loss of direct services and support to Maine children and families. This systematic decrease in maternal and child health services has hurt most in Maine’s rural areas, where residents are already struggling with lack of available health care providers.
Best Start Initiative

United Way of Midcoast Maine established the Best Start Initiative to support parents by creating a unified system of home visiting. Parenting a new baby is full of rewards and challenges for parents. The infant’s experience during those first few months has a lasting effect on healthy brain development, which can have implications for lifelong health. In order to coordinate care for infants and their families from the very beginning, the Best Start Specialist works with families and connects them with the most appropriate services from various providers. These home visiting programs give an extra boost of confidence to family members, share activities to help ensure the child’s healthy development, and connect families to other resources as needed or desired. As part of prenatal care at Mid Coast Medical Group’s Women’s Health Center, all pregnant women, regardless of income, are scheduled to meet with the Best Start Specialist or a home visitor. Community partners for the Initiative include Public Health Nursing, Early Head Start, Maine Families, The Opportunity Alliance, Mid Coast Women’s Health, and Mid Coast Hospital.

Recommendation

Support and expand the state’s Public Health Nursing program: public health nurses provide critical support to infants and their parents. Vacant positions for public health nurses within Maine’s Department of Health and Human Services should be filled. The Legislature’s Committee on Health and Human Services should utilize its oversight responsibilities to review the administration’s changes to the Public Health Nursing program and consider statutory changes to ensure the needs for maternal and child health are met.
CHILD CARE

We know from years of research on childhood development that high-quality care for infants and toddlers is crucial for their future. The environment for young children must be safe while fostering exploration. Infants and toddlers require more hands-on and personalized support, so appropriate staff-to-child ratios are much smaller. Too many infants and toddlers in a setting can cause overstimulation and distractions that are detrimental to children feeling safe and secure. Our youngest children must be able to form strong relationships with staff. Yet situations where children are shifted to new staff based on a child’s age or because of high staff turnover prevent these strong relationships. Continuity of care is essential for our youngest children.

Parents who are searching for child care in Maine have the choice of several different types of care for their child: center based care; nursery schools; family child care in someone’s home; or care with a friend or family member (often called family, friend, or neighbor care). The State of Maine requires a license for child care facilities that serve three or more children who are unrelated to the caregiver.

The federal government provides funding for states to support child care safety, quality, and professional development that impacts all children participating in early care in Maine, in addition to direct subsidies for parents. Basic health and safety of children is ensured by the licensing and regulation of child care facilities. A quality rating and improvement system helps parents have a way to identify standards of care in programs and can encourage professionals to improve their quality of care. Maine’s system, called Quality for ME, is a four-step tool found on the state’s website, Child Care Choices. The funding also supports quality child care by funding professional development for early childhood educators through the Maine Roads to Quality program.

The federal law that supports child care in the states, the Child Care Development Block Grant, was updated in 2014 and received strong bipartisan support in Congress, with a Senate vote of 96-1. The update, the first in 18 years, made significant changes to the law and provides states with the opportunity to meaningfully improve child care. As part of the law, all states were required to provide the federal government with a three-year child care plan. Maine’s plan was submitted in March of 2016 and promised significant changes beginning in the fall of 2016. The plan stated that a “new child care system” would be created, including an
application process that is "seamless and streamlined for families." As noted in a report commissioned by the State of Maine and written by the Public Consulting Group to review federal block grant programs, including the Child Care Development Fund, a change to the application process is critical for families.

The current system requires parents to navigate a two-step process that is confusing, time consuming and on average requires them to wait six weeks before they learn about their eligibility. If a parent has just been offered a job, but needs to secure child care before they can accept the position, the current system’s long wait makes that virtually impossible. Parents have an untenable choice: accept the position and cobble together temporary care for their child; go into debt with a provider in the hope they will be found eligible; or turn down a job because they don’t have a way to pay for child care. Maine’s support of child care allows the state to receive millions of dollars in federal matching funds, which also supports the entire child care system. The inspection and licensing of child care facilities throughout the state is supported with these funds, along with training and professional development to assist all child care providers. Unfortunately, Maine has not received the full amount of federal funds that are available to support child care in Maine. Last fall a “Working Group to Study Background Checks for Child Care Facilities and Providers” found that Maine is not utilizing millions of federal dollars that could be supporting Maine parents who qualify for the child care subsidy program.

Recommendation

The existing two-step application process for child care subsidy should be eliminated. The application should be streamlined to allow families to quickly access child care so they can take advantage of employment opportunities.

The Legislature’s Committee on Health & Human Services should investigate why Maine is failing to spend federal Child Care Development Funds that have been allocated to the State of Maine.

The Health & Human Services Committee should also undertake a review of the federal reauthorized Child Care Development Block Grant statute and Maine’s State Child Care Plan to further understand Maine’s obligation to meet new federal law and standards.
HEAD START DELIVERS COMPREHENSIVE EARLY LEARNING, HEALTH, NUTRITION, AND FAMILY SUPPORT SERVICES TO LOW-INCOME CHILDREN FROM BIRTH TO AGE FIVE. FEDERAL AND STATE FUNDING FOR HEAD START IS PROVIDED IN THE FORM OF BOTH CENTER-BASED CARE AND HOME-BASED SERVICES, WHICH TOGETHER SUPPORT ENTIRE FAMILIES—NOT ONLY CHILDREN—LIVING IN POVERTY. EARLY HEAD START TARGETS PREGNANT WOMEN AND CHILDREN AGES BIRTH TO THREE YEARS OF AGE—A TIME WHEN HIGH-QUALITY CARE IS GREATLY NEEDED FOR HEALTHY DEVELOPING BRAINS. HEAD START ASSISTS CHILDREN AGES THREE TO FIVE. HEAD START AND EARLY HEAD START SERVE OVER 3,000 OF THE MOST SEVERELY AT-RISK CHILDREN AGED BIRTH TO FIVE YEARS OF AGE IN MAINE.

HEAD START SERVES MILE’S MOST VULNERABLE AND AT-RISK CHILDREN WITH COMPREHENSIVE EARLY CARE AND EDUCATION. ALL CHILDREN FROM FAMILIES WITH INCOMES AT OR BELOW THE FEDERAL POVERTY LEVEL ARE FINANCIAL ELIGIBLE FOR HEAD START (IN 2016, $24,300 ANNUALLY FOR FAMILY OF FOUR). CHILDREN AND FAMILIES RECEIVE A RANGE OF SERVICES, INCLUDING HEALTH, NUTRITION, VISION, HEARING, AND MENTAL HEALTH SERVICES FOR CHILDREN, AS WELL AS HOME VISITS, FAMILY LITERACY, AND VOCATIONAL SUPPORTS FOR FAMILIES. IN ADDITION, CAREER SUPPORT, FINANCIAL LITERACY, AND PARENTING SKILLS TRAINING PROVIDE RESOURCES FOR PARENTS, WHICH IN TURN ULTIMATELY IMPROVE OUTCOMES FOR CHILDREN. BUT DUE TO LIMITED FUNDING, THE PROGRAM CAN ONLY SERVE 31.5% OF ELIGIBLE MAINE CHILDREN.

THE FEDERAL OFFICE OF THE ADMINISTRATION OF CHILDREN AND FAMILIES HAS RECOGNIZED THE NEED FOR INTEGRATION AND COLLABORATION AMONG PROGRAMS SERVING YOUNG CHILDREN. SINCE 1990, THE OFFICE HAS OFFERED “COLLABORATION GRANTS” TO ALL STATES TO SUPPORT THE DEVELOPMENT OF MULTI-AGENCY AND PUBLIC AND PRIVATE PARTNERSHIPS AT THE STATE AND NATIONAL LEVELS. THESE PARTNERSHIPS ARE INTENDED TO ENCOURAGE COLLABORATION BETWEEN HEAD START AND OTHER EARLY CHILDHOOD SERVICES, INTEGRATE HEAD START WITH STATE DECISIONS AFFECTING LOW-INCOME FAMILIES, AND STRENGTHEN HEAD START’S CAPACITY TO BE A PARTNER ON BEHALF OF THOSE WHO NEED SUPPORT. PARTNERSHIPS ASSIST IN BUILDING EARLY CHILDHOOD SYSTEMS AND PROVIDE ACCESS TO COMPREHENSIVE SERVICES AND SUPPORT FOR ALL LOW-INCOME CHILDREN. YET, MAINE’S DEPARTMENT OF HEALTH AND HUMAN SERVICES HAS ELECTED NOT TO SUPPORT A FEDERALLY-FUNDED HEAD START STATE COLLABORATION OFFICE, AND MAINE IS THE ONLY STATE THAT HAS DECLINED FEDERAL FUNDING TO SUPPORT HEAD START COLLABORATION AND INTEGRATION AT THE STATE LEVEL.

RECOMMENDATION

INCREASE STATE INVESTMENT IN HEAD START BY FUNDING SLOTS FOR 50% OF ELIGIBLE CHILDREN BY 2018, 75% IN 2019, AND 100% BY 2020. HEAD START HAS PROVEN ITS VALUE IN PREPARING YOUNG CHILDREN TO LEARN. MAINE SHOULD INCREASE ITS FINANCIAL INVESTMENT TO ENSURE THAT ALL ELIGIBLE FAMILIES AND CHILDREN CAN BENEFIT FROM HEAD START.

MAINE SHOULD REESTABLISH A HEAD START STATE COLLABORATION OFFICE AND USE AVAILABLE FEDERAL FUNDS TO SUPPORT IT.
As I was getting ready to start my life and marry the man of my dreams, he lost his job. We struggled but trudged forward with post-secondary education for him and continued work for me. We tried hard to better ourselves and not spiral out of control as we became newlyweds. As we worked, we continued as planned to have a baby. At 24 weeks of pregnancy, I fell deathly ill, was hospitalized, and my son’s journey into this world came shortly thereafter. Anthony was born at just 25 weeks gestation and we both clung to life. Over the next four months, we both healed and eventually became well enough to return home, though still not knowing what to really expect. My dream of family was no longer easy to plan or manage.

I invited Head Start home-based child care services into our life. I worked to provide everything anyone suggested that he may need, but it still wasn’t enough for my child. Hospital stays, specialists, therapies, doctors, and surgeries—our home visitor supported us through it all. Still, Anthony wasn’t developing as we would have hoped in some areas which led me to seek a child care setting, a place where I hoped he could get more than what just a mom and dad could provide for him. We searched for affordable part-time child care and found a local home daycare with great references. We paid $75 for three days of care per week. He attended for three weeks before I was told she couldn’t handle his needs or multiple therapists. Trying to plan again, my husband and I, with support of our home visitor, began weighing the pros and cons—could Anthony handle a larger child care center, could a larger child care center handle him? Feeling defeated and like I couldn’t even assure that my child could fit in, we finally turned to Educare Central Maine. Leaving behind our home-based supports we embarked on a new journey with a center-based Head Start facility. Nervous and scared for our fragile boy, we hoped for the best and kept trudging on—what we got was so much more than we could have ever hoped for! The difference in the quality holistic approach was remarkable. His specialists were welcomed, not turned away. His health needs were met, and never a burden. He grew in ways I had longed for. Now, at four years old he is finally over 30 lbs. He loves Educare. He has learned that he loves to read and to write. I continue to learn to be a better mom thanks to the supports that Head Start has offered me.

Thanks to a federal Early Head Start/Child Care Partnership Grant and financial support from the Maine Early Learning Investment Group (MELIG), Educare Central Maine and Kennebec Valley Community Action Agency are conducting a community pilot designed to expand access to high-quality early child care and education for low-income children and families in Somerset County. Informed by Educare’s core features (embedded professional development, parent/family engagement, high-quality teaching practices, and data utilization), Educare and KVCAP staff partner with community child care providers to deliver comprehensive Early Head Start services for infants, toddlers, and three-year-olds. Community Providers receive coaching in the best practices of early childhood education instruction designed to improve learning environments and effective parent engagement. The project’s community partners address the barriers to parents’ ability to meet their educational and workforce goals. Finally, research partners are evaluating the outcomes for children and providers’ quality progress. Educare is a partnership between Waterville Public Schools, Kennebec Valley Community Action Program, the Bill and Joan Alfond Foundation, and the Buffett Early Childhood Fund.

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PUBLIC PRESCHOOL

Access to high-quality preschool can enrich children’s development so that they thrive in school and later enter the workforce as well-prepared employees. Rather than pay more to address problems in later years, Maine can make smart investments in proven early childhood programs to ensure a better future for our children and our state. Research by University of Maine economist Philip Trostel demonstrates that a high-quality early childhood system in Maine, including public preschool, could save taxpayers over $7 for every $1 invested in the program.

In 2014, Maine lawmakers voted to encourage local school districts to establish voluntary public preschools by the year 2018. Unfortunately, the $4 million needed to support the program annually has not been funded by the state budget.

Public preschool is an optional program and the decision to offer a four-year-old program is made by school boards at the local level. Some areas of the state serve the majority of their four year olds through public preschool, where other areas serve a small percentage.

With a four-year federal preschool development fund grant that provided approximately 12 Maine school districts with funding to create or expand preschool, more school districts continue to offer public preschool, yet we are still years away from universal preschool access for all Maine four-year-olds.

Recommendation

- Support financial investment to expand voluntary preschool programs around the state. The 128th Maine Legislature should invest $8 million in start up costs for public preschool in the 2017-2018 state budget.

- Invest in high-quality preschool classrooms and expand the program to new school districts while encouraging collaboration with Head Start and local high-quality child care centers. The Department of Health & Human Services should reinstate contracts with local school districts or private child care providers who can ensure early and afterschool care to support four-year-olds participating in Maine public preschool programs.

- Improve the existing infrastructure by allocating additional resources to increase quality, provide support and enhance collaboration between public preschools, local providers and Head Start programs.

- Increase the number of full-day programs to ensure stronger child outcomes. More time spent on developing social, emotional, and cognitive skills will help young children be ready for kindergarten.
PUBLIC PRESCHOOL ENROLLMENT (PERCENT) 2015

Maine Children's Alliance
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation
Over the past year, hundreds of Maine women shared with us their frustration in finding and affording appropriate care for their children. For that reason, we have chosen to focus on the issues they shared: access, cost, and quality. Because the majority of Maine’s young children live in households where all available parents work, these families must rely on someone safe and trusted to care for their children while they work. Nationally and in Maine the landscape for child care poses monumental challenges for families at many income levels: Where are the providers? What quality care do they offer? Will there be an open slot in time for the child? Can they care for an infant? Can the child stay late? What about night-time care? Is the child care affordable? Are subsidies available or applicable? All these questions haunt families with a child on the way or in the first days of parenthood. And, in Maine, approximately one in five of our youngest children live in poverty. Children in poverty, who are already more likely to be exposed to adverse circumstances like food insecurity or homelessness, are the most in need of quality care, but are less likely to receive it.

The feeling of having almost no options for after-hour care was so frustrating, especially when I had to use a substandard child care provider, not by choice, but because that was my only option.”

Major Challenges of Child Care: Access, Workforce, Cost, and Quality
“There was a time when I had an evening job and had to find child care for my daughter, who was about two years old. There were very few options, and both that I found were expensive. I still feel guilty about the poor quality of care my daughter received at the only place that would work for us. The feeling of having almost no options for after-hour care was so frustrating, especially when I had to use a substandard child care provider, not by choice, but because that was my only option. Being a single mother with little income is so tiring, as well as heartbreaking when you think you cannot make the best choice for your child.”

“I had called every other licensed center or in-home care within 20 miles of my work and only one, which is 30 minutes out of my way, has an infant space. This makes my commute over 60 miles a day, adding to the expense of child care. I feel like I have to choose between my career and a child.”

“I’ve been on a waitlist for two years for a spot at a local child care center. Before we settled on a home-based center, we were desperate and panicked for a spot anywhere. We were waitlisted everywhere within a 10 mile radius. It was horribly stressful. How was I supposed to go back to work without child care? We eventually found our current home-based child care provider through word of mouth. I don’t love the level of care that is provided, but we don’t have much of a choice. It’s depressing, frustrating, and expensive.”
Access to high-quality child care is crucial for children and parents. Yet affording and finding high-quality care is extremely frustrating for parents. Many low-income parents are challenged by the current child care subsidy system. Many parents, regardless of their income, struggle to find high-quality care they can afford. Solutions include strong child care resource and referral agencies, streamlining eligibility, and using grants and contracts to increase access at the state level.

Child Care Resource and Referral Agencies
Choosing child care is one of the most significant decisions parents will make for their young child, yet good information is often difficult to find and trust. Local Child Care Resource and Referral agencies can assist both parents and providers. These agencies help match parents with appropriate providers in their area who have openings, and offer parents information about child development as well as criteria for successful early learning and high-quality child care. Staff also assist parents in navigating the menu of government programs that may aid their family, and also support child care providers with coaching, mentoring, and continuing professional development. Maine's regional network of Resource Development Centers were defunded and eliminated in 2012. While the state supports a website called Child Care Choices, it does not provide information about availability or openings.

Streamline Eligibility for Child Care Subsidy to Improve Access
For the majority of parents who find employment, securing and arranging child care goes in tandem with their acceptance of a job. If they are unsure of whether they will receive a subsidy for child care, they must turn down the offer of employment; place their child in temporary care that may be unlicensed or potentially unsafe; or locate licensed care from a provider who will accept subsidy payments but is willing to risk that the parents could be denied and will need to pay retroactively. We have heard stories of parents who took the risk they would receive subsidy only to learn they were denied. These parents are responsible for the full cost of care to the provider. It is common for providers to experience a loss as parents simply cannot afford both back payments and continuing to pay for their weekly child care.

The State should streamline the eligibility process. In a plan submitted to the federal government last March, the Department of Health & Human Services repeatedly stated that they planned to "streamline and simplify" the experience for parents and providers. As the Department heard during stakeholder meetings, the current system is too difficult and confusing for families to navigate. The application process for child care subsidy should be streamlined to allow families to access and pay for child care so that they can quickly take advantage of employment opportunities. Funding streams, such as Temporary Assistance to Needy Families or Child Care Development Funds, should be transparent for families and providers. While state law requires a single universal application form for child care programs the reality for families is a two-tiered system which involves different divisions within the Department of Human Services.

Use Contracts and Grants to Increase Access
The reauthorization of the Child Care Development Block Grant encourages states to "improve the supply and quality of child care services" for underserved and vulnerable populations. The federal government suggests states to use contracts or grants to support at-risk children, such as those with disabilities, homeless children, those in rural/underserved areas, Maine’s tribal communities, or children in the child welfare system. In addition, access to care for children of parents working nontraditional hours should be considered. The updated law also recommends increasing the supply and quality of care for infants and toddlers. Maine needs to find creative ways to serve these children, including revisiting the use of contracts to serve unique populations or providing a higher rate of compensation to providers for vulnerable populations.

Utilizing contracts provides stability for parents and providers and allows the state to target high risk populations, such as those in child welfare or children born affected by substances, with high-quality care. These are the types of interventions that can change the trajectory of children's lives.
“Since taking in a newborn baby as foster parents last year, my husband and I have experienced a crash course in identifying and evaluating child care centers. I find it tragic that child care workers and early child care services are so devalued in our society. From the low pay of the workers, to the hodgepodge of spaces used to care for children—it’s clear that child care centers are not a national or state priority. Our foster son was at a center for a year, but after a tough decision, we decided that we wanted to enroll him in a center with more resources and a stronger curriculum. As I looked around, I found lower-income people and many children from refugee and immigrant families on a fixed budget find lower-priced centers. Segregation starts pretty early it seems, and with the policy of giving priority to siblings—it seems that privilege is passed down in families. I was shocked at the disparity in terms of offerings at different centers. Some centers offer daily meals, beautiful groomed yards, science or music-based curricula that stimulate development, and other features. Some centers have little-to-nothing. I imagine that the staff at these centers do their best with what they have, but if you’re understaffed and underpaid, there is little incentive to improve the environment for children. Finally, I contacted a couple home-based providers but they were filled to capacity with waitlists.”

**Recommendation**

- Rebuild the Child Care Resource and Referral system. Young families need local assistance to help them find appropriate high-quality care for their children. Providers need local support for professional development and to manage the business and licensing aspects of running a child care facility. Maine must re-establish the Child Care Resource and Referral system in local communities.

- The Department of Health and Human Services should establish time limits for determinations of child care eligibility. Maine law should be amended to require the Department to provide notification of either authorization or denial of a child care subsidy application within five business days.

- The department should use grants and contracts for one of the most important provisions of the reauthorization of Child Care Development Block Grant, to ensure equal access for the most vulnerable and underserved children.
How do we develop the workforce so that more people go into business providing care, more providers are able to offer high-quality care, and child care business expands so that families have more choice? There are several barriers preventing an increase in the number of child care providers, particularly those able to offer high-quality care.

First, both nationally and in Maine, child care workers are among the lowest-paid workers. While these workers care for our cherished young children, many cannot afford their own daily living costs and do not have employment benefits. According to the Economic Policy Institute, the typical child care worker in Maine would spend 46% of their earnings to pay for their own infant care.

Second, Maine needs to ensure that child care providers know how children learn and develop, what children need from their interactions and relationships with adults, and how to support young children from the beginning of their lives. Ideally all child care providers and their staff would receive ongoing professional development as part of their job. Yet, many child care providers and staff find it challenging to attend professional development opportunities while they are caring for children.

Finally, licensed, staffed and high-quality child care is more expensive to run than more informal care and providers must run financially viable businesses. Raising client prices to pay for higher quality instruction and staff training, unfortunately, makes child care services unaffordable for most Maine families. Maine does offer an incentive system through tiered reimbursements to child care providers who offer quality care through the Child Care Development Fund and other public assistance vouchers. Yet these vouchers fail to offset the true costs of the needed investments, such as staff education and materials. And, vouchers are vulnerable to unpredictable rate changes from the Department of Health and Human Services.

North Carolina’s WAGE$ Project addresses the low wage, high turnover problem by subsidizing care provider wages for a certain “commitment period,” while also including incentives for attaining higher levels of training and education. Program outcomes show that it is possible to reduce turnover by improving low wages. In 2016, the program saw turnover rates of 14%, compared to a 31% turnover rate of full-time teachers before implementation of the WAGE$ project.21
SHARED SERVICES ALLIANCES

Shared Service Alliances—a national model—are networks of small early care centers and/or family child care homes within a state or community that share costs and administrative and program services. Alliances use a range of business models but have a common purpose: to strengthen child care businesses so that they are more efficient, more financially sustainable, and better able to deliver high-quality services. Shared Service Alliances assist child care providers and develop new approaches to the business side so that providers can focus on child development and care.

Such alliances are needed because the majority of child care services are delivered by nonprofits, for-profit centers, or very small family care providers. Many of these are small providers, and many rely exclusively on tuition revenue. There is limited government funding to support child care subsidies, and such funding can require detailed accounting and compliance with quality standards beyond the capacity of many small providers. Child care providers with little or no staff need help with administrative functions so that their business can succeed.

Based on this national model, Maine Shared Services Alliance offers smaller child care providers shared purchasing, staff services, information, and resources. By banding together in this way, participating child care providers get business support yet still maintain their independence.

Recommendation

Establish a minimum reimbursement rate for child care vouchers. Setting minimum reimbursement rates in statute would resolve the uncertainty for child care business owners who plan to spend the money to improve the quality of their child care operation.

Develop a comprehensive statewide initiative focused on improving the expertise of the early childhood workforce. Strategies to pursue could include:

- i) Invest in and improve access to professional development for child care providers statewide; and
- ii) Develop a partnership with the Early EdU Alliance to provide options for providers to obtain early childhood credentials; and
- iii) Develop a statewide program for early childhood teachers that includes on-the-job professional training and continuous quality improvement.

Promote a policy that puts early childhood teachers on equal pay footing with public school instructors. Early childhood teachers with Bachelor degrees are typically paid half the average salary of a kindergarten teacher with the same credentials. Other states have addressed the difference in pay scale through wage supplement programs or tax credits for programs and individuals who attain a formal credential and stay in the early childhood classroom for a specific number of years.
COST OF CARE

As the voices of Maine women demonstrate, the single biggest challenge that families at all income levels face when looking for child care is affordability. Low-income working families struggle to make ends meet in many ways, yet the struggle to afford child care reaches middle-income families, as well, especially care for infants. In Maine, infant care rivals the costs of college tuition. According to Child Care Aware of America, Maine’s average cost of infant care in a center setting is $9,677 annually, or $806/month. On average, infant care costs only 4.8% less than rent, and takes up 16.8% of an average family income. According to the U.S. Department of Health and Human Services, ‘affordable’ child care means that it costs a family no more than 10% of their income. Under this standard, child care is only affordable for a little over a quarter of Maine families.

The Child and Dependent Care Credit and the Dependent Care Tax Credit are the national and Maine state tax-based solutions, respectively, to ensure that young families are able to stay in the workforce while having access to high-quality care. Yet, the benefits are limited. The tax credits do not go far enough to alleviate the burden of unaffordable care; the federal tax credit is not refundable (once the credit eliminates the entire tax liability, any balance of the credit does not go back to the taxpayer). A family has to be able to pay for the child care upfront before claiming, and later, receiving, the tax credit which has not kept pace with inflation.

Maine parents who meet income guidelines can qualify for child care subsidies from the Department of Health and Human Services. Providers who accept children participating in the subsidy system receive a rate of pay based on a market rate survey of child care fees or prices charged by providers across the state. States use the results of these market rate surveys to inform rate-setting policy and to establish maximum reimbursement rates for children served through child care assistance programs. The federal policy’s underlying purpose is to encourage states to establish child care payment rates that are high enough to enable families receiving child care assistance to find and afford care. Yet many argue the market rate survey does not provide a true cost of care. Other methods of rate setting that include the cost of care may be advantageous and encourage more participation in the system.

Child care subsidies are a direct way to help families afford child care. Once a family applies and is determined to be eligible, the percentage of the eligible child’s tuition is sent directly to the child care provider. This creates a reliable source of income for providers. The state can ensure that programs participating in the subsidy program meet health, safety, and educational quality standards.

The Child Care Development Fund’s goals are to increase accessibility and affordability of quality child care in Maine by offering vouchers to income-eligible parents who are working or attending school. Maine’s Office of Family Independence through the Parents as Scholars program and the Temporary Assistance to Needy Families program offer similar child care assistance. Although the type of assistance provided through the programs is nearly identical, there are different and separate processes to apply for and administer each program.

Many more families need these child care support programs than are being currently helped. In fact, usage rates in Maine suggest that only a small portion of eligible families are using the available child care subsidies. In 2016, almost 5,000 children under age 12 received a child care subsidy. With an estimated 51,000 low-income children under age 8, Maine is only serving a small amount of those income eligible. The application process for the subsidy programs is lengthy and requires multiple applications, all of which creates a barrier to participation for those who could benefit from the program. Program applicants report waiting a long time for program office visits and determinations of eligibility.
“As a child care provider, I have told all of the parents I work with about the different kinds of programs that can help with child care fees if they are income eligible. The one program that seems to have the most issues is the voucher program. Parents will fill out the needed paperwork and return their application and, on occasion, their application will not make it to the proper office. As a provider, I will often check with the state subsidy program worker in Maine to see if they have received the applications. Luckily, I am familiar with the program and know who to contact. Many providers do not know the process and who to contact to help parents. I have found that the contacts in the subsidy program are very helpful and willing to work with providers and parents to get through the process. The most difficult part of the process is making sure that the application goes to the right office.”

“My husband and I want to start a family but a big part of our hesitation has to do with our very real fear about the ability to access child care. Other families we know have had to be on long waiting lists for quality child care and often have to rely on parents and siblings to fill the many gaps in child care options. We do not have any family in the state. We both have college debts that make one parent staying at home not feasible.”

“When I was six months pregnant, I reached out to get on waiting lists for child care centers. I was told it would be one and a half to three years before we could get a spot. I work from home, and my husband switched to a lower-paying job not on his career-track, in order to be home with our son two days a week. Thankfully, we have been able to make it work. We were also given a federal subsidy, which omitted us from a slot we received at one center, but bumped us up the line for another. We have 12 hours of babysitters that work in our home each week, and barely can afford that. It is so frustrating to not find a spot for our son in a center, and that it is so expensive that we couldn’t do it without the subsidy.”

By utilizing cost modeling, the state of Louisiana determined there was a significant disparity between individual market rates and true costs, specifically in the areas of infant-toddler care. As a result, the Louisiana Department of Education developed policies based on the true costs of providing infant-toddler care in order to better support care providers and to offer parents access to higher qualities of care.”

On average, infant care costs only 4.8% less than rent, and takes up 16.8% of an average family income.
Recommendation

Increase child care subsidy reimbursement to the 75th percentile of market rate. The current reimbursement rate is at the 50th percentile, so low that many providers are unwilling to accept subsidy. The low payment rate, high level of paperwork, and unpredictable timing of payments from the state are all factors leading to some child care providers declining to accept the child care subsidy. If providers do not accept the subsidy, low-income working families cannot access their child care services—another barrier for this population.

Raise the cap in the federal spending account. Dependent Care Flexible Spending Accounts are a pre-tax benefit used to pay for dependent care services including child care and before/after school care. With a higher cap on these accounts, families would be able to save more money pre-tax for child care. A federal bill proposed by Senators Burr and King—the Promoting Affordable Care for Everyone Act—would raise the cap on Dependent Care Flexible Spending Accounts to 50% of care expenses, and index that cap to inflation.

Account for true costs of infant-toddler care in public reimbursement levels, following Louisiana’s example. Maine’s Department of Health and Human Services should develop public reimbursement policies based on the true costs of providing infant-toddler care in order to better support care providers and to offer parents access to higher qualities of care.

Develop alternative ways to determine the cost of child care that truly account for the cost of high-quality care rather simply using market rates for subsidies. Using actual costs rather than arbitrary “rates” will take into account key factors like teacher training, staff ratios, number of classrooms, and attendance. This will give a more accurate figure of costs involved in maintaining a high-quality program. For example, the Federal Office of Child Care has developed a tool for analyzing the actual cost of providing child care through all of the standard levels of the quality rating and improvement system. Other states have reviewed their surveys and made modifications based on recommendations from experts like The Alliance for Early Childhood Finance’s “Provider Cost of Quality Estimator.” Maine should follow suit.
Special Focus on Maine’s Child Care Tax Credit

The federal tax code, and that of 26 states, including Maine, provide some assistance to families in meeting their employment-related child care expenses. However, the current Maine Child Care Credit could be improved, so that working families may receive more meaningful assistance in paying for the child care that is so essential to their economic well-being.

Maine’s child care tax credit is based on the federal Child and Dependent Care (CADC) Tax Credit. It is worth 25% of the federal CADC Credit after it has been limited by the claimant’s federal tax liability. If the Maine credit is claimed for higher-quality child care services, it is worth 50% of the CADC Credit (limited by federal tax liability). The Maine credit is refundable, up to $500.

But the current Maine credit provides limited benefits for working families on the lower end of the income scale. First and foremost, the Maine credit is limited because the federal CADC Credit upon which it is based is not refundable. Because the federal credit is not refundable, tax filers with little or no federal income tax liability may not be able to claim it. Even if low-income families claim the federal credit, they may not fully benefit from it because of limited federal tax liability. For example, if a family’s federal credit is worth $800 but its federal tax liability is only $200, the family is able to claim a credit of only $200 on its federal return.

This can significantly limit the benefit that lower-income families receive from the federal CADC Credit (and by extension, from the Maine Child Care Credit). It has been estimated that families with incomes below $30,000 receive just 4% of the tax benefits of the federal CADC Credit, nationwide. Similarly, fewer lower-income Maine residents claim the federal CADC Credit. Currently, about 70% of tax filers in Maine who claim and benefit from the federal CADC Credit (and presumably the current Maine credit, which is based on the federal credit) have incomes above $50,000, which exceeds the median income in Maine ($48,453).

In addition, those lower-income Maine families that do claim the federal credit receive fewer benefits, on average, than higher-income families. This is despite the fact that the federal credit is designed to provide a higher percentage of child care expenses to lower-income families. In addition, the Maine credit offers limited benefits because it is worth only 25% of the federal credit (50% for quality child care services). The federal credit itself is worth between 35 and 20% of a family’s child care expenses (depending on the family’s federal Adjusted Gross Income) up to a maximum of $3,000 for one child or dependent, or $6,000 for two or more children or dependents. Thus, the Maine credit provides benefits that represent only a fraction of a family’s child care expenses.

When these elements are considered together, it is not surprising that the Maine Child Care Credit only offers limited assistance to Maine working families, especially those who are lower-income. The data suggest that the amounts claimed under the Maine Child Care Credit — while certainly helpful to eligible families — likely make only a small dent in families’ actual child and dependent care costs. The average amount of the federal CADC Credit claimed by Maine families in 2012 was $524.64, which would result in a Maine Child Care Credit of $131.16 ($262.32 if quality care services were used). The average amounts are smaller for lower-income families.
Recommendation

Increase the percentage of the federal child care tax credit that may be claimed for purposes of the Maine credit to 100% (200%, if high-quality care is used). This would quadruple the value of the current Maine Child Care Credit and offer more meaningful assistance for the average costs of child care in Maine. In order for Maine families to take full advantage of the increased percentage, the current $500 limitation on refundability should be removed.
QUALITY CARE

The research is clear. Children in high-quality programs do better in life, academically and socially. To ensure quality programs, we must have standards, measures, and evaluations in place. We need well-trained staff who understand the developmental needs of our youngest children and can work with families at all income levels. We won’t get to these quality experiences without accountability, funding, coordination, and cohesion across the entire child care system.

Quality Improvement System

A quality rating and improvement system, such as Quality for ME, creates a ranking system for parents to identify high-quality care and gives incentives to providers to improve. Without public awareness, the entire point of the system, to encourage parents to select high-quality care, doesn’t work. The system assumes that parents will demand quality care, providers will desire to improve based on parent demands, and that incentives by the state will also encourage providers to move up the quality scale.

The lack of demand from parents, along with a lack of investment from the state to provide incentives for providers, has resulted in a system that needs reform. In 2014, the University of Maine, in collaboration with the University of Southern Maine, was awarded the Quality for ME Revision Project contract from the State of Maine. The 140-page report was submitted in August of 2015 and includes suggestions for significant reforms to the quality rating and improvement system, including:

- Establishing greater visibility of a program’s rating online;
- Change the name as part of a larger re-branding and marketing effort;
- Change from the existing “Steps” framework to a “Stars” framework, which is more familiar to consumers of all types;
- Open eligibility to programs as soon as providers become licensed;
- Provide steeper tiered reimbursements to incentivize child care programs to enroll and move up to higher quality; and
- Offer additional financial resources such as mini-grants, increased scholarships for tuition, or college loan forgiveness.

Effective professional development links coaching to group training. This allows teachers to practice what they have learned in the presence of a supportive expert to progress to a deeper understanding.

Family, Friend and Neighbor Care

Family, friend, and neighbor (FFN) providers make it possible for parents to get and keep a job and ensure their children are safe and well-cared for in a nurturing environment. Many families choose FFN care because they want someone they know and trust to care for their children. Parents working evenings, nights, weekends, or irregular hours may turn to FFN care because it is the only option flexible enough to accommodate their schedules. Across the country, states have begun to employ a variety of strategies to provide access to resources and technical assistance for FFN providers to improve the quality of child care offered. There are currently limited resources and financial support in Maine for professional development of FFN providers.

Social Emotional Learning and Development

Efforts to support the development of both cognitive and social-emotional skills deserve more attention in the design and functioning of early care and education programs. These are all core capacities in learning and in life. In fact, research is also clear that when early childhood programs emphasize both academic and social-emotional skills, these programs see a range of positive outcomes, including reductions in children’s problem behaviors, improved classroom climate, and reduced teacher stress.

Early childhood mental health consultants provide guidance and support to help staff and families in early care and education programs across systems promote young children’s social-emotional development and prevent, identify, or reduce mental health challenges. This behind-the-scenes approach to improving the capacity of providers and families is distinct from providing direct clinical mental health services. Consultation services are voluntary and offered at no cost to the program or family.
In Connecticut, the non-profit called “All Our Kin” offers many programs for supporting family care providers as well as for the parents and children they serve. The programs target areas in which child care providers may struggle: step-by-step support to obtain and maintain licensing; networking through a provider network; and, hands-on professional training and technical assistance in best practices of care. All Our Kin recognizes that well-supported child care providers pass the benefits of their training and new knowledge on to their client families and communities.

The Colorado Statewide Parent Coalition has worked to decrease the achievement gap between Latino and non-Latino children in the State of Colorado by investing in a program to support the women who care for the state’s youngest Latino children. Providers Advancing School Outcomes (PASO) was created to educate and train the many unlicensed friends, aunts, and grandmothers who are caring for children ages birth to five.

The PASO early childhood education program is intensive with 120-hours of instruction. The 12-month training includes the presentation of 30 separate 4-hour seminar classes by the Program Trainers — referred to in the program as Tías, or “aunties.” This training is accompanied by two monthly visits by the Tías (trainers) to the homes of the caregivers. These in-home meetings allow relationships to form and provide the trainer with the opportunity to respond to questions and to discuss with providers how the information can be applied to the care and education they are providing to the children. Trainers also offer materials and training to caregivers to help them convert an area in their homes into learning centers for small children. Providers receive certification in CPR, First Aid, Universal Precautions, and Medication Administration. Finally, PASO prepares the providers to apply for the Child Development Associate, by assisting them with the application and to demonstrate their knowledge of the required competency standards.

The Early Childhood Consultation Partnership is a statewide, evidence-based, mental health consultation program designed to meet the social and emotional needs of children ages birth to five in early care or education settings in Connecticut. The program builds the capacity of caregivers at an individual, family, classroom, or center-wide level. It provides support, education, and consultation to caregivers in order to promote enduring and optimal outcomes for young children.
The Department of Health and Human Services and the Legislature’s Committee on Health and Human Services should review the University of Maine’s 2015 report and begin the efforts necessary to implement a four-year plan to improve the state quality rating improvement system, including any necessary statutory or regulatory changes.

Maine should increase the incentives to provide high-quality care under the child care subsidy system by increasing the current “quality bump.” For example, providers at level four of Maine’s quality rating system should receive a 25% quality rate differential as opposed to the current 10% differential. Providers need significant incentives to move up the quality rating system.

Invest in public awareness of the value of early learning. Conduct a public information campaign on the value of early learning and basic strategies, like reading, talking, and singing, to stimulate brain growth.

Develop policies to help family, friend, and neighbor providers increase the quality of their care. Policies could assist providers with the additional costs of providing high-quality care and could support parents who need better access in order to remain at work or school. State policy makers can explore and develop a child care support policy specific to Maine’s unique landscape and challenges.

Develop an initiative similar to All Our Kin to support family, friend, and neighbor providers, as well as the parents and children they serve.

Increase the financing and support for professional development, including coaching and technical assistance, provided by Maine Roads to Quality. While it was common practice to think that training alone would suffice for ongoing in-service professional development, recent research has demonstrated that training alone is not sufficient.

Establish a statewide voluntary Early Childhood Consultation Program to provide supports and guidance for early care and education teachers and providers serving infants and young children in center and home-based child care, Early Head Start, Head Start, and public preschool settings who are experiencing significant and persistent challenging behaviors that put them at risk of learning difficulties and removal from early learning settings.
A prosperous future for Maine requires that we ensure the success of all children.

We must invest in them and the professionals who support them and ensure they can participate in the quality programs we know will make a difference in their lives and in Maine’s future economy.

Nobody should have to agonize with a decision of whether or not to have a family based on whether she can find and afford high-quality child care. The challenges Maine families face are real, but they are not insurmountable.

Vision and leadership is needed to conceive what we can do for Maine children and their families and to make it reality. To better serve parents and prepare our children to succeed, we must create an integrated system. The early childhood programs currently scattered across different branches and divisions of state government should be unified in a single entity with a cabinet level advocate for early childhood.

The Maine Women’s Policy Center and the Maine Children’s Alliance stand ready to share all we have learned and to work with partners to advance meaningful change on behalf of the youngest members of our society.
END NOTES


15 Ibid.

16 Ibid.


24 See IRS Tax Statistics, SOI Tax Stats, Historic Table 2, available at http://www.irs.gov/uac/SOI-Tax-Stats-Historic-Table-2. (In 2012, of 26,420 total claims of the federal credit in Maine, 8,090 of them were by tax filers with incomes below $50,000, while the remaining 18,330 were by tax filers with incomes over $50,000, including 6,770 claims by tax filers with incomes above $100,000.)


27 Ibid.


This project was made possible by the John T. Gorman Foundation, the Betterment Fund, the Bingham Program, the Broad Reach Fund of the Maine Community Foundation, and a generous supporter.

**Maine Women’s Policy Center**

**LEARN • SHARE • LEAD**

The Maine Women’s Policy Center was founded to improve the economic, social, and political status of women and girls in Maine through research, public policy, and leadership development. MWPC works for systemic change by organizing, training, and supporting women and girls to effectively participate in the policy-making process. [mainewomenspolicycenter.org](http://mainewomenspolicycenter.org)

**Maine Children’s Alliance**

The mission of the Maine Children’s Alliance is to advocate for sound public policies that improve the lives of children, youth and families in Maine. [mekids.org](http://mekids.org)