cluded are any of the dry pastes crowding supermarket shelves today. Also not included among foods are imported cheeses, peanut butter, jams, jellies, pickles, mashed potatoes, cream soups, sauces or condiments (except salad dressing).

Not since 1961-62—a full 13 years ago—has the official “marketbasket” of the Bureau of Labor Statistics changed which pattern of changes in our cost of living has been updated. The 396 different types of goods and services chosen to represent the then-current spending patterns of U.S. city families are now startlingly out-of-date. With the incomes of an estimated one-half of the U.S. population already tied to this index, a reconstruction is badly needed.

This reconstruction is now under way—and it tells the fascinating tale of how much our spending patterns have changed over the years. To suggest a few astounding omissions:

Despite the fantastic explosion in the whole field of “convenience” foods, the only prepared foods in today’s index are canned beans and chicken soups, spaghetti and tomato sauce, milk, cheese and French fried potatoes. Among alcoholic beverages, although vodka sales have soared 320 percent in the past 15 years and vodka is now running neck and neck with bourbon as the nation’s favorite drink.

Conspicuously omitted from the list of household supplies and services are heavy duty household appliances, plastic bags and aluminum foil, most of today’s homeplastic products, diaper service, landscaping and home security products and services.

Of all hospital care is counted—but among major factors in today’s zooming health care costs not priced by the index are emergency room care, nursing home care, convalescent care. Not included among outpatient medical laboratory tests are PAP smears, electrocardiograms, chest X-rays and blood tests. In today’s CPI index, a “routine urinalysis” speaks for a long list of costly lab services.

Because of the large number of requests our subcommittees have already received for copies of these statements, I ask unanimous consent that a copy of each submitted statement be printed in the Record.

I urge my colleagues and members of the public to review carefully the testimony we received.

There being no objection, the statements were ordered to be printed in the Record, as follows:

STATEMENT OF JOSEPH H. REID, EXECUTIVE DIRECTOR, CHILD WELFARE LEAGUE OF AMERICA, INC., ACCOMPACED BY MRS. JEANNE H. ELLIS, EXECUTIVE DIRECTOR, THE CHILD CARE CENTER OF STAMFORD, CONN., MEMBERS, CHILD WELFARE LEAGUE OF AMERICA, INC.

INTRODUCTION

My name is Joseph H. Reid. I am the Executive Director of the Child Welfare League of America, Inc., New York, New York. I am authorized to testify on behalf of the Board of Directors of the League, the largest national voluntary accrediting organization devoting its efforts completely to the improvement of care and services for children in the United States. established in 1920, the League is the nation’s voluntary accrediting organization for child welfare agencies in the United States. It is a privately supported organization devoting its efforts completely to the improvement of care and services for children. There are nearly 400 child welfare agencies affiliated with the League, representing every state and territory in the United States. Represented in this group are voluntary agencies of all religious groups as well as non-sectarian public agencies. Mrs. Jeanne H. Ellis, who joins in this statement and who is authorized to testify on behalf of her Board of Directors, is involved with three Stamford, Connecticut, early childhood educational programs, and her agency is one of our members. Her programs are the Child Care Center of Stamford, Inc., the Stamford Day Care Program, and the Stamford Children’s Bureau, 88 Hill Road, Stamford, Connecticut. We will also be presenting data prepared for these hearings by Barbara M. Atwood, director of the League’s research project.

The League’s primary concern has always been the welfare of all children regardless of race, creed, or economic circumstances. The League’s special interest and expertise is in the area of child welfare services and other programs which affect the well-being of children and their families. The League’s prime functions include setting standards for child welfare services, providing consultation and services to agencies, conducting research, issuing child welfare publications, and sponsoring annual regional conferences. During my term with the League’s many appearances before the Congress in the past, we have commented on the need for the kinds of services authorized in these bills. We are pleased, therefore, to have this opportunity to testify on the general need for these services and to offer some specific suggestions regarding the legislation.

THE NEED FOR CHILD CARE SERVICES

At the outset, we concur with Elizabeth Waldman and Robert Whitmore, authors of Children of working mothers, March 1973, which appeared in the May 1974 Monthly Labor Review. They were speaking from the vantage point of the Bureau of Labor Statistics and we speak from the vantage point of the largest collections of data available in the U.S. Together, we agree that “...little is known about the current supply and demand for child care services and facilities.”

In a nation that spends millions on surveys, it is regrettable that our most recent collection of data is based on 11-year-old data published in 1968. We join Waldman and Whitmore in calling for a new study; the study should be at least as comprehensive as the last survey.

Child care arrangements of working mothers in the United States

The fact is that no one knows what the situation is today. We do have some data, however, and, if we may be permitted to extrapolate from what data we have, we believe that we can arrive at some indications of the needs to be met.

The 1974 estimate

The League’s 1974 estimate of need is attached as an Appendix to this statement. At that time, based on available data, we estimated that 3,852,000 children under 18 years needed child care. We arrived at the estimate as follows:

Children with mother in labor force

Children with father (the single parent) in labor force

Children with handicapping conditions

Children in families where father is in the home and not in the labor force (usually because he is aged, blind, or disabled and unable to provide for himself, with or without supervision)

Children in families not previously listed, with incomes below the poverty line

Footnotes at end of article.
estimated that 7,002,000 were under six years of age.

In August, based on data available as of June 1974, listed the total licensed or approved capacity of child care arrangements at 774,021. In October 1974, a publication titled "The Child Welfare bulletin" listed the total as 1,021,202—about 250,000 more. Assuming that all those 250,000 spaces were full, it is estimated that the existing capacity was the same as existing licensed and approved facilities, at least 62.5 percent of the facilities were approved, and that they need to be replaced. In other words, 156,250 of those spaces are "unusable" for our definition and cannot be counted in capacity. Updated and refined in this way, we find that the capacity—licensed, approved, and unlicensed—is 4,270,284 at most in the home, 1,043 children, or 0.4%, are in "caretaker looks after child while away from home," and 9.6% look after themselves.

The need for child care, obviously, is immense—an estimate of about one million usable child care spaces and nearly 33 million children under age six who require care and supervision. Since most licensed spaces are designed for and utilized by preschool children, the greatest relative need is for school-age care. In New York City alone, spaces were fully utilized and given over to the care of the younger, more visually vulnerable group. Preschool children between the ages of three and six—the need would still be for six million new spaces at once. Counting only those children under six whose parents cannot provide adequate care and supervision for them, the need is over five million.

A later source of data

The need for child care arrangements for AFDC children is the most critical. Families that have signed for and utilized by preschool children in the state, are those licensed and approved for AFDC children. According to data provided by Mrs. Ellis, looks after child while away from home, are in "arrangements unknown," 2.2% are in "caretaker looks after child while away from home," and 9.6% look after themselves.

The AFDC statistics stop with age 14. We believed that they should not stop at this age, since many children, as evidenced in various juvenile delinquency and other statistics, require care and supervision until they are of working age, 18. By extrapolating AFDC computations stop at this age, but by this age the child care arrangements have deteriorated to the point where there are more than two-thirds of the children in no formal child care arrangement.

The need is even greater for five-year-old children. In Stamford, as in many communities, many children are in "self-care," ten is inadequate to meet the needs of working or training mothers. A real hardship is created, particularly for the one-parent family, or the young family in a two-parent family. The Stamford Day Nursery, serving approximately 600 children aged three through five, is unable to meet the demand. There are an additional 1,000 children who are currently not known to the Child Welfare Department and who need care.

The remaining 842,000 are of school age; their care is estimated to cost $1,120 billion per year. In sum, care needed by children now on the welfare rolls or in other arrangements will require appropriations of $325 million.

Needing our suggestions regarding the particular legislative proposals put forth to begin meeting this need.

Working with somewhat modest "need" figures, the League estimates these immediate appropriations are required to serve those children most obviously at risk.

Eight hundred twenty-five thousand children, or 2.2% are in "arrangements unknown," 2.2% are in "caretaker looks after child while away from home," and 9.6% look after themselves.

Recapitulation

Approximately 825,000 children of working parents currently look after themselves. They are "caretaker looks after child while away from home." Approximately 184,000 children of working parents are under six who were not counted in the AFDC study. The home other accommodation for these children, and the number of spaces to fund care for these children would be $2.8 billion.

If we add to these needs those of the remaining preschool children requiring care whose parents are in the work force, we would need care for 4,936,000 children (the 5 million estimate from page 4 of text minus the 75,000 accounted for above) at $1 billion per year. The appropriation required to fund care for these children would be $1 billion per year.

Having discussed the scope of the need, here are our suggestions regarding the particular legislative proposals put forth to begin meeting this need.

The Child and Family Services Acts

The League's Newsletter, Vol. 4, No. 2, Spring-Fall 1974, contained a comparison of the Senate and House versions of the Child and Family Services Acts and is attached as an Appendix to this statement. In general,
we continue to find the Senate version preferable for reasons outlined in our article last month. Because of this apparent reason, please consider these suggestions as pertaining to the Senate version—It is S. 626 that we would prefer to see enacted, with substantial changes.

Title

We do not wish to quibble over labeling. We recognize the importance of stressing that day care and child development services benefit families and agencies providing them, as well as the "benefit" society, industry, etc. We also recognize that certain kinds of family services, especially those designed to offer emotional and technical assistance, are especially complementary to child care services. So long as the bill's scope is limited to the clearly-linked child and family services and does not move into very important but peripheral areas (such as marriage counseling, substance abuse counseling, job counseling, etc.), we would be supportive. We do believe there is some potential for misunderstanding in the current title.

Authorization

We are distressed by the difficulty in obtaining authorization for Head Start in the past and the even more difficult task of obtaining and spending appropriations. In particular, the example of funding for Title IV-B of the Social Security Act comes to mind.

Therefore, we would suggest that authorizations for this bill be set either at a level at least twice as high as that required or that voluntary contributions be solicited.

Specifically, we would favor first-year authorization of at least $1 billion, with expansion at a rate of at least $1 billion per year until the children with the greatest needs are served.

We recognize, of course, that the level of real spending (not imputed value) we estimated earlier—in the $4 billion area—would be at least a decade away. Still, we believe it is important to authorize and appropriate real funds at once.

Since the Head Start program has been extended in other legislation, we would suggest that the tie-in of Head Start funding in the authorization section be eliminated. We favor Head Start and all the other quality children's services programs but would not want one to be used to destroy the other programs to endanger funding for this program.

We are extremely hesitant to recommend spending for training, planning, and technical assistance only—even for the first year. What is so desperately needed is immediate new funding to assure the same kind of proportionate and appropriate expenditures for training, planning, and technical assistance should be expended—but as new operating funds flow, not in lieu of direct spending for services to children. We agree with Mrs. Ellis when she says: "I would like some safeguards to assure that less money is spent at the top and more in actual services to the people."

The Office of Child and Family Services

The League is increasingly troubled by the lack of clear definition of the Federal role which is both a watchdog and an advocate for children. We question whether the new Office of Child Family Services can perform these functions, and at the same time administer large programs, any more effectively than the well-meaning current agencies, Social and Rehabilitation Service (SRS) and the Office of Economic Opportunity (OEO).

We have worked for many years to arrive at a sensible solution to the administrative tangle. The Administration and Congress of 1971 with the publication of A National Program for Comprehensive Child Welfare Services. Our 1971 position recommended that "a unit should be designated in the federal government in which responsibility is centralized for the surveillance and advocacy of children's rights and for the social services designed to implement those rights."

The evidence suggests that neither SRS nor OEO can fill this gap. The nation now knows what many parents and public officials have known for a long time: that the HEW audit of Federally funded day care services has been made public. Child-staff ratios were not met. Health and safety requirements were not met. The obvious question which we are faced with, predicable, was that neither Federal agency could bring surveillance and advocacy to bear against practices that were in the short-term in the best interests of the government. Shoddy day care is cheaper and easier to set up. Day care that meets requirements is more expensive. When it is imperative to hold down costs and at the same time keep spaces open in order to encourage welfare recipients to take jobs or training, surveillance and advocacy suffer.

The failure to close down poor day care is similar to the failure to close down poor nursing homes. Although the HEW failed to close down programs because they didn't want to lose the day care "slots." This failure of surveillance and advocacy at both the Federal level and in several areas by a failure to help make social services work. In the May 1974 issue of Child Welfare, Winford Oliphant wrote about the sad, disorganized state of children's services in the states.19 From the other angle, viewing "disorganization of public child welfare services" (idem) as "... what the states need is the kind of leadership formerly provided by the U.S. Children's Bureau," it seems, therefore, with the recommendation in this new legislation for creation of a Federal agency which appears destined to repeat the failures of SRS and OEO (at least not in terms of surveillance, advocacy, and technical assistance of the Children's Bureau sort), we must hesitate.

We grant the need for an administrative home for this new, hopefully massive program. However, we cannot abandon what we think is another administrative necessity—having the agency develop and encourage the practices that can do the three jobs we feel are so essential.

We applaud such reorganization as will accomplish all of the above goals: 1) setting up an agency to operate large programs offering comprehensive services to children; 2) setting up another agency which has a rather different mission than seeing that the "slots" stay open or that the costs stay down.

For now, we leave it to the inventiveness of the Congress to accomplish both goals.

Earnarked funds

We have no objection to the allocation of funds in the bill's Section 103. We enthusiastically endorse the 5% set-aside for monitoring and enforcement of standards. This is precisely the kind of surveillance we discussed above. It represents the most genuine concern we could imagine. At the same time, it offers part of the financial base for the kind of separate agency we discussed.

We have always endorsed a priority for the economically disadvantaged, but we query the seemingly overweighted allocation on the basis of economically disadvantaged status. As we have indicated, this need is to serve more than the children of the poor. The working poor, the so-called middle class, and children with handicap-

Footnotes at end of article.

Prime sponsors

The League's "Child Care Principles," which is attached as an Appendix to this statement, has long called for "a flexibility of administration to permit adaptation of programs to meet community need." This is reaffirmed at the most recent meeting of our Board of Directors. The Board of Directors said that "... there should be no implied assumption of the role of the prime sponsor/best able to provide quality services should be chosen." This means the League cannot endorse legislation which writes in any assumed prior responsibilities.

Mrs. Ellis, from her vantage point as an operator, says essentially the same thing: "With reference to prime sponsors, we feel that the definitions of prime sponsor should not be limited to state or municipal governments. In many cases, a municipality or a board of education that is not involved in child care. Prime sponsorship should be varied and open to municipalities, private agencies, boards of health or welfare and others as the area and community may dictate." We do feel the necessity for strict restraints of program, income, and expenditure restrictions as to who may serve as sponsors may prevent funds from reaching geographical and professional groups where the need is greatest.

Child and Family Service Councils

One of the League's principles is that "there should be provision for parental involvement in day care programs." Our Board agency says it like this: "Quality day care which includes parents as partners and a professional staff is expensive. We believe children deserve this federal expenditure. Stamford enjoys active and viable parent involvement. Our work with parents is an experience. We work closely with parents as team members, to assure that parents are actually involved in policy decisions as to what parent gains are carried forth into the larger community, beyond the day care experience. We advocate programs that educate, encourage and involve parents.

Try as we may with parental involvement, however, there are problems that we believe must be examined. Problems that may be parental involvement that isn't what they want or have the time, energy, or money for.

First, a finding from a recent Illinois survey on the amount of time parents spent in their child's day care center (including bringing the child in and taking the child home): 14

44% spent less than 15 minutes a week (1½ hours, morning & evening);
25% spent 15 to 30 minutes;
11% spent 30 to 45 minutes;
11% spent 45 to 60 minutes;
5% spent 1 to 2 hours;
3% spent more than 2 hours.

Findings from a survey of parents in San Francisco also help provide some guidance as to what sorts of parental involvement they may wish. 15

First, about 30% of parents didn't visit the program before they enrolled their child. Second, only about 20% told the program that they had a good program—the more pressing reasons, in sum, were convenience, no choice, no opportunity.

Third, the problems that keep parents from being involved are other demands at home, lack of transportation, physical exhaustion, and lack of transportation.

Finally, here's what parents say they want for "involvement":

34.9%—spend time with children;
19.8%—planning program;
homes, or day care, it has been the same.

We commend the Appendices to you. Perhaps as a subsequent hearing you will want to hear my findings and recommendations. For now, we can only repeat our Board's position: no public monies should be used to create organizations through child and family service legislation.

Our comments on parental involvement, fees, and the like are noted above.

Federal share

We would like to see Federal funding remain at 90%. As in the President's Budget, we have not an increased tendency to shift to the States. We believe that the Federal share should increase.

Federal standards for child care

We believe that the standards should be clear for every program receiving Federal funds, whether through tax deductions, income disregard, or vendor payments. The 1968 Requirements should govern with additional language to assure that in-home care meets appropriate standards, such as those of the Child Welfare League or the Federal Health Alite Services. In addition, specific requirements for the group care of children under two must be designated by the Congress in the legislation.

Staff-child ratios for infant care

The League is well aware of the controversy surrounding the matter of infant day care. We vigorously support any day care that not only helps infants but does them no harm. In taking this position, we are aware of there are many well-intentioned people who disagree with us. We are pleased, however, that the Congress has repeatedly recognized the need for infant care to be a program of public health. The ratification of recommendations in this regard contained in the recently enacted Social Services legislation, the new Title XX of the Social Security Act, is a step in the right direction. 

The National Council of Homemaker-Home 

Care serves children under two shall be more than two to five in group care facilities, the ratio of caregivers to children two but under three shall not be more than five to ten, such care to be provided for in groups of not more than five.

Consistent with that position, we ask that you new language proposed above be supplemented by adding the following phrase: 'Provided, that the ratio of caregivers to children age two but under three shall not be more than two to five, such care to be provided for in groups of not more than five.'

We purposely do not attempt to derive a ratio for one adult to every five children. The age range could be widely misinterpreted.

The rationale for the ratios in group care of infants

The one person best equipped to discuss this question is an obstetrician, at least from the professional, research viewpoint is Sally Provence, M.D., Professor of Pediatrics and Director of Child Development, Yale Child Study Center, New Haven, Connecticut. Dr. Provence planned to present her testimony to us, but scheduling conflicts made it impossible for her to be with us today. She asked me to present her testimony for her, along with a number of extremely important Appendices, and to express her regrets to the Committee. Her testimony follows.

"The testimony to follow is based upon clinical and research experience to date with children of young children under the age of many years. Most immediately relevant to the present testimony is the experience of seven years of clinical research in which I have been responsible with help from colleagues for conducting early intervention programs, including a day care program for children in the early months of life through age five years. My involvement has been as an occasional visitor but as a planner, observer, and evaluator of the program, and as the person responsible for solving problems that came up in the daily work with children, parents, and staff.

The position of the Child Welfare League's position in regard to the ratio of adults to children. Infants not yet walking are dependent upon adults to provide what they need. First of all they require care from persons who not only know what is important or necessary for their well-being but also signal appropriate signals from the infants about their discomforts and immediate needs. In the beginning many of the emotional problems that come up in the daily work with their well-being, they are ready for and benefit from a larger number and variety of experiences as long as the experiences are in a solid relationship with the maternal figure. If a large part of this experience as well as the physical care and protection of the infant is provided outside the home in family or center day care by persons other than the child's own parents, it is incumbent upon the system to insure that the care is adequate and beneficial, not harmful.

It is difficult enough for one caregiver to care for to care for two children, or a small group of two children who, indeed may need to be fed or changed or made comfortable or talked to or provided a play time at the same time. To have the responsibility for more than two places an impossible burden on the caregiver and guarantees that some child is going to be shortchanged. Moreover, the long-term effects of chronic stress occurs in children who are underfed and uncomfortable for more than two places an impossible burden on the caregiver and guarantees that some child is going to be shortchanged. Moreover, the long-term effects of chronic stress occurs in children who are underfed and uncomfortable in group care facilities, the ratio of caregivers to children two but under three shall not be more than two to five, such care to be provided for in groups of not more than five.

Footnote at end of article.
Increased interest and striving for independence and competence, his necessity to achieve control over his sphincters, to gradually modify his egocentricity and to begin the long task of learning how to control his own impulses, require adult support and guidance. Similarly, his personal and social relationships are developing in complexity. He needs help to learn about and deal with the world cannot be accomplished without substantial help from understanding adults. One adult, no matter how well-meaning, cannot provide those important ingredients for more than a few minutes’ time with three or four or five or more such young children. Intensive needs are immediate, capacities for hurting oneself or others are expanding. In such a situation it is not only that the development is not adequate, but that the nurse becomes a confusing and frightening jungle. Such a scene is a disservice to young children, to their parents and ultimately to their community, for not only does such a situation interfere with the child’s realization of the individual and unique potentials with which he is born, but the especially well-functioning member of a family and of a larger society is markedly hampered by such experiences. The second and third years of a child’s life are of high and expanding importance, are temperamental and stressful even under good conditions. If his environment is not geared to his most important developmental needs, at the very least he will be unable to realize his potential and at worst he will be programmed for failure either in his cognitive or in his emotional life and/or in his social adaptation.

In our present society when stresses upon family life are greater than ever before, the supports provided by extended families, neighborhoods and social groups are fragmented and unsustained, the tasks of rearing children are unaccompanied. We have a widespread need for parents to be assisted with the tasks of childrearing is a fact, not a theory. Nowhere is that need more crucial and urgent and long-term implications more relevant for the society than during the early years of the child’s life and during the early phases of maturation. Families and young children at unusual risk (e.g., one-parent families, poor families, families with one or both parents mentally disturbed, families in residential care) with biological vulnerabilities (e.g., children with behavioral vulnerabilities) are traditionally and unquestionably in need of services and support. However, the important services and supports which are needed are by no means limited to the high-risk groups. Many families in which both parents are self-supporting, well-functioning individuals and whose children are healthy also need not only sound advice for childrearing but tangible services as well. While the needs of the children of well-functioning families may not be as great to begin with as the needs of the children of families at unusual risk, they are real and substantial and every child needs the supports provided by extended families, marital partners, neighbors, and community. Likewise, the supports provided by young children through their development. They speak to the rationale, principles and problems involved in creating substitute care programs for the very young and their parents, bearing in mind that the intent not only is to help but to do no harm. For us as individuals and for our government to fail to act in accordance with our best current knowledge about what improves the development of children and the quality of the home environment, is to limit the growth of children and the community’s potential far more than we can afford economically nor what might be realizable social policy at the present time. They also are not written, however, from which we can calculate the cost of childrearing, but to optimize the child’s development. We believe the challenge of childrearing is a fact, not a theory. Nowhere is that need more crucial and urgent and long-term implications more relevant for the society than during the early years of the child’s life and during the early phases of maturation. Families and young children at unusual risk (e.g., one-parent families, poor families, families in which both parents are self-supporting, well-functioning individuals and whose children are healthy also need not only sound advice for childrearing but tangible services as well.

The attached documents contain material relevant to the care and nurturance of the very young. They are not written from the point of view of the high-risk groups who have a financial need to work for programs that do not limit them further. Equally serious is to set up, institutionalize, and ossify programs for children which challenge and stimulate the young mind. The idea of a ‘mind-numbing’ custodial program is abhorrent to us. As a result, we have striven to maintain a teacher-child ratio of 1:5 for three’s in order to promote a closer relationship between teacher and child, virtually impossible with more than this number of qualified staff in our opinion can provide even good custodial care. With today’s active younger generations, who are able to voice their position of children, we desire to assure the safety and well-being of every child who comes to us for care. It is well to note that today’s preschool programs under excessive pressures which is in this phase of development is beyond their coping ability. Thus, we have emphasized, Quality day care which is developed in collaboration and limited by a professional staff is expensive. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment.

“Feedback from public and private schools indicates that the children who have had day care or Head Start experiences progress rapidly in academic, social, and communication skills. They have an enthusiasm for learning which is reflected in their interest in the curriculum. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment. We believe that American children deserve this financial expenditure. Stamford enjoys active and viable parent involvement with parents in an enriching environment.

We question stipulating at this time, another extensive and expensive process of writing Federal Standards, given the experience with the OEO project that culminated in the publication of our Position Paper on Day Care Licensing. A more usable and sounder guide to day care licensing was developed with no governmental funds than the ‘a la carte’ approach that has the suspicions of the Day Care Alliance of the National Council of Organizations for Children and Youth. That product, Inserted in the Gentleman’s statement by Senator Edward M. Kennedy of Massachusetts, was adopted by United Child Care, Inc. with the concurrence of the Senate. Walter F. Mondale, is attached as an Appendix to this statement.

Uniform code for facilities

We believe, therefore, that a clear statement of what constitutes a legal definition of ‘non-profit’ and ‘family day care home’ which does indeed support the development of children and the quality of their experience is not only a matter of what we believe, but what we know to be far from adequate for children, and that the need for these services, knows no, financial boundary. People of varying ethnic, socioeconomic and religious groups must live,
work and play together. Business and industry also gain in productivity and performance when parents are content with their child-care arrangements.

It is our hope that a new kind of accounting—based on needs and human priorities—will be practiced in this country. We all need to remember that communities will survive healthily only if people, especially our youngest people, survive and develop healthily.

In calling these hearings and continuing the fight for the kind of comprehensive child-care policy that many millions of people know that you realize that survival is the issue. We commend your continuing efforts on behalf of decent legislation and pledge our support to you in this important and challenging task.

We thank you for inviting us to present our Statement and to continue, with you, in forging legislative remedies to meet the needs of all the Nation's children and families.

APPENDICES


Appendix III—"Child Care Principles" (of the Child Welfare League of America, Inc.), by William L. Pierce.


Appendix V—"Day Care Services: A "No-Quality" Future?", by William L. Pierce.


Appendix VII—"Early Intervention: Experience in a Service-Centered Research Program," by Sally Provence, M.D.

Appendix VIII—"A Program of Group Day Care for Young Children," by Sally Provence, M.D.

Appendix IX—"Issues in Early Day Care," by Paul C. Naylor.

Appendix X—"A Position Paper on Day Care," by Audrey K. Naylor, M.S.W.


FOOTNOTES

Because of the length of the Appendices, copies have not been attached to each copy of the League's Statement. One copy of each Appendix has been provided to the Committee so that those who wish to obtain Appendices should contact the League.


2. We assume that the same "replacement factor" will hold for these arrangements as we did in our 1974 estimate, op. cit., p. 7.

3. See Child Care Data and Materials, a Committee print prepared by the staff for the 1974 Annual Committee on Finance, dated October 1974. It is a compendium of statistics on child care, reports of child care studies, relevant statutory language, and regulations.


5. All base data are from the 1973 APDC study, especially pp. 23-31.

6. "We "conservatively" estimate that the 1975 cost to be $2,600 per year for full-day (10-12 hours per day) care for pre-school children. The cost for before- and after-school care and care during holidays and vacations of children six and older we estimate to be $4,000 per year.

7. It is beyond the scope of this statement to fully explicate our position on the problem of recognizing the imputed value of child care provided by parents in the home and the implications that we believe this has for public policy makers. Various studies have placed the value of housewives' services in the U.S. at 21% of the gross national product (GNP) and volunteer services at 2% of the GNP.

This "current, uncomputed" cost of child care needs to be kept in mind when viewing government programs. We are essentially converting uncompensated but real work into compensated work in our society, and it is vitally important that all policy makers remember that one of the real costs of earning income and of putting persons into the work force are child care costs. This care is provided by unpaid public servants who go about their business without any compensation.

8. Useful material on this subject is available, and one of the better sources is the 1970 Report of the Royal Commission on the Economic and Social Impact of Children. We would hope that these issues could be examined by the tax-writing committees in some detail.


17. "Parents and Child Care, by Stevanne Auerbach Pink, Ph.D. (San Francisco: 1974.)

18. Pages 41 and 43 provided the data but this book contained much other useful material about parental attitudes.


21. Corporations and Child Care: Profit-Making Day Care, Workplace Day Care, and a Look at the Alternatives, published by the Women's Research Action Project, Box 118, Porter Square Station, Cambridge, MA 02140. This 74-page publication found that profit-making centers provided mediocre care for children, charged high prices to parents, and paid low wages to staff. It may be obtained by contacting the address above or by writing the Child Welfare League.

STATEMENT OF THE COUNCIL FOR EXCEPTIONAL CHILDREN, UNITED CEREBRAL PALSY ASSOCIATION, NATIONAL ASSOCIATION OF STATE AGENCIES, NATIONAL ASSOCIATION OF COORDINATORS OF STATE PROGRAMS FOR THE MENTALLY RETARDED, AND NATIONAL ASSOCIATION OF CORPSOCRATIONS FOR HANDICAPPED CITIZENS

Mr. Chairman and Members of the Subcommittee: I am Fred Weintraub, Assistant Executive Director of the Council for Exceptional Children, INC., an agency which has been in existence since 1922. Other Agencies represented at this hearing are: the National Association for Retarded Citizens, the National School of Education, the American Speech and Hearing Association, the American Association of Retarded Children, the American Congress of Rehabilitation, the National Association of State Programs for the Mentally Retarded, and the National Association of Day Care Services for the Handicapped.

Our Program Organization of the United States Department of Health, Education, and Welfare and the National Association of Retarded Citizens, Inc. is specifically designed to correct the disabling environment.

While we understand the broad implications of H.R. 2666 for all children we will focus our remarks on its implications for handicapped children.

Persons concerned about handicapped children have long agreed as to the importance of early intervention. It is clear that the program for handicapped children. In 1967 the United Cerebral Palsy Association, Inc. noted:

"School entrance is not the beginning of a child's education. It is only a beginning of a only a formal training program to be initiated around the time of school entrance. Development of the more structured and complicated process of education is beyond the scope of our disability may deprive, or at least jeopardize the learning experience inherent in the environmental explorations of children without such disabilities. For some children, such deprivations may result in a permanent barrier to learning which then becomes a second disability."

At the Fifth Congress of the World Federation of the Deaf in 1967 in Warsaw, Poland, the American Association for Pre-School Services for the Deaf, Society for Crippled Children and Adults in Winnipeg, Canada stated:

"The guidance of hearing-impaired children begins, on a much broader scale than ever before, in infancy and the early months, and, because the sensory or 'nerve' deafness, the only avenue into the world so far is through skilled guidance in the home and nursery, it is essential that the preschool clinic and nursery school be started early in order to provide the necessary basic orientation to the environment in terms of training, variety and quality of experience, the better will be the total development of the individual and his command of his environment."

In a study by Robert Chamberlin and Philip Nader, published in the American Journal of Orthopsychiatry, the disfunctions of nursery school children were found to be "significantly related to later school function, and, clearly, "early intervention appeared warranted" to prevent these disfunctions from irreversible development.

What the evidence clearly shows is that while both sighted and blind children have common basic needs and developmental tasks to be satisfied. The difference between the blind and the sighted, however, lies in the manner in which each relates to and gains information about his surrounding and thereby orients himself.

The painful and seemingly basic orientation to the environment is the result of the terms of training, variety and quality of experience, the better will be the total development of the individual and his command of his environment.

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issue. At the federal level, The Handicapped Children's Early Education Assurance Act (HEA, Part C) has funded over 100 model programs in every state in the nation. This year HEA will provide direct services to 7,000 children, screening services to 15,000 children, and counseling to 14,000 parents. An additional 30,000 children will be served in Headstart under Statewide Centers.

Through what might be characterized as the parent of the legislation before us, Head- 
start's approximate 38,000 handicapped 
children receive some special services. It
should be noted that this opportunity came about because of the 10 percent enrolm ent
set-aside provision authorized by the Com- 
mittee.

We have cited these two major programs because of their positive impact and because they represent the commitment your 
committees have already expressed relative to early intervention for handicapped children. We are also pleased that there has been significant change in the picture of the states since we last testified. Forty-five of the states have now provided some form of legal commitment to extend education services to preschool handicapped children. Free
legal mechanisms are used (with some states using more than one mechanism):

1. Eighteen are eligible for services in the following states:

   From birth—Idaho, Maryland, Mississippi, New Hampshire, North Carolina, Vermont
   From age 3—Delaware, Illinois, Missouri, Massachusetts, Texas, Wisconsin
   From 4 years of age—Tennessee, Utah, Wyoming
   Under age 6 years—Montana

2. Preschool education must be provided to handicapped children if it is provided to other children in the public schools—Pennsylvania.

3. Preschool programs may be provided statewide in California, Oregon, West Virginia, Rhode Island, Indiana, New York

   At age 3 for specified disabilities—Colorado (physically handicapped), California (physically handicapped, mentally retarded), Ohio (deaf, blind), California (physically handicapped, mentally retarded), Connecticut (physically handicapped, mentally retarded)

   At age 4—Tennessee, Connecticut (except hearing handicapped), Delaware (except hearing handicapped), Oklahoma

   At age 4 for specific disabilities—Michigan (blind), Minnesota (deaf, blind, physically handicapped, speech defective), Nevada (academically tal- 
ented), New Hampshire (deaf), South Carolina (hearing impaired)

   At age 2—Oklahoma (hearing handicapped, visually handicapped), Virginia

   At birth—Virginia, Virginia, Washington, Wisconsin, South Dakota, Nebraska, New Jersey, Idaho, Iowa, North Carolina, Oregon

   For age 3—Colorado, Connecticut, Maryland

   At birth for specific disabilities—Colorado (physically handicapped, mentally retarded), Florida (deaf, blind, se- 
verely physically handicapped, trainable mentally retarded), Indiana (deaf, begining at age 3), New York (blind, deaf, speech impaired)


5. The remaining 5 states have no provi-
dion for handicapped children: Alabama, Arkansas, District of Co-

umbia, New Mexico, and Wyoming.

It is our belief that first, there exists a 
host of educational possibilities for young 
children; it is not in the interest of society to support the critical importance of early childhood educational services to the handicapped child, his family, and his 10 communities, and second, all levels of government

have taken some steps to develop programs in this underdeveloped area. The facilities are sparse and often overlooked many children in 

dire need.

Therefore, the basic concept of the Child
and Family Services Act is the next logical
step for the federal government to take to
assure that all children, particularly handi-
capped children, will receive the services
they so desperately need.

SPECIFIC COMMENTS ON THE LEGISLATION

There are particular features of H.R. 2666 which we would cite for special commendation. Among these were the provision for handicapped children and their parents. These features appear in Title I, Section 102 and
Section 103, where the potential and re-
quired uses of funds are laid out.

PREVENTION

Provision is made for programs of prenatal and other medical care to expectant and post-partum mothers to reduce both infant and maternal mortality as well as the Inci-
dence of mental retardation and other handicapping conditions. Such authority is needed because a substantial reduction of the overall incidence of handicapping con-
ditions in the American population and we most heartily endorse, as we have so often in the past, such parental authority.

EARLY DIAGNOSIS

As already cited in our testimony, identifi-
ation of a handicapping or potentially handicapping condition in a child at the earliest possible moment in the child's life can make a critical difference in the poten-
tials for outright alleviation or the highest possible level of amelioration. We are, there-
fore, most enthusiastic with respect to the
programmatic prescription of diagnosis, identification, and treatment of visual, hearing, speech defects, in addition to other physical, mental, psychological, and emotional barriers to "full participation in child service programs."

PROGRAM ADOPTION

Correspondingly, we are pleased that spe-
cial emphasis has been given to the creation of effective programs toward the earliest pos-
sible amelioration of handicapping or poten-
tially handicapping conditions once they have
been identified. Through such provision, the Congress will insure maintenance and, hope-
fully, most considerable expansion of that
program. Provision is made for programs of prenatal and maternal health services within regular projects.

PARENT INVOLVEMENT

What might be characterized as nothing short of total parent involvement is a major theme of the legislation before us, and spe-
cific provisions to achieve that objective are
laced throughout the bill. From our stand-
point, particular acknowledgement must be
given to those mandates of Subsection (c) of
Section 102 of Title I which:

(a) order regular dissemination of infor-
mation with respect to program activities to parents;

(b) order regular consultation with par-
ents relative to all aspects of the child's de-
velopment;

(c) order regular observation and participa-
tion by parents in their children's activity
within particular programs.

Parent involvement in every conceivable aspect of the life of a handicapped child is of course most desirable for all children; total parent involvement with handicapped chil-
dren is absolutely required. We strongly urge that without appropriate joint de-
velopment of the handicapped child and his
or her parents with all service delivery sys-
tems, the handicapped child will not produce a significantly handicapped family.

Parenthetically, one of the gratifying by-
products of the development of early child-
hood programs nationwide has been the early

introduction of the parents of handicapped children to the potential for expression of the potentials of their offspring, which enhances the prospects that they will be truly sophis-
ticated advocates in the fullest sense in re-
tention to that high standard beyond the home
when their children embark upon the tradi-
tional educational program.

TEN PERCENT SETASIDE

In prior testimony before the Congress with respect to an earlier version of this legis-
lation, we strongly urged that a certain por-
tion of funds under the Act be clearly ear-
marked for old-aged persons beyond the home

when their children embark upon the tradi-
tional educational program.

As both Subcommittees well know, handi-
capped children traditionally are too often
excluded if earmarks do not exist. That
is why earmarks are not new (ESEA Titles
I, II, III, Vocational Education Act, Head-
start).

We congratulate both Subcommittees for their commitment to a ten percent setaside for special activities involving handicapped children, such funds presumably to be util-
ized at the discretion of the Secretary of HEW.

We would like, at this point, to strongly
urge that these setaside funds be more pre-
cisely targeted to meet the overall objective of the legislation itself. We urge that these funds be targeted for use against the gen-
time, legitimate excess costs in providing de-
signated services to handicapped children
who are served under this Act, i.e., costs in-
curred in providing services beyond and in
addition to those costs for providing minimal standards of service for handicapped children
served under the aegis of this Act, handicapped

Such an excess cost target will assist in
achieving two objectives:

(a) assist in guaranteeing that handi-
capped children are in fact participating in pro-
grams authorized under this Act on a ratio which corresponds to their general in-
incidence within the population of all chil-
dren.

(b) provide those additional services needed to guarantee that handicapped chil-
dren, especially the more severely handi-
capped, will enjoy that full participation enjoyed by nonhandicapped children.

FULL ACCESS

Past history has taught us and has cer-
tainly taught this body of Congress that there will always be the potential that handicapped children will be discriminated against in programs not established for them alone—
and, we would hasten to add, with no malice
necessarily involved. Certainly our experi-
ence with Headstart is evidence of this.

Section 106 of H.R. 2666 lays out those as-
surances sought from the prime sponsors; correspondingly, Section 107 lays out those assurances sought from the actual project applicants. We would most strongly rec-
nomend that a required assurance be placed in both sections that full access to handi-
capped children will be granted, and every project funded under this legislation, at least commensurate with the demographic incidence for such children in the eligible target population, will always be served.

We would further recommend that those
vital assurances now sought from the states as essential guarantees for handicapped chil-
dren which are contained in the recently
extended to preschool handicapped children through their inclusion in this legislation. These are:

- Provision of special due process guarantees for the handicapped children served and their parents in all matters relevant to identification, evaluation, placement, and placement reviews.
- Provision that all handicapped children be served in the least restrictive environment; Provision against the classification of children to promote racial or cultural discrimination.

COORDINATION

Testimony of Judith S. Helms
Chairman Brademas, Chairman Mondale and Members of the Subcommittee—I am Judith S. Helms, Executive Director of the National Council of Organizations for Children and Youth, a coalition of over 200 national, state, and local organizations which have as their purpose the protection and the enhancement of the quality of life of our Nation's children.

I greatly appreciate your invitation to testify on the great need for comprehensive quality child care. At the outset, I would like to commend Senator Mondale and Congressman Brademas for their continued leadership over the years on the effort to increase the needed services for children and their families and for their leadership in convening these hearings.

I am here today, as Director of a broad coalition of organizations with a wide variety of interests, a wide variety of constituencies and a wide variety of approaches to the problems confronting our Nation's children. But, within this coalition, there is a broad agreement on the need for child care services. Many of our member organizations which have never taken an active interest in this issue, have become spokesmen for child care. Specifically, over 80 of our member organizations have joined an informal coalition to work together on the need for child care.

As the Executive Director of an umbrella group, I, of course, cannot always speak on a specific piece of legislation on behalf of all our member organizations. The Child and Family Services Act, which will be considered today, is the one piece of legislation which, in a broad sense, approaches to the problems confronting our Nation's children. But, within this coalition, there is a broad agreement on the need for child care services. Many of our member organizations which have never taken an active interest in this issue, have become spokesmen for child care. Specifically, over 80 of our member organizations have joined an informal coalition to work together on the need for child care.

As the Executive Director of NCOY, I cannot attempt to deal with these questions here. But, I do know that many of our member organizations have opinions and expertise on these issues and I urge you in the hearings which follow to call upon these organizations to testify so that we may reach a consensus and move forward with a program. As the address—and on which we can all agree—is the overwhelming unmet need.

America prides itself on being a child-loving society. In reality, we pay only lip service to this ideal. A simple examination of the status of children today painfully illustrates this fact.

America has the distinct honor of lagging behind 14 other countries in the rate of infant mortality. In a land of plenty, millions of children go to bed hungry each night. 29% of all children in our inner cities do not have bedding or a toothbrush.

One out of 9 youths will be in juvenile court by age 18. There are hundreds of thousands of handicapped children in America receiving no services.

Suicide is the second leading cause of death for young Americans between the ages of 15 and 24.

Teenage alcoholism and drug abuse are growing problems with working mothers continuing to increase.

And what leadership role has the Federal government taken to help alleviate this growing crisis? It is currently spending 14% of its total budget on children.

Children represent 40% of our population and only 10% out of every health service dollar.

The costs of neglect are enormous. For the children, neglect means limited opportunities to develop their mental and social abilities, to lead a happy and fruitful life. For society, neglect means expensive compensatory programs.

For years now, we have been going at these problems backwards. We intervene after the damage is done, at huge social and economic cost.

But, there is another answer. We know with a great deal of certainty that the first 5 years of life are a most important period for the intellectual, emotional, social, and physical development of a child. We used to think that 0-5 were years to mark time before children were ready to learn. We now know with a great deal of certainty that early intervention is crucial. And what is more, we have learned many very important things during this critical period, the child will be seriously handicapped in acquiring these skills. We also know that current trends in maternal nutrition and early intervention are crucial to the healthy development of young children.

In the future, we will intervene much earlier. I am sure that there is no magic when we know that it is easier and better to begin early.

To ignore these facts and to deprive millions of children of a healthy and stimulating early development is simply crazy if we care anything about our future generation.

What is quality child care?

1. Quality care for children under the age of 6 is an educational experience, one which broadens the child's horizons in the areas of physical, mental, emotional, and social development.

2. Quality care is a carefully planned and supervised program which provides a child with stimulation and guidance which is appropriate for the child's stage of development.

3. Quality care is a comprehensive service program that provides for the health, safety, and welfare of all children who are served.

4. Quality care is based on sound educational and child developmental principles.

5. Quality care is based on a comprehensive, individualized assessment of the health, developmental, and social needs of each child.

6. Quality care is based on a comprehensive, individualized assessment of the health, developmental, and social needs of each child.

The need for child care is greater today than it has ever been. Why? Much of the population of these countries have children who are being forced to leave their children behind for the support and employment. A day care crisis exists in this country for women who must work and have nowhere to place their children and women on public assistance who want to work but cannot find adequate child care.

The statistics clearly support the growing nature of the crisis.

From 1948 to 1973, there was an increase in the percentage of mothers working from 16% to 63%.

1 million children in this country have working mothers—4 million are under 6 years old. 12 million children live in female-headed households where the median income is $4,195 if the mother works and $3,700 if she doesn't.

In addition, during a time of rising unemployment and spiraling inflation, the percentage of employed women continues to grow. And for those women with working husbands, working mothers continues to increase. The simple reason is that as a family's real dollar shrinks and as husbands become unemployed, the wife is forced to work or even replace the income of their husbands.

All these facts point to the conclusion that in order to have a functioning society it is necessary to enter the work force.

And what about the statistics we don't have? Statistics on the number of children who need care but want to work, but cannot find child care?

And what about the disadvantaged child whose mother is home but who could benefit from child care services? In fact, there are five million children under 6 just in poor and near-poor families in this category.

Poor working poor, middle-class, and middle-class women all face the same problem. In increasing numbers, they must work. With only a small percentage of good, licensed care available, the rest are forced to face the never ending nightmare of making arrangements with a changing group of sitter or with relatives, or leaving their children in custodial parking lots—or worse.

Some parents are fortunate and their child is not a handicapped child. But, there are some handicapped children left completely alone. This situation no matter how small a percentage of the total picture, simply should not exist in this country.

In some families, parents work different shifts and the parent home sleeping cares for the children.

In some cases, women bring their children to work because no arrangements can be found. A recent Women's Bureau Study indicated that as high as 16% of children under 6 went to work with their mothers.

In some families, siblings are kept home to care for younger family members. In some families, children are left home alone. We don't know how many of these children exist, but conservatve estimates of the number of very young children left completely alone. This situation no matter how small a percentage of the total picture, simply should not exist in this country.

Other families find group arrangements through day care homes and centers. But these, as the statistics indicate, are the better. Only a small percentage of group day care homes are licensed. Many are overcrowded and under-staffed. Many percentage of children have access to center care. Here again, the quality ranges from excellent to injurious—and in this, all the differences which have been warehousing of children.

At this point, some would argue that all this information on poor quality care only proves that day care is bad for children and that the federal government is wise to not involve itself.
Nothing could be further from the truth. Women will go on working regardless of what actually happens, in the face of any lack of access to quality child care will not eliminate the economic necessity of supporting themselves and their families. We need quality child care to those who need it will simply force families to settle for custodial care. And, it will be the children who suffer as a consequence of inadequate, and at times inappropriate child care. Those of us who require full or part-time care outside of their homes because their mothers must work.

President Ford has announced that he will veto any new social programs this year, arming that the country cannot afford it. In addition, he proposes seriously cutting back on the federal government's commitment to health, education, nutrition, and a whole host of service and programs which benefit children.

What is it that this country cannot afford? Is it true that we cannot afford to provide health care to pregnant women and children who do not have access to this care?

Is it true that we simply cannot afford social services to disadvantaged and handicapped children to give them a chance in life?

Is it true that we simply cannot afford to assure that no American child goes to bed hungry at night?

These "can't afford" add up to an incredibly costly legacy to our society—a legacy of poor health, costly services, institutionalization, crime, and social alienation.

And what about the cost to a child in lost opportunity to grow up healthy and whole? Who can measure that cost?

Now, in a time of economic recession, children and child care services are needed more than ever. The family's available income continues to decrease and families are finding it more and more difficult to pay for basic necessities, much less the "luxury" of things such as preventive health care. Families need assistance now more than ever.

And let me say too, that all of us who care about children oppose the use of custodial rather than educational care for the children in a time of economic emergency as an expedient to move parents into the job market. This economic solution does little toward solving the problem and indeed will be more costly in the long run.

In fact, as an example of the broad interest in the highest quality child care, I am attaching the copy of the document from the House of Representatives, Facility Licensing Act, drafted and endorsed by 35 member organizations of NCCY.

In closing, I would respond to President Ford's statement that we cannot afford new social programs. I say that we cannot sacrifice our children for the sake of cutting government budget costs. I say quite emphatically that we cannot afford not to provide child care services for our nation's most valuable resource—our children.

Statement of Frederick C. Green, M.D., F.A.A.P.

Mr. Chairman and Members of the House Subcommittee on Health, Education, and Welfare and the Senate Subcommittee on Children and Youth, I am pleased to have this opportunity to testify in support of S. 626 and H.R. 2968—Child and Family Act.

As an active participant and workshop leader in Forum 10 of the White House Conference on Children, I have been privileged to have been selected from the number one Overriding Concern; namely, the need for "Comprehensive family oriented child development programs including preschool, day care and early childhood education."

As the Associate Chief of the Children's Bureau, OEO, HEW, from 1971-1973, my education over your passage of S. 2067—the Economic Opportunity Amendments of 1971 was the unqualified and unequivocal veto message by former President Nixon.

Now, as a pediatric practitioner and educator, I feel an obligation to speak to the needs of our 25 million citizens under the age of 6 years and specifically to the needs of preschool children. The need for quality full or part-time care outside of their homes because of the their care who must work.

The Bill Ford has introduced allows for the use of custodial care. The child's best interest is the key word rather than programs that essentially displace the parent.

I believe this bill to be consonant with a principal declaring that, in the best interests of the child, the child's need to not interfere when the child's well-being is jeopardized by parental failure, then surely society has an obligation to support and welfare in these programs.

I submit, therefore, that such programs are consistent with the highest quality child care, Child Development and Child Welfare are legislative and agency programs which can only be appropriately placed on programs that may be critical determinants in enhancing the developmental potential of our children.

We have seen few if any of the 16 overriding Concerns and 25 specific recommendations of the 1970 W.H.C.C. implemented. We have seen Title V, Maternal and Child Health Projects (C&Y and M&I) that have proven their effectiveness in reducing fetal wastage and infant morbidity. It truly does have a right economy notwithstanding, those of us working in the fields of Maternal and Child Health, Child Development and Child Welfare are legislators who could not be more seriously dismayed by the apparent low priority placed on programs that may be critical determinants in enhancing the developmental potential of our children.

I say that under certain well-defined circumstances, a state formula grant fund (e.g., Title XIX) that may be generated by the program could be used for the non-federal match, as was the case with Head Start funds.

There is another aspect to the site selection for such programs that must be considered. I would say that Demonstration Funds are dictated by grantsmanship expertise rather than by the areas of greatest need. This is best exemplified by the Ford Administration. The M&I Projects are located outside of areas having the highest infant mortality. If grantsmanship sophistication is to be a determinant, then community groups should have available to them a well identified technical assistance resource.

Role of the Public and Parochial School

It is my considered opinion that the Federal law should not mandate that preschool programs be part of the school system; however, neither should they be denied the opportunity to participate. With all due respect to the competence and dedication of our elementary and secondary school teachers, I personally do not believe that the school setting is always the most appropriate site. Different skills are required in dealing with the preschool child because different objectives should be operable.

Now, in the school system, primary emphasis is appropriately placed on enhancing cognitive development; however, in the preschool programs it seems reasonable that the major emphasis should be placed on enhancing the child's motivational and experiential components of intelligence. I submit, therefore, that such programs should functionally operate outside the school setting in neighborhood churches and community centers.

I feel that the appropriate role of the school as it relates to these programs is to enhance their own capacity to assure a continuous enriching of experiences when the child leaves the preschool setting.

Integration of Programs

All costs, preschool programs—as defined in this act—should be socially, ethnically and ecologically programmed maximum benefit and total developmental progress of the child and certainly to lay the cornerstone of a far better society than the one in which we now live.

In summary, I sincerely hope that you will collectively use the powers of your offices to see that this bill, with any reasonable modifications, become law.
NATIONAL NUTRITION WEEK

Mr. McGovern. Mr. President, March 2 through 8, 1975, marks the third year of observance of National Nutrition Week, which is identified as the first full week in March to focus attention and action on sound nutrition information and practices and its importance all year long.

Initiated by the American Dietetic Association, and its State and local affiliates, National Nutrition Week is endorsed by the National Nutrition Consortium, with participation by State extension and public health agencies, local nutrition councils, and interested groups, to improve the nutrition of human beings, to advance the science of dietetics and nutrition, and to promote education of the general public and professionals in these and allied areas.

As chairman of the Select Committee on Nutrition and Human Needs, I am acutely aware of the growing concern in America with nutrition related issues. National Nutrition Week provides a valuable focus for this concern, and I look forward to joining with millions of others in the continuing nutrition dialog.

DELAY ON RESCISSION BILL THREATENS LOSS OF SAVINGS

Mr. Proxmire. Mr. President, as of last Friday, February 28, the 45-day period for congressional action on the President's rescission bills expired. The practical effect of these rescissions is that the Senate is the automatic obligation of $949 million in various Federal programs.

The following statement represents the views of my good friends and colleagues the Senator from Iowa (Mr. Culver) and the Senator from Colorado (Mr. Gary Hart) as well as my own:

By refusing to act on the President's request for rescission authority, the Senate has missed an opportunity—to meet the President half-way and cut down on wasteful federal spending.

The rescission request by the President contains a number of controversial items. It is not likely that support for each rescission could be maintained nor is it prudent to expect a majority—meet the President half-way and cut down on wasteful federal spending.

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Of particular interest to us was the rescission of three military procurement programs totaling $153.2 million. They are the purchase of 48 UH-1B helicopters, 24 A-7D's, and 12 F-111F's. These three programs have one common feature—namely that the President and the Secretary of Defense did not request funding for them in the fiscal year 1975 budget. They were placed in the budget by Congressional action. The helicopters were added on the floor of the Senate. The F-111's were added in Conference. The A-7D's were placed in the bill by both Houses though not contained in the annual Defense Appropriations. The President and the Secretary of Defense have stated that these items were not requested, "not included in the President's 1975 budget and were not considered in light of present and projected aircraft inventories." They are not essential for national defense.

We deeply regret the lack of action on the budget rescission bill by the Senate. Default is inexcusable. These savings can be made within the framework of a national defense. The President and the Secretary of Defense have clearly certified this fact.

We are prepared to offer an amendment canceling these unneeded aircraft to an upcoming bill. But we hope a full rescissions bill will be passed quickly before the released funds are obligated. The time for action is now.

SUMMER YOUTH JOBS

Mr. Humphrey. Mr. President, while America faces its deepest recession with extremely high unemployment rates, by this summer there will be over 3.1 million poor youths in the Nation looking for jobs. Present trends indicate the possibility of an unemployment rate of 20 percent or more among disadvantaged youth during June to September. This crisis situation demands that urgent preventive action be taken by Congress.

With a total Federal funding requirement of some $650 million, as the absolute minimum that can and must be achieved. I urge my colleagues in the Senate to give immediate attention to this serious need and to support a supplemental appropriations request when it comes before the Senate.

ADOPTION AND FOSTER CARE

Mr. Mondale. Mr. President, as chairman of the Subcommittee on Children and Youth, I wish to announce our plans for hearings on adoption and foster care.

Right now, more than 300,000 children in this country are in foster care—living with families or in institutions with no guarantee that they will ever have a stable, permanent home before they grow up. At the same time, many thousands of American families are eager and qualified to adopt youngsters who need a home. Experts believe that many youngsters could be placed in homes if more are handicapped or older than children who are traditionally adopted—could be placed with a family if the necessary guidance, support, and encouragement were provided.

For nearly a year the Subcommittee on Children and Youth has been looking into the broad questions of Federal policy relating to adoption and foster care in this country. Our study was prompted by the introduction in the last session of Congress of the "Opportunities for Adoption Act," by Senator Cranston, which was referred to our subcommittee. We have been impressed with the complexity of the issues relating to adoption and foster care and with the immense impact that they have on the lives of thousands of American children.

The subcommittee will soon be releasing a consultant's report entitled "Foster Care and Adoption: Some Key Policy Issues." A 6-month investigation by Paul Mott, who has been serving as a consultant to our subcommittee. It outlines recent trends in this area, including the reduction in the number of foster homes and infants available for adoption and the need for successful attempts to place handicapped and older children in adoptive homes. It also analyzes the Federal laws which affect children in adoption and foster care and proposes some possible solutions to current problems. The subcommittee intends to circulate this report widely and hopes that persons interested in and concerned about these matters will read the report and make their views on it available to us.

As I announced publicly last fall, we hope to be able to start hearings on these subjects later this spring. Among the issues we hope to examine in the hearings are: Whether existing Federal policy on adoption and foster care serves the best interests of children and families and if not, how the laws should be changed; the problem of independent adoption—including black market activity associated with children sold illegally; and effectiveness of current practices relating to adoption of children from other countries.

FOOD AID AND AGRICULTURAL POLICIES

Mr. Humphrey. Mr. President, I wish to point out our support of an amendment before the National Association of Wheat Growers by Mr. Herbert J. Waters, who is president of the American Freedom From Hunger Foundation. Mr. Waters offered some thoughtful comments on this legislation in this speech entitled, "Don't Kill the Goose."

The food issue is one which should concern us all. I agree with Mr. Waters'