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Cooperative Child Care for Rural Residents: The Experience from California*

by

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Abstract

Over the past third of a century, Western welfare states have made policy shifts toward decentralization and privatization, and expected the private non-profit sector to take a larger role in addressing social welfare needs. In the US, welfare policies that focus on employment for the parents of young children, the large number of parents in the workforce, and inadequate child care services in rural communities combine to make the case for innovative child care strategies particularly compelling. This article reports the findings of a project that explored the feasibility of using cooperative models of child care to address the needs of rural communities in California. The project examined relevant literature and identified existing federal and state programs involved with child care for low-income families, as well as relevant funding sources for cooperative development. Interviews were conducted with those involved in low-income housing, early childhood development, welfare-to-work programs, and economic development in rural communities. Interviews also helped identify rural affordable housing developments and rural communities for specific feasibility studies. The findings of the project demonstrate compelling reasons that cooperative models of child care, especially the parent model, can offer effective strategies for expanding needed child care in rural communities.

Introduction

Over the past third of a century, Western welfare states have made policy shifts toward decentralization and privatization, which incorporate the expectation that the private non-profit sector will take a larger role in addressing social needs (Rodger, 2000) such as child care for low-income working families. Subsequently, service-

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based cooperatives have been noted as curative structures that offer a personalized, de-institutionalized approach to addressing important social issues (Levi, 1998).

For example, of the various ways to address the social welfare needs of families with young children, the experience in Sweden offers a thoughtful option: “Cooperatives have rapidly become one of the most important alternatives to the public provision of social services in the current transformation of the welfare state and privatization of the public sector in Sweden” (Pestoff, 1995:153). Nearly two-thirds of Swedish private non-profit child care centers are cooperatives (*ibid.*:155). In California, preschool and child care cooperatives emerged in 1927 and today there are more than 300 cooperatives that serve about 9,000 families (Coontz *et al.*, 1999).

This study began as a problem-solving applied research project to evaluate whether a cooperative might be a feasible model for meeting the child care needs of rural parents. The project was funded primarily by a grant from the United States Department of Agriculture, Rural Development, and the data presented in this article is current to August 2003. Cooperative development (and evaluation of the process) that emerged from this project is expected to continue through September 2004.

Child care for working parents in rural communities is particularly problematic. At the same time, financial incentives offered through a variety of federal and state programs to encourage the provision of child care services in rural areas are ineffective. While the project focused on the feasibility of developing cooperative child care that is located in a building within or within close proximity to rural affordable housing developments, rural communities that lack such housing developments were also included in the study.

The project identified opportunities and impediments to the development of cooperative child care in rural areas. Relevant literature was examined; existing US federal and state programs involved with child care for low-income groups, as well as relevant funding sources, were identified and analyzed. A total of 113 interviews were conducted with people knowledgeable about low-income housing, early childhood development, welfare-to-work programs, and economic development in rural communities. Interviews also helped identify rural community housing sites to include in the site-specific feasibility studies.

The fourteen rural sites selected for intensive, directed study met the following criteria: 1) they were in communities with acute child care needs; 2) housing developers and/or community leaders demonstrated an interest and willingness to assist with cooperative development; 3) the location or real estate environment was conducive to cooperative development. Sites selected were all rural but varied in population size, location, and accessibility.

Site-specific cooperative child care feasibility studies focused primarily on the compatibility of cooperative models of child care with the needs and interests of parents, affordable non-profit housing developers, and community leaders. Visits to the sites helped to assess potential construction needs and costs, and to clarify existing, site-specific services. Community child care resource and referral agencies and community development organizations provided information about regional and local

child care needs and existing services. Resident surveys (from selected low-income housing developments), community surveys (distributed and returned in utility bills), focus groups, and community meetings were used to discern community needs and interests. In total, 294 surveys were analyzed, 12 focus groups were led, and 9 meetings with parents were conducted.

US social welfare programs for families with young children

In the US, social welfare policy shifts are particularly apparent in addressing the needs of impoverished families with young children. When the federal social assistance program, *Aid to Families with Dependent Children* (AFDC), was abolished in 1997, a gradual transition began for its replacement, *Temporary Assistance to Needy Families* (TANF). Little attention was paid to the significant ideological assumptions involved in the shift from one program to the next. AFDC was founded on the ideology that young children are best cared for at home by a parent, while TANF is fueled by the assumption that it is more important for parents with young children to be in the workforce.

The entrance into the workplace of larger numbers of poor, often single parent, mothers has contributed to a similar trend among mothers of other income groups. By 2000, 73.5 percent of all American mothers were working outside the home. The growth in the numbers of employed mothers has been significant among those with preschool-aged children, particularly among women with infants. By 2000, just over 55 percent of mothers with infants under 1 year were in the labor force, nearly double the 1976 level (the year these statistics were first included in census records) (US Census, 2000).

With the increase in the number of employed mothers comes an increasing need for child care. The US approach to addressing this issue has been conflicted. There are no universal child care or child education programs for children under the age of 5 years. While tax incentives subsidize a small portion of the child care expenses for moderate, middle, and upper income families, an array of federal, state, and regional programs are designed for qualified low-income families. The most well known of these programs is the long-standing anti-poverty federal program, *Head Start*.

Head Start is a federally funded program designed to help eradicate poverty by providing preschool education and a range of health and supportive services to eligible families. The program has a documented history of offering quality programs that make measurable differences in the lives of children and their families (Zigler and Muenchow, 1992; Zigler and Styfco, 1993). Because Head Start is under-funded it cannot serve all children who qualify, so it admits only the most needy children. Head Start, like a range of similar federal, state, and local public programs, is often available on a means-tested basis that is “triaged” out to the most needy eligible families.

Programs at various levels of government that are established to assist low-income families with the cost of child care are under-funded. The most expansive federal subsidy program for child care is a voucher program that eligible families can use to pay for licensed or eligible unlicensed child care. Still, only 15 percent of eligible families are able to obtain this subsidy. Long waiting lists of qualified families are common in most states (Giannarelli and Barsimantov, 2000). An American welfare dilemma rests on the reality that there is a tremendous gap in the policy implications of TANF and the child care subsidies available to make work for parents a reality.

Regulations that maintain quality standards for child care vary widely in the US. While public subsidies sometimes require specified quality standards, they are often defined in terms of whether or not care is “licensed.” Child care licensing standards are usually defined by state laws, however some states relegate minimum standards to regional, or local governments. High costs, quality, shortage of services, proximity to work and home, hours that accommodate work schedules, and compatibility with cultural and parental values are among the issues that make child care an ongoing concern for working families. Each of these issues is exacerbated for rural residents, and intensified for low-income rural residents.

Characteristics of child care in rural areas

Rural communities face unique child care challenges that are magnified for low-income families. Population patterns, shortages of licensed child care, the special employment characteristics of parents, transportation problems, and limited education and training of both caregivers and parents combine to restrict the child care options available to rural families.

Many child care problems stem from population patterns inherent to rural communities. Because the population is small and dispersed, there are fewer child care providers (Colker and Dewees, 2000). Center-based care is less prevalent in rural communities because the scattered population makes the care less practical and transportation problems affect parents’ ability to get to and from child care centers.

Labor market and employment considerations intensify child care problems in rural communities. Rural parents often travel farther to jobs, which means they need child care for longer hours. Some evidence suggests that rural parents are more likely than urban ones to work non-traditional hours, which narrows the child care available to them (*ibid*). In rural resort areas, seasonal fluctuations in employment cause the supply and demand for child care to fluctuate, making it difficult for child care providers to sustain a stable business (Bailey and Warford, 1995).

Rural child care providers tend to be unlicensed, home-based, less educated, and less trained than their metropolitan counterparts (*ibid*). Interviews conducted with community child care resource and referral agencies and regional data on licensed

facilities revealed that many of the communities involved in this study had a severe shortage of licensed child care of any type. Interview participants from many of the most rural communities lamented that shortages of licensed child care made unlicensed care the only option for many families.

According to Colker and Dewees (2000), when the child care needs of rural parents are met, it is primarily by informal care arrangements with kith (friends and neighbors) and kin (family and other relatives). Low-income families are less likely to put their children in a child care center because there are not very many of them, they are costly, and they are often far away from parents' jobs or homes. Rural parents are often poorly informed about how to look for quality child care programs. This is reflected in part by the finding that many rural parents still perceive child care as babysitting and are relatively unfamiliar with professional identities and practices (Beach, 1997). Some families may be reluctant to use center-based care because of cultural or personal preferences (*ibid.*). In some areas, Head Start may be the only viable center-based child care option for rural families who qualify.

Characteristics of child care centers, family day care homes, and informal care arrangements

Over the past quarter of a century, researchers involved in child development and related fields have amassed an immense amount of research and documentation on creating a safe, quality environment for the care of children of working parents. In addition to physical safety, some of the most important characteristics of quality include adult to child ratios, overall group size, and caregiver characteristics – including education, training, experience in early child development, and low staff turnover (Phillips, 1987; Helburn and Howes, 1996). Many of these quality characteristics are reflected in state and regional licensing requirements.

In California, child care centers and family day care homes are legally required to be licensed by the Community Care Licensing Division of the Department of Social Services. Regional offices oversee licensing and monitor standards in their communities. Licensing criteria sets minimum requirements for aspects related to the grounds and facility, safety and most of the quality characteristics mentioned in the previous paragraph.

Licensing requirements are more sweeping, and in most respects more stringent, for child care centers than they are for family day care homes. Capacity and ratio requirements vary by the child's age. Regulations establish minimum standards pertaining to the facility and grounds, safety procedures, child capacity; and stipulate education and experience requirements for program directors (the managers), teachers, assistants, and volunteers. California regulations also require criminal record clearances for employees and volunteers who have routine contact with children while they are in the child care center (Community Care Licensing Division, 1998).

Family day care regulations usually include a cap on the number of children served, regardless of the size of the provider's home. Besides fundamental fire, emergency, and prevention safeguards, family day care homes have very minimal regulations governing the physical characteristics of the home and grounds. Child care providers, all adults who reside in the home, and those who have routine contact with the children in care must have a criminal record clearance (Community Care Licensing Division, 2000).

In the state of California many informal child care arrangements are exempt from licensure as long as certain conditions are met. Cooperative arrangements between parents that don't involve monetary payments, and care involving the children of one other family are exempt from regulations (Community Care Licensing Division, 1998).

Patterns of care and the relative advantages and drawbacks to center, family, and exempt care are topics of ongoing study and discussion in child care literature.

For reasons previously discussed, rural families, and low-income families in particular, are more likely to utilize family day care homes or informal arrangements than to use center-based child care. Both of these forms of care tend to be more affordable, their location is usually more convenient, and they may be better able to satisfy parents' specific cultural or child-rearing objectives (Stokley and Lessard, 1995). The primary disadvantage with both family day care homes and informal, exempt arrangements is the uncertain quality of the care because it is difficult to monitor.

The advantages of expanding family day care homes is a topic of discussion in child care literature that is focused on rural and low-income communities. When weighing the shortages of care options, and the relatively high cost of center-based care, some of the literature advocates for the expansion of family day care. Family day care creates jobs that allow parents of young children to contribute to family income while remaining at home to care for their own young children (*ibid.*). This form of care can also engender community connections that benefit both children and parents (Beach, 1997; see also Harris-Usner, 1995).

Notably absent in most professional discussions of modes of child care like those previously mentioned is consideration of cooperative models of child care. In fact, parent cooperative child care centers create each advantage mentioned in the literature except that of creating jobs that allow a parent to stay home with their own children. Parent cooperatives also have advantages over family day care homes. Because they are licensed child care centers, the quality of care is more certain. Additionally, survey data from California has documented that parent cooperatives provide stable care with quality indicators that exceed licensing standards (Coontz, 1992a and Coontz, 1992b).

An overview of cooperative models of child care

Cooperative models of child care expand the options for quality, affordable, child care available to families. All cooperative models are non-profit, democratic, member-controlled programs for children. The primary differences among cooperative models revolve around the member/owners. While members and the board majority focus on a core group, many of the models incorporate elements of *multi-stakeholder* cooperatives because the interests of more than one interest group are represented on the board (Pestoff, 1995).

Because non-profit child care centers can qualify for tax exempt status, most cooperative models of child care use corporate non-profit statutes that do not permit the sale or distribution of shares. A child care center using these statutes cannot sell the business or accrue profit. If the center closes, any assets must be allocated to another tax-exempt non-profit. Although ownership of shares is prohibited for cooperatives using these corporate statutes, members still control the cooperative through democratic decision-making (one vote per member) including making financial decisions, establishing policies (including program fees and participation requirements), and creating a program that meets their service needs.

Parent Cooperatives, often referred to as preschool or child care cooperatives, are the most common form of cooperative program for children. Each family represents one membership and a vote. Members elect a board of directors, which often includes one or two community representatives (and occasionally a staff member), governs the cooperative, makes policy decisions, and hires a program director (manager). The program director is an expert in early childhood education who makes other personnel decisions and runs the day-to-day operation of the center. Parent-members gain an affordable, family-focused program that stresses their input and involvement.

A *Child Care Worker Cooperative* is controlled principally by the director (manager), teachers, and sometimes classroom aides. Each member has one vote. A board of directors that is primarily child care workers but often includes community members, business representatives, and sometimes one or more parents, governs the cooperative. Worker-members may hire non-member employees. By combining their energy, capital, and skills, worker-members gain steady employment and income, participate in decisions that affect their workplace, and share the business profits (surpluses) made from their investment and labor. The share structure and patronage systems used by child care worker cooperatives vary and are too complex to describe in this article.

Employers, non-profit organizations, public agencies, or other entities constitute the cooperative membership of a *Child Care Consortium*. Members jointly share the costs, risks and benefits of a child care program for their employees or clients. The governing board represents the members and oversees the child care program in the same way the board of a parent cooperative does. Shares are usually not allocated in the consortium.

In a *Family Day Care Home Cooperative*, each family home remains a separate business, but providers decide on key elements that member-homes share in common for marketing purposes, such as accreditation, experience, special training, or reliable service. The cooperative is used for marketing, to improve purchasing power through bulk buying, ongoing education and exchange of ideas, and sharing business support services such as back-up care when the provider is ill or goes on vacation. Because the cooperative is not directly providing the care, it will probably not qualify for tax-exempt status and can distribute shares in a manner consistent with other cooperative businesses.

A *Babysitting Cooperative* consists of parent-members who exchange babysitting services with one another. Each family constitutes one membership, and shares are not usually allocated. Parent control assures that the cooperative reflects their ideals, needs, and values. Instead of paying for services, a system of points or coupons tracks parents' use and provision of services. When a member cares for a child, they accrue points or coupons that they can "spend" when their child needs care. Babysitting cooperatives are very useful for occasional child care needs but can be problematic when used as the sole type of child care for working parents.

The case for parent cooperatives in rural communities

Establishing a child care facility in a central rural site, or in or near an affordable housing development, provides needed care for working families in areas that are often difficult to serve (Stokley and Lessard, 1995) and addresses one of the significant obstacles to child care in rural areas: transportation.

In this study, site visits, results of parent surveys and focus groups, meetings and interviews with child care resource and referral officials and housing developers all showed a marked preference for the *Parent Cooperative* model. The most appealing aspect of this model for all groups was parent involvement. Parent involvement assured that the child care program reflected parent needs and desires for their children and created desirable family-to-family interaction and linkages.

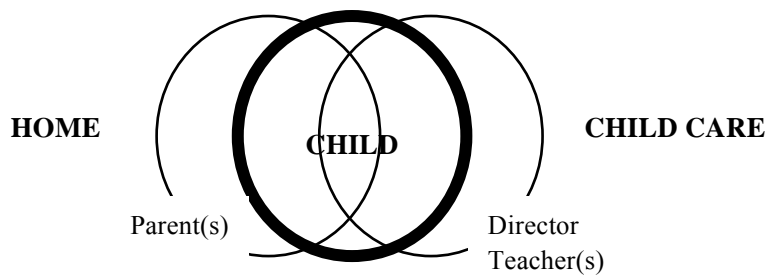
Interestingly, their preference is supported by decades of independent research documenting the positive child outcomes from parent involvement – including elevated school achievement, increased child IQ scores, and reduced chances of problems with adolescent delinquency, pregnancy, and drugs (Bronfenbrenner, 1979; Powell, 1989; Kagan *et al.*, 1987; Rim-Kaufman and Pianta, 1999; Zigler and Muenchow, 1992).

No other type of out-of-home child care arrangement involves parents to the extent found in the cooperative. Parent involvement is inherent to the parent cooperative. As cooperative members, all parents are involved with making key policy decisions that affect their child's out-of-home child care experiences. Parent participation and fundraising activities cut overhead costs and bring in sources of

revenue. Even employed parents with schedules that don't allow work-day participation are involved with voting, participating in fund-raising and parent meetings, and contributing support to the program.

Dialogue between the parent and early childhood educator that focuses on the child is encouraged by parent involvement in the cooperative. The ongoing, simultaneous interaction of parent, child, and early childhood educator ("teacher") has something to offer each member of the triad. The parent is exposed to knowledge about how children develop, problem prevention and discipline strategies, and age appropriate behavior expectations that encourage more effective parenting. The parent has the opportunity to see how these principles and strategies are implemented by observing the teacher. The arrangement allows parents to ask questions and to "try out" new strategies in a supportive environment. The teacher benefits in the cooperative because he/she is able to implement practical elements of training and develop "hands on" approaches to sharing this knowledge and experience. The teacher is also able to more fully know the child and his or her individual needs by sharing information with the parent. As displayed in Figure 1, the child is at the center of the triad and benefits from the supportive linkages of home and preschool as he or she shares important life experiences with his/her parent (Coontz, 1992b).

Figure 1: Parent involvement benefits the child by increasing the continuity of care between home and child care



The interaction among parent, teacher, and child promotes parent empowerment (Dunlap, 2000), strengthens social capital and creates new community networks built on trust. Parents develop knowledge and skills that help them be better parents. Experiences in democratic decision-making and involvement in making meaningful decisions contributes to developing practical skills that help them be better community citizens. Parents come to see themselves as partners in their child's education experience and become advocates for their children as they enter public school. Leadership experience, reviewing financial statements, organizing events and interacting with others can also translate into marketable skills.

Parents in child care cooperatives are actively involved in establishing participation requirements. The hours devoted to working in the program are established by parents. Parents who are unable to directly participate in the classroom perform administrative and service roles. The active participation of parents supports the formation of family friendships and networking. It fosters continuity between a child's home and preschool experiences. Parent cooperatives provide sympathetic, responsive support systems for parents and their children.

Parent cooperatives address rural needs for quality child care and meet the four characteristics of a community development strategy developed by Wilkinson and Quarter (1996). First, they are owned and controlled by a rural community of families who share a common interest. Second, they improve neighborhoods and communities by offering services that potentially benefit generations of families and impact children and parents in ways that transcend the cooperative. Third, they reflect and promote community cultures and values. Finally, by hiring people to staff the cooperative and by enabling the labor force participation of parents, the cooperative contributes to the self-reliance of the community (Levi, 1998).

As a result of empowerment (Dunlap, 2000) and community development (Levi, 1998), child care cooperatives promote what Stryjan and Wijkström define as "genuine job creation" for marginalized groups. This is significant because it facilitates independent job creation. This results in "effecting empowerment, rather than substituting present dependence on the welfare system with new forms of dependence" (Stryjan and Wijkström, 2001:235).

Challenges to the development of parent cooperatives in rural communities

This study identified many encouraging positive reasons that child care cooperatives can meet the needs of rural working families. It also identified several challenges to cooperative development. The primary challenges identified involve financial impediments and perceptions (including misperceptions) that make some key community stakeholders reluctant to embrace cooperative development.

Financial

Access to start-up capital and initial operating funds is a significant hurdle to the development of a child care cooperative. The financial feasibility of a child care cooperative depends on securing financing for real estate, facility, and related costs, as well as generating sufficient revenue to support initial operating costs and debt service payments. Given the income level of cooperative members, and elements intrinsic to this type of service cooperative, it is extremely unlikely that sufficient funds can be acquired through members.

This study identified a number of potential private and public grant and loan fund-

ing sources for development and start-up costs (Esper and Coontz, 2003). Still, the application process can add a year or more to cooperative development. Additionally the perception of cooperatives as “experimental” can hinder funding potentials.

Once a cooperative is established, it is expected to be self supporting. Parent participation and fundraising activities reduce the overall costs of providing care, and subsidy vouchers for qualifying families can be used to pay for child care at the cooperative because it is a licensed facility.

Perceptions and misperceptions

Interviews with housing developers revealed a myriad of reasons why they are hesitant to embrace on-site child care. The explanations shared in interviews revealed thoughtful, reasoned decisions, as well as misperceptions.

Probably the most cited reasons housing developers gave for their reluctance to embrace site-based child care services were their previous experiences. Many of the housing developers interviewed had past or present Head Start programs located in an on-site building. The most common complaint was that the Head Start programs were serving fewer and fewer of the children from the housing development. The “triage” allocation of Head Start services displaced residents because they were replaced with more impoverished non-resident families. Non-profit housing developers were frustrated that valuable community space was being used by a program that served as many, or in some cases more, children from outside the housing development as it did residents.

A related concern expressed by housing developers is space allocation. While a child care program is in session, California licensing requirements prohibit the comingling of adults and children in child care with those who are not enrolled. The large outdoor space and fencing requirements also restrict the use of outside play yards by children not enrolled in the center. This reduces the recreation and community space for meetings and other activities during the hours that the child care center is in session.

Misunderstandings about site-based child care included incorrect beliefs about licensing requirements, housing regulations, and funding restrictions. For example some developers thought that some of the primary public funding sources for affordable housing didn’t permit child care at their housing sites (in fact the same funders reported to us programs that encourage the provision of child care). Some developers thought that funding and size restrictions prevented the development of child care centers. About a third of the developers interviewed also believed that the comingling licensing restrictions included time when the center is not in session.

Stokley (1997) suggests that integrating child care facilities into the overall land use planning and housing development process can create a multitude of financial and practical advantages for the expansion of needed child care. Indeed, affordable housing sites can benefit from planning for child care in new construction (Roberts and Sussman, 2000). The center can be located in a vicinity of a development that

allows for easier access for off-site families, while being conveniently located for residents. Locating the center near the outside, rather than in the center, of the housing development can address the problems involved with co-mingling of adults and children not involved with a licensed child care center.

For the purposes of this feasibility study, the receptiveness of the housing developer to the idea of an on or near-site child care cooperative was an important factor in site selection and in the feasibility assessment. A condition for initiating a site-specific feasibility study was that the housing developer was receptive, even welcoming, to the development of a cooperative child care center.

A perception expressed in various ways by housing developers, community leaders, and others in professional and leadership positions involves the idea that low-income parents lack the skills necessary to be cooperative members or cooperative board members. Their concerns centered around their perceptions that low-income parents have low levels of education, inexperience with decision-making, and in some cases, limited English language skills.

While the idea that low-income parents lack skills crucial to cooperative leadership could be the topic of an entire paper, it is important to recognize that this perception is an obstacle to cooperative development. To be sure, most of the parent cooperatives in California involve middle class parents of varying education levels. Since this project combined applied research with cooperative development, concerns on this topic were responded to in the following ways:

- A list of cooperatives within the geographic vicinity was provided and key community leaders were encouraged to visit cooperatives or interview their representatives over the telephone;
- A video of parent cooperatives was shown which included one example of a cooperative consisting primarily of low-income Latin women;
- Articles about cooperatives with memberships of primarily low-income families were shared, along with contact information;
- The cooperatives proposed for development could be of mixed income groups so that a variety of experiences could be brought to cooperative leadership;
- Although the board of the parent cooperative would be primarily parents, other stakeholders could hold positions – for example a representative from the housing development (if applicable), community groups, a professional in a field related to child development, and a staff representative.

Conclusions

Innovative strategies need to be utilized to address the complex issues involved with developing child care programs that meet the needs of rural families. Welfare policies that focus on employment for the parents of young children, the increasing need for child care prompted by the large number of employed mothers, combined with

the likelihood that subsidies for care will probably be inadequate, make the case for innovative service strategies compelling (Community Care Licensing Division, 1999; Shields and Behrman, 2002). The wide variety of cooperative models that can be used to address rural child care needs represent this kind of needed innovation.

This study found the most support for the parent cooperative model. While this guided the feasibility analyses at the sites selected in this study, the other models should not be overlooked as strategies to stimulate the growth of quality child care in rural communities.

The development of cooperative child care centers in strategic rural locations or at or near affordable housing sites is a viable method of addressing parental need for child care and can address many of the concerns expressed by housing developers and community leaders in this study. In fact, integrating a center into a new housing development may be advantageous to the funding of affordable housing projects. Nevertheless, until model cooperative programs at housing developments are in place the proliferation of centers is unlikely. Housing developers will be more receptive to integrating cooperative child care into affordable housing sites once successful demonstration projects are established. The analysis described in this article is the first step in this process. Once programs are development their effectiveness can be fully assessed.

It is important to recognize that many rural areas lack dense affordable housing developments. Indeed, these may be the communities with the most acute child care needs. Cooperative models of child care can also be a useful strategy for child care expansion in these communities. To reap advantages similar those gained by linking cooperative child care with housing developments, the cooperative can be integrated into schools, libraries, or religious facilities.

The analysis in this study demonstrates compelling reasons that cooperative models of child care can offer effective strategies for expanding needed child care in rural communities. Interviews with representatives of regional resource and referral agencies and others involved with child care, and an extensive literature search, demonstrated an acute need for innovative programs to address rural child care needs. Parent surveys and parent meetings indicated a need and an interest in cooperative child care. While housing developers expressed concerns about on-site child care, and community leaders expressed concerns, these researchers noted a genuine interest in supporting families and exploring innovative strategies among most of the professionals interviewed.

Among the affordable housing sites and communities selected for more intensive, site-specific feasibility studies, in most cases cooperative models of child care were preferred over other forms of child care. Indeed in the case of affordable housing developments, the process of selecting sites involved rejecting sites not because they were disinterested in the cooperative model, but because they were unreceptive to integrating any form of child care into the housing development. Because of perceived problems, or past experiences with other models of child care and the various issues confronting rural communities, the study revealed a distinct receptivity to innovative strategies like cooperatives.

As this project extends into cooperative development, the extent of interest and commitment to cooperative models of care are topics of study. In the cooperative development phase of this applied study, expressions of interest will be more fully assessed by the actions of parents as they become engaged in forming a cooperative and as community members are asked to make concrete financial and professional commitments to cooperative development.

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