DISSERTATION

OUR CHILDCARE PROBLEM: THREE ESSAYS ON THE CHILDCARE DECISION-MAKING PROCESS FROM A GENDERED PERSPECTIVE

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ABSTRACT

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Children bring great joy and love to families, but for many families childcare entails significant stress, worry, sacrifice, and financial hardship. Social and cultures norms in the United States place these care difficulties in the private sphere to be handled by individuals, primarily women. The challenges families face in choosing between quality, affordability, and availability demonstrate that our childcare system is not the best that it could be and that all of us need to become stakeholders in the care of children.

This research examines the childcare decisions of families using the ideas of neoclassical, feminist, and institutionalist economists. The childcare choice is explored with quantitative and qualitative methodology enabling critique of both the outcome and the process. Research findings demonstrate the importance of gender in the care of children, the need for more complete data on childcare, and that a solution to the childcare problem requires an ethic of care.
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INTRODUCTION: RE-ENVISIONING THE BABYSITTERS CLUB

Growing up in a working class family, I experienced both abstract and real journeys into the world of childcare. As an avid reader, a few books stand out as personal favorites from my childhood, such as *Harriet Tubman: Conductor on the Underground Railroad* by Ann Petry and *Are You There God? It’s Me, Margaret.* by Judy Blume\(^1\). However, *The Baby-Sitters Club* by Ann M. Martin was a series of books that I *loved* because these stories connected to my life experiences at the time. The premise of this series is that a group of babysitters, primarily teenage girls, organize to make it easier for parents to find babysitters and to support each other in becoming better caregivers. Each new book in the series addresses new challenges they face as babysitters and as they come of age.

Today, I still have the first ten books in the series and the tattered covers illustrate how these stories were page-turners for me in my youth. A primary reason for relating to these stories is that I was a regular baby-sitter starting at the age of eleven for neighbors and family friends, and eventually other families in my hometown. These novels helped me develop as a caregiver by presenting me with stories of unique caregiving challenges and techniques on how to provide care. For example, I learned from the series to bring a bag of goodies such as toys, books, and art projects to the homes of families that I babysat for. Although I was generally too old to play with my Barbies, the young girls I babysat thought it was exciting to have “new” outfits and dolls to play with—making the

\(^1\) Evidence that I was already on my way to being becoming an advocate for social justice.
time more enjoyable for all. My endeavors into the fictional world of babysitting helped me to conceptualize how I could be a better caregiver from my perspective as a teenage girl.

Although I wanted to provide quality care, what kind of care did these children receive from me? I am happy to report that I had no emergency room visits, but other than that I do not know. Generally, the children in my care were not in harm’s way and to pass the time I would play with them. However, I remember two distinct occasions when my mother had to assist me because I was in over my head. Once when I was watching two unruly neighborhood children, who were notorious for being a tough babysitting job. For example, they were rumored to have locked another babysitter out of the house. On this particular morning, I was trying to convince the young girl that she really did need to wear her swimming suit to swimming lessons, when her older brother decided to climb on the roof of the house. When I went in her bedroom, he was calmly eating his breakfast. After I left the kitchen, this clever boy quickly decided that stacking the kitchen chairs and other household items made for a great ladder. Searching for him on my return to the kitchen led me to discover him on the roof. Luckily, I was across the street from my home and my mom quickly came to the rescue. In retrospect, it is clear that these children needed more guidance than a young teenage girl could provide, but this single mom could not afford more expensive and qualified childcare options.

The second time my mom came to save the day I was caring for an infant with known health problems. The parents specifically asked me to babysit knowing my mother would be home as a back-up and only a half-block away. All of these precautions, even though, the parents were only going to be gone for 3 hours and would be just 10
minutes away. Although in charge for only a few hours, I needed to call for assistance because I could not get the baby to stop crying when she awoke from her nap. This family could have afforded better care options and probably would have preferred a more qualified caregiver. However, they were attending an evening function and there were no childcare centers that offered evening care for infants in my hometown.

These are just two caregiving stories from my experiences as an avid babysitter until I turned 16, and I was able to participate in the formal labor market. In both of these stories, I provided care to fill in the gaps not covered by normal care options. However, I had multiple regular babysitting jobs that lasted a year or more, such as providing after-school care for two boys and every Saturday morning for another family. The hours I was willing to provide care and my willingness to go to the homes of families likely met the availability needs of the parents. Unfortunately, I do not have an exact recollection of my wage rate as a baby-sitter. My best estimate is that I received between $2.00 and $3.00 an hour. I do know that my pay increased as I became older, which is likely a reflection of my being a better caregiver, a better negotiator, and rising prices.

Babysitting as a teenager is where my story as a caregiver begins. Since then I have cared for the children of friends and relatives, I supplemented my income as a graduate student by being a nanny, and I am active as an adult mentor to at-risk youth. Like many women, it is not surprising that I am drawn to care. My feminist training allows me to see my favorite book series and my way of earning spending money as a teenager as evidence of my being socialized to care from a young age. Today, my passion for care guides my work as a social scientist. The three papers that follow are a progression of my development as an economist, a feminist, and an activist for social
justice. This work is a reflection of my growth and understanding of economic analysis and an exploration of how feminism connects to it.

The central question of my scholarship is to understand how parents make childcare decisions. My experience as a caregiver highlights what is questionable about how we care for our children. Did I provide quality care? What other options for quality care existed in my community? Why did parents “choose” me as a caregiver? Did they have other affordable and available options? What role did gender play in my being a caregiver? My research seeks to answer these questions that define the childcare problem faced by parents in trying to obtain quality, available, and affordable childcare.

Essay one, Does Daddy Daycare Really Exist?, examines the childcare decisions of parents using regression analysis to study the choice between parent and non-parent care based on the gender of the primary caregiver. In feminist literature, this is an “add gender and stir” methodology in that standard economic analysis is used, but gender is a central variable of analysis. Using data from the 2002 National Survey of America’s Families, separate multinomial logistic regressions examine how the choice of parent care over other forms of childcare are selected by female and male primary caregivers. Results show that for both male and female primary caregivers the hours worked by the female in the household have the greatest impact on their use of parent care. This essay raises questions about how we define primary caregivers, how families negotiate care responsibilities, the importance of a gendered lens in survey design, and whether we have progressed in having men share care responsibilities.

Navigating Childcare Institutions in Larimer County, Colorado, my second chapter, uses information gathered from personal interviews to study the childcare
decision-making process. This work begins where my first piece ends by using a gendered lens and stepping away from the mainstream economic bias towards quantitative research. Qualitative research is used to tell the story of how one community, Larimer County, organizes the care of their children and how parents navigate this system of care. I focus on trying to understand the process of decision-making when it comes to childcare by speaking with those involved in the care choices. A distinct effort was made to understand the perspective of welfare recipients and how their childcare choices are different.

The story of caregivers in this community articulates the complexity of our care system and how the childcare problem is gendered. This dialogue provides us with a starting point for thinking about how we can reorganize our system of childcare.

My third essay, *Childcare in Perspective*, steps back to look at the larger picture of our childcare problem and builds off the information presented in papers one and two. I explore how our understanding of the childcare problem is a function of our economic ideology. Using insight from both neoclassical and feminist economics, I present a conceptual framework for understanding the context of the childcare choice. This model examines how the childcare problem of balancing availability, affordability, and quality is a social construction of our culture, customs, and norms, institutions and policies, and household structures. This model of the childcare choice illustrates how policy can positively create change in how we value care.

As the author, I feel it is essential to be clear about my standpoint and where I am coming from. I consider myself to be a feminist, institutional economist. This gives me a unique perspective of what economics is and how it should be studied. I use a distinct
feminist pedagogy that is ever-evolving as feminism works to be more inclusive of the
difference that exists in the world. My training in institutional economics enables me to
be more open to questioning the role of institutions (formal and informal), the science of
economics, and the changing nature of the economy. My work attempts to bridge the gap
between traditional economic modes of inquiry with those utilized more frequently in
other social sciences. Understanding my standpoint as a researcher will help you, the
reader, situate my work and make explicit the value judgments I made in the research
process.

Believing that the personal is political acknowledges the correlation between our
personal economic lives and the world around us—a world that we construct through our
culture, politics, and relationships. We cannot look at our individual economic decisions
as isolated events because this does not reflect the reality of how we make economic
decisions. To truly understand economic decisions, we need to examine how these
decisions are made within the world we live in. From this perspective, it becomes
obvious that we have to explore these decisions from a perspective that is inclusive of
gender and other areas of difference that create privilege in our society.

As a childcare researcher, I was recently contacted by a new mother looking for
information on childcare and strategies on how to arrange care for her six-month old
daughter. It is aggravating to me that the answer I had to provide her with is that we do
not have an organized system of care and that it would be up to her to find and secure the
care she needed. This mom is struggling with the childcare problem more than fifteen
years after parents in my hometown chose me as the solution to their childcare problem.
Like The Baby-Sitters Club, we need to reflect on what it means to provide quality care
and how we structure it. The work that follows is an effort to help us rethink how we organize and value the care of children in our society to confront our childcare problem.
CHAPTER 1 DOES DADDY DAYCARE REALLY EXIST?
EXPLORING PARENT AND NONPARENT CHILDCARE DECISIONS

Abstract

The increased participation of women in the labor force over the last 40 years and recent changes in U.S. welfare policy highlight the importance of developing a clear understanding of childcare in the United States. The growing costs associated with care of children in the U.S. raise both efficiency and equity concerns. These concerns center on the quality of care children are receiving and the negative consequences for women to carry the burden of childcare upon their shoulders.

Using data from the 2002 National Survey of America’s Families (NSAF), this paper examines the choices families make about the type of care their children receive. In particular, the choice between parent and nonparent childcare is explored conditioned on the gender of the primary caregiver in the context of a binary logit model. Results show that for self-identified female primary caregivers each additional hour she works increases the likelihood of the use of nonparent care relative to parent care by 4%; for male primary caregivers, it is a 2% increase. Interestingly, if a spouse or partner is present, an additional hour worked by a spouse or partner increases the likelihood of using nonparent care rather than parent care for male primary caregivers by 5%. It has no significant effect with female primary caregivers. These results illustrate how greatly
childcare decisions are impacted by the labor supply decisions of women, even when they are not the primary caregivers.

Introduction

Every day families are making economic decisions. For families with children, one of the most important decisions is what mode of childcare to use. The growing acceptance and expectation that women, even married women with children, will participate in the paid labor force has necessitated that families carefully consider their childcare choices. In 1940, the labor force participation rate of women in the United States was 27.9%; in 2003, it was 59.5% (Blau, Ferber, and Winkler 2006). This key change in the lives of women has greatly increased the need for childcare options that go beyond the mother as the primary care provider. According to the 2002 National Survey of America’s Families (NSAF), approximately 68% of the families surveyed use a primary childcare arrangement other than a parent.

The increased labor force participation of women requires families to move beyond mothers as primary caregivers and raises questions about how families choose appropriate care for their children. Important equity and efficiency concerns surrounding childcare decisions demand a better understanding of how such decisions are made. Are current childcare arrangements efficient? Do market failures, in terms of externalities or public goods, exist? Are current childcare arrangements equitable? How do they impact gender equity? Are all children ensured a minimum level of well-being with current childcare arrangements? Nancy Folbre (1994) suggests that children are not pets, but are public goods. As such, the care of children should be the responsibility of society as a
whole, not the sole responsibility of parents. She argues that the market will not produce an optimal outcome in the care of children, but an inefficient one. In “Children as Public Goods,” Folbre (1994) states (p. 86), “all citizens of the United States enjoy significant claims upon the earnings of future working-age adults through Social Security and public debt. But not all citizens contribute equally to the care of these future adults. Individuals who devote relatively little time or energy to child-rearing are free-riding on parental labor.” Children are a public good, rather than a consumer durable, because they do not produce utility just for parents. An optimal outcome in the care of children requires that we revalue parental labor and redistribute the costs of care.

Vandell and Wolfe (2000) also argue that current childcare arrangements are inefficient. They offer three reasons for why there is a market failure in the childcare sector: a lack of information, externalities, and an imperfect capital market. They argue that it is difficult for parents to find information and in turn to process the information that they do find. A lack of clear quality standards makes it difficult to assess what families will receive and how to select the best childcare arrangement. Secondly, society positively gains from having children who are well cared for. This results in lower crime rates and lower health costs among other things. Finally, they suggest that “parents of young children tend to have low incomes relative to their permanent incomes, and may face borrowing constraints that reduce their ability to pay for high-quality care” (p. 81). All of these suggest that there is a need for government intervention to correct for these market failures.

In addition to efficiency concerns around childcare decisions, there are equity considerations of current childcare arrangements. Given that children have little choice
in their care arrangements, it is important for society to ensure that all children have a minimum level of well being, regardless of the care arrangement they are in. The care of children is a necessity in our society, but everyone does not share in the cost of providing care. Caregivers, typically women, disproportionately pay for the costs of care. Any policy designed to create a more equitable distribution of the cost of care will subsequently improve gender equity.

Awareness of gender roles in the family and in the economy makes it difficult to understand how research can fail to include something so central to childcare decisions (Blank and Cordelia 2003). Existing research has generally focused on the childcare choices of mothers, such as in Kimmel and Connelly (2001), Kimmel (1998), and Sonenstein (2002). There are two major problems with this: (1) it leaves out how fathers fit into this picture (something that is particularly important when we think about the increasing role they are playing in providing care within the family (Coltrane and Galt 2000)) and (2) although research has focused on mothers, it has not included a discussion of how mother’s decisions are defined by socially determined gender roles, and in turn, how economic outcomes are gender related.

In addition to excluding gender from the analysis, existing research centers on the decisions of only those mothers engaged in market work (Connelly 1992; Ribar 1995; Michalopoulos, Robins, and Garfinkel 1992). This is problematic because the choice of nonmarket care may be directly the result of limitations in care alternatives and/or gender constraints within society (Badgett and Folbre 1999). By looking only at the childcare decisions of individuals involved in market work, these studies ignore a significant proportion of families making childcare decisions.
This essay examines the childcare decisions of families, focusing on whether or not the primary care arrangement is parent or nonparent childcare, conditioned on the gender of the primary caregiver. Results show that an additional hour of work by female primary caregivers increases the use of nonparent care relative to parent care by 4% and for male primary caregivers this increase is 2%. Additionally, the presence of a spouse or partner for a female primary caregiver does not have a significant impact on mode of childcare used, but for a male primary caregiver each additional hour that his spouse or partner works increases the likelihood of the use of nonparent care relative to parent care by 5%. These results show how important the assignment of care is in determining the way children are cared for and women’s ability to bargain for preferences in the home.

*Literature Review of the Childcare Decision*

The social construction of gender within the United States has associated care with the feminine gender, and by extension to those who are female. In contrast, the traditional gender dualism correlates masculinity with being strong, independent, and unemotional, all characteristics not associated with care (Wood 2002). This gendered construct in the U.S. has resulted in the assignment of care to women. By performing assigned gender roles or “doing gender,” women must take on the responsibility of care (Butler 2003; Delphy 2003; West and Zimmerman 2002). This assignment of care is broadly associated with women either: (1) remaining within the home, (2) working in caring labor jobs, or (3) working in jobs that are family-friendly. All of the previously mentioned outcomes help explain a portion of the gender wage gap; suggesting that the assignment of care is creating negative economic outcomes for women (Badgett and
Folbre 1999; Bergmann 1986; Blau, Ferber, and Winkler 2002; Freedman 2002). Not only does the assignment of care reduce women’s wages in the labor market but for many low-income workers, this responsibility pushes them into poverty (Albelda and Tilly 1997; Albelda 2002; Johnson 2002; Folbre 2001).

The assignment of care to women is not necessarily problematic until it is connected with the fact that care is undervalued in our society. The devaluation of care is evident in the exclusion of nonmarket work in measures of economic well being (Waring 1988), the low pay associated with caring labor jobs, and the current importation of caring labor by families in developed countries from women in developing countries (Folbre 2001; Hochschild 2002; Helburn 1999). Additionally the “work-first” policies developed during the 1996 welfare reform further illustrate the low value of care, as it became more important to place welfare recipients into the labor market, often at jobs that do not allow for self-sufficiency, than for them to provide care for their own children (Albelda 2002; Young 2002; Hancock 2002).

Women are constrained in many ways by their responsibility for care. From a very young age, girls are encouraged to be caring and nurturing (Wood 2002; Williams 2000). To the extent that preferences are endogenous, this results in women developing preferences for providing care and “choosing” caring work both in the home and the paid labor market (Blau, Ferber, and Winkler 2002; Johnson 2002; Badgett and Folbre 1999). Women face social sanctions when they are perceived as shirking this assigned responsibility and this places women in a double bind in the labor and marriage markets (Badgett and Folbre 1999). As women entered the paid labor market and took on more traditionally masculine economic roles, men have not taken on caring work in the home.
to the same extent (Schor 1992; Coltrane and Galt 2000; Hochschild 1998). “Women know they can benefit economically by becoming achievers rather than caregivers. They also, know, however, that if all women adopt this strategy, society as a whole will become oriented more toward achievement than care” (Folbre 2001 p. 4). The social construction of women as caregivers directly connects to their concern over who will provide care if they do not.

This assignment of care to women also negatively impacts men by limiting men’s caring and nurturing roles. Our social construction of masculinity has assigned men the responsibility of being the breadwinner and as such, it is less socially acceptable for men to actively participate in care (Coltrane and Galt 2000; Woods; Williams 2000; Gamburd 2002). The institutional structure of the labor market reinforces these gender roles. The dominant view in the paid labor market is that work comes first and family second (Cooper 2004; Sirianni and Negrey 2000). The expectation that women will provide care places more pressure on men to be removed from care, thus, working full-time, year-round, and reinforcing our societal construction of gender and the economic outcomes associated with it.

Like the assignment of care to women, the unique characteristics of care complicate the childcare choice. Folbre (2001) states “caring labor is done on a person-to-person basis, in relationships where people generally call each other by their first names, for reasons that include affection and respect” (p. xii). Alternatively, Hochschild (1998) defines care as “an emotional bond, usually mutual, between the caregiver and cared-for, a bond in which the caregiver feels responsible for others’ well-being and does mental, emotional, and physical work in the course of fulfilling that responsibility. Thus,
care of a person implies care about him or her” (p. 528). From these definitions of care, it is easy to see that care is different from other types of work because a central feature of quality care is having an emotional attachment to recipients of care. This challenges standard conceptions of work where emotion is supposed to be left at the door (England and Folbre 2003).

Cheever (2002) discusses the complications of working as a nanny to illustrate how different carework is from other work. Employers and nannies must have working relationships since care involves people, and thus, emotion. A good nanny is part of the family, but this conflicts with her identity as an employee of the family. Parents have direct control over a nanny’s current economic well being, while they must place trust in the nanny that she will provide good care. At the same time, relationships that develop between nannies and children can also compete with the relationships between the parents and children. Like all work relationships, conflicting interests exist for employers and employees. However, the emotional aspect of care work adds another level of complexity to their conflicting interests.

Unfortunately, as noted earlier, the important work of care is undervalued in our society (Folbre 2001; Rose 1994; Johnson 2002; Helburn 1999; Hancock 2002). In interviewing family childcare workers, Tuominen (2002) notes how workers are aware that the care that they provide is undervalued. She addresses the challenge of understanding care when it is paid because it contradicts the general understanding that care is a result of altruism and performed out of love. In Becker’s (1993) treatment of the family, decisions are a result of altruism that naturally exists within the family. However,
this view has been much contested by feminist economists, such as England (2003), Badgett and Folbre (1999) and Folbre (2001).

Although altruism is one motivation for care, it can also be performed out of responsibility or extracted through given power structures within the institutions of society. Within our patriarchal society, men have more power than women. The power differentials between men and women give men greater bargaining power within the family and in society. As a result, men have an advantage in negotiating care responsibilities. “Emotionally demanding labour requires that the carer gives something of themselves to the person being cared for, so that even while child care is capable of immense variation within societies and across time, it remains the case that nurturance—a matter of feeding and touching, comforting, and cleaning bodies—is cross-culturally primarily the preserve of women” (Rose 1994). The power structures within our society cause the burden of care to fall on the shoulders of women and being care providers is costly for women. Their care responsibilities reduce their labor force experience and require them to choose jobs that allow them to meet their care responsibilities. Additionally, women’s care responsibilities decrease their wealth and put them at greater risk for poverty in old age. The cost of providing care, that women must pay, reinforces current power structures that favor men.

Over the past four decades, the nature of the family and work has greatly changed. A significant increase in the labor force participation by both single and married women has moved care outside the private sphere of the home and into the public sphere of the market (Freedman 2002 and Folbre 2001). Additionally, marriage rates have declined and divorce rates have risen, resulting in more single parent families in our society than
ever before, most of them headed by women (Albelda 1997; Freedman 2002). Housewives are no longer solely providing care for children, elderly, and homes. More and more women enter the paid labor market because they are single parents or in dual-earner relationships causing families to increasingly turn to the market to meet their care needs. Responsibility for care has, however, remained predominately with women; it has not been fully shared between the genders or between society and families. Care is still considered the responsibility of the family within our society and our social construction of gender has given that familial responsibility to women (Folbre 2001; Perrons 2000).

Sharing care responsibilities between both genders and between society and families is central to revaluing care and is necessary for improving societal well being (Coltrane and Galt 2000; Folbre 2001). West (2002) states that “for even more of us, whether or not we like it and regardless of how we regard it, caregiving labor, for children and the aged, is the work we will do that creates the relationships, families, and communities within which our lives are made pleasurable and connected to something larger than ourselves” (p. 90). Care is an important part of our everyday lives and the structure of our society. Understanding care and the assignment of care to women sets the stage for evaluating the childcare decisions of families.

The exploration of childcare decisions of families is a growing area of research among economists. To date, research on the childcare decisions of families in the United States concentrates primarily on three areas of study: (1) the price effects of childcare on the labor supply of women, (2) the effectiveness of childcare subsidies, and (3) the mode of childcare utilized by families. Most studies focus on labor supply decision of mothers
as the central individuals in these decisions because they are usually the primary caregivers in families (Kimmel 1998; Sonenstein 2002).

Blau and Tekin (2001) provide an extensive research summary on the effect of the price of childcare on employment of mothers and conclude that the price elasticity is likely to be relatively small (i.e., increasing the price of childcare has a small impact on the employment decision of mothers). Kimmel (1998) finds that childcare prices significantly impact the labor force participation of married mothers. Combining existing evidence, she suggests that the “true” childcare price elasticity for married mothers is between -0.4 and -0.9, however, she notes that childcare price elasticities greatly depend upon the way the price of care is constructed, the way it is modeled, and the econometric specification. Powell (2000) also finds that childcare costs negatively impact decisions to work and that subsidies can positively influence these decisions for married mothers.

Additionally, Connelly (1992) examines the effect of childcare costs on the labor force participation of married women. She finds a positive correlation between no-cost care and labor force participation and predicts that the labor force participation of women will slow down unless alternative ways are found to reduce the cost of childcare. She also notes the problems in existing data of incomplete information on wages and childcare costs in accurately estimating the relationship between labor decisions and the price of childcare. Ribar (1995) and Michalopoulos, Robins, and Garfinkel (1992) both examine childcare in relation to the labor supply decisions of mothers. Ribar finds that childcare subsidy programs influence the choice of care of married women, but not their labor force participation and this result is supported by Michalopoulos, Robins, and
Garfinkel, who also remark that the overall quality of care does not change, but that there is a shift of care from high quality free care to higher quality market care.

All of these studies focus on employed mothers, both single and married, and their labor force participation decisions and in so doing, they overlook some important issues. First, the analyses are not gendered. It is simply asserted and not established that mothers are the primary caregivers of children and there is no discussion of how childcare issues impact the labor market decisions of men. Additionally, issues unique to single parent families are typically ignored. It is likely that low quality care is substituted for high quality care in such families, rather than a change occurring in the parent’s labor force participation, because s/he is the sole provider for the family. Finally, there is no consideration of the possibility that employed mothers may shift into (often less desirable) occupations with more flexibility to juggle their care responsibilities, rather than changing their labor force participation.

A second area of focus for research on the childcare decisions of families directly builds upon the research on the cost of childcare and its effect on labor supply decisions by concentrating on the effectiveness of childcare subsidies. This is particularly important in light of recent changes to the U.S. welfare system that established work requirements for welfare recipients. A greater emphasis on work requires childcare beyond parent care. These studies examine how childcare subsidies impact the labor supply decision of women. Knowing the role childcare plays in welfare decisions helps create better childcare policies that enable the working poor to remain off the welfare system and hopefully achieve some level of self-sufficiency.
Evidence exists to support the hypothesis that labor market choices and welfare choices of single and married women are influenced by the costs of childcare. Connelly and Kimmel (2001) find that subsidizing childcare can reduce welfare dependency of single mothers. In simulations where 50 percent of childcare expenditures were subsidized, welfare dependency decreased by 10 percent for women with annual incomes below the median, and employment increased by more than 25 percent. Kimmel (1995) examines the employment responsiveness of mothers in poverty to childcare subsidies. Her findings show that white single mothers have the strongest responses to childcare subsidies. She also notes “while childcare costs in any welfare reform program are likely to be quite expensive, they are also likely to be highly effective in encouraging the welfare-to-work transition” (p. 274). Blau and Tekin (2001) find that childcare subsidy recipients were 2.5% more likely to be employed, 8% more likely to be in school, and 15% more likely to be receiving welfare than nonrecipients. Bainbridge, et. al. (2003) find dollar for dollar childcare subsidies are more effective than changes in tax policy when it comes to increasing single mothers’ employment. However, during the 1990’s, tax changes were a lot larger than increases in childcare subsidies and explain a larger share of the growth in employment among single mothers.

Fuller, et. al. (2002) discuss how childcare funding has increased from $2.8 billion in 1995 to $8.0 billion in 2000, but that less then one-quarter of eligible families use childcare subsidies, suggesting various barriers to access and a scarcity of quality center-based care. This is supported by Meyers, Heintze, and Wolf (2002) who find childcare subsidy receipt to be an uncommon event reserved for high-priority populations.
Shlay, et. al. (2004) find barriers to subsidies for low-income families, such as beliefs that they did not need or were not eligible for subsidies.

Research on the childcare choices of families also considers how families select which mode of childcare to use. Camasso and Roche (1991) examine the willingness of parents to substitute group care for informal care. They find that it is a function of cost, family structure and resources, and quality of care factors. Johansen, Leibowitz, and Waite (1996) examine the importance of intrinsic and extrinsic characteristics on parents’ choice of care and find that parents who choose child care centers place higher value on the developmental aspects of care, while parents who choose at-home care, which can be done by relatives and nonrelatives, place more emphasis on hours, location, and cost of care. Riley and Glass (2002) find a preference for father care by employed mothers and that this type of care was more likely to be used if the mother worked an evening or night shift, if multiple children under the age of 5 were in the home, and for those families with higher educational attainment.

Folk and Beller (1993) find that mothers employed part-time and using nonmarket care are more likely to be white, married, Catholic and in a service or sales occupation with a changing schedule. Folk and Yi (1994) study the use of multiple care arrangements by parents and find that mothers working less than 20 hours a week are least likely to utilize multiple arrangements, while mothers who work more than 40 hours a week or have varying work schedules or families with fathers as primary caregivers are more likely to use multiple care arrangements.

Current literature focuses on the assignment of care, understanding the complexity of care, and examining childcare and labor supply decisions. The assignment
of care and the uniqueness of care as a form of work are essential to understanding childcare arrangements in the United States. Additionally, the relationship of childcare decisions and work decisions, the effectiveness of childcare subsidies, and the mode of childcare selected by families all provide insight into their childcare decisions. This study expands examination of the childcare decision by incorporating a gendered analysis of this critical economic activity of families.

Theoretical Model of the Childcare Decision

The childcare choice is an essential economic decision that families make on a regular basis. Modeling this important economic choice will expand understanding of how resources are being used to meet family needs. Using a standard neoclassical utility maximization model conveys information about the individual decision-making process; however, the childcare decision is not an individual decision. Although both parents may agree that they want their children well cared for, it is likely that they have different perspectives in how to reach that outcome. To accurately analyze the childcare decision, a model is needed that informs us of how childcare decisions are negotiated in families. A collective bargaining model, such as the one developed by McElroy (1990), analyzes a joint decision-making process. Like a standard neoclassical model, preferences are unknown, but the collective bargaining model assumes that different people have different preferences.²

A key component in the collective bargaining model is the individual threat points of each parent. The threat point is determined by the prospects of each parent outside of

² This implies that a standard neoclassical utility maximization model is a special case of the collective bargaining model where both individuals have identical preferences.
the relationship—how well off would the individual be if the relationship dissolved. The ultimate bargaining chip in any joint decision made by the couple is the threat of ending the relationship. The more credible an individual’s threat of ending the relationship is, the greater their ability to bargain for their individual preferences.

In the childcare decision, the threat point for each parent will be decided by their probability of success outside of their current relationship, which will determine whose childcare preferences are met in the family’s childcare decision. First, earnings are a key factor in determining the threat points for each parent. The gender wage gap articulates that on average his earnings will be greater than hers. His higher earnings will make it easier for him to exist the relationship because it will be more difficult for her to move out of the house, afford a lawyer, and maintain her standard of living after the dissolution of the relationship.

A second element in determining the threat point is the likelihood of each to find a new relationship. Our patriarchal society implies that his chances for finding a new partner will be easier. For example, the sexually objectification of women decreases the relationship value of women as they age. Additionally, the social assignment of care establishes that she is more likely to receive custody of the children if the relationship ends. However, the cost of caring for children will be significantly harder without a partner. Because it will be more difficult for her to succeed in meeting her care responsibilities outside the relationship, the social assignment of care decreases her ability to be a credible threat. In contrast, efforts creating tougher laws and enforcement of alimony and child support policies have decreased his bargaining power overtime.
Finally, social policies addressed at reducing the cost of care, such as workplace flextime, increase her bargaining power in the relationship.

Generally, his threat has greater credibility because he has higher earnings and is not socially responsible for care. Clearly visible in the determination of his and her threat points is that a more patriarchal society creates a better bargaining position for him, while her bargaining position increases the more egalitarian society is. Understanding the key elements in determining each parent’s threat points, we can develop a formal bargaining model to analyze the childcare decision. This Nash-bargained model of the childcare decision builds from the model developed in McElroy (1990) by applying the model to the childcare choice.

Assume two individuals, $m$ and $f$, who are partnered and jointly allocate household resources as defined by the solution to a two-person, Nash, cooperative game. The opportunity cost of staying in the relationship determines the threat point of each player. For example, $f$’s threat point is her next best alternative outside of the relationship with $m$. First, we construct individual utility functions assuming $m$ and $f$ are not partnered such that $m$’s utility function is $U_m(x_0, x_1, x_2, x_3, x_5)$ and $f$’s by $U_f(x_0, x_1, x_2, x_4, x_6)$ where $x_3$ is a good consumed by $m$, $x_4$ is a good consumed by $f$, $x_5$ is $m$’s leisure time, $x_6$ is $f$’s leisure time, $x_1$ is parent care, $x_2$ is non-parent childcare, and $x_0$ is an additional private good that will be a household good if $m$ and $f$ partner (i.e., a Samuelsonian pure public good within that household). Next, we assume that $x = (x_0, x_1, x_2, x_3, x_4, x_5, x_6)^\top$ can be bought at prices $= (p_0, p_1, p_2, p_3, p_4, p_5, p_6)^\top$. $T$ is the time endowment for both $m$ and $f$ and $I_m$ and $I_f$ is their respective nonwage incomes. If $m$ and $f$ are not partnered, they each maximize their separate utilities subject to their individual
full income constraints \[p_0x_0 + p_1x_1 + p_2x_2 + p_3x_3 + p_5x_5 = I_m + p_5T\] for \(m\), and similarly for \(f\), which create their indirect utility functions

\[(1) \quad V^m_0(p_0, p_1, p_2, p_3, p_5, \alpha_m) \text{ and } V^f_0(p_0, p_1, p_2, p_4, p_6, \alpha_f).\]

The vectors, \(\alpha_m\) and \(\alpha_f\), emerge as representation of extrahousehold environmental parameters (EEPs). Any variables that change the maximum value of utility an individual can achieve outside the relationship are EEPs. A change in EEPs shift the threat points in the bargaining model, and as such, they are parametric to the Nash outcome. “In general, the EEPs cover a wide range of parameters, including, but not limited to, parameters that describe marriage markets, parameters that characterize the legal structure within which marriage and divorce occur, and parameters that characterize government taxes and government or private transfers that are conditioned on marital or family status” (McElroy 1990 p.567). For example, if his family members are used as a source of childcare and this source of care would be less available upon divorce, this would result in a decrease in \(\alpha_f\). The EEPs play an important role in determining the demand for goods.

The Nash-bargained solution to the allocation problem of \(m\) and \(f\) requires that \(m\) and \(f\) jointly select \(x\) to maximize the combined gains from their relationship.

\[(2) \quad N \equiv [U^m(x) - V^m_0(p_0, p_1, p_2, p_3, p_5, \alpha_m)] [U^f(x) - V^f_0(p_0, p_1, p_2, p_4, p_6, \alpha_f)],\]

subject to full household expenditures equaling full household income,
(3) \[ p'x = (p_5 + p_6)T + I_m + I_f. \]

or, \( p'q = I_m + I_f \) where \( q \) is the vector of excess demands,

\[
(4) \quad q = (x_0, x_1, x_2, x_3, x_4, x_5 - T, x_6 - T)
\]

such that \((x_5 - T)\) and \((x_6 - T)\) represent the negatives of the labor supplies of \( m \) and \( f \), respectively. Developing from this, \( m \) and \( f \) are partnered only if their partnership is efficient and that gains from the partnership are positive for both, or \( g^m = U^m - V^m > 0 \) and \( g^f = U^f - V^f > 0 \). The Nash solution to maximization of (2) subject to (3) is a system of demand equations

\[
(5) \quad x_i = h_i(p, I_m, I_f; \alpha_m, \alpha_f), \quad i = 0, 1, 2, 3, 4, 5, 6.
\]

The elements of the Nash demand system are inclusive of all prices, separate measures of nonwage income for \( m \) and \( f \), and the EEPs, \( \alpha_m \) and \( \alpha_f \). This is a distinct difference to the neoclassical model, which would pool income and ignore the EEPs.

Solving for the effects of changes in \( \alpha_m \) and \( \alpha_f \), we see that changes in \( \alpha_m \) and \( \alpha_f \) result in changes in household demands.\(^3\) “In other words, the bigger the effect of \( \alpha_m \) on \( V^m \), the bigger the effect of a change in \( \alpha_m \) on the demand for each \( x_i \); parallel results hold for \( \alpha_f \)” (McElroy 1990 p. 568). This suggests that the EEPs, which determine threat

\(^3\) See McElroy 1990 for complete mathematical solution.
points, directly impact the demand for household goods, such as childcare. The parent who is better positioned to bargain will be more successful in having their preferences met. Theoretically, threat points influences the childcare choice in the home, but what does the empirical data say.

_Care Hours and Work Hours_

Now I empirically examine the factors influencing families’ decisions between parent and nonparent care⁴ and whether or not this is affected by the gender of the primary caregiver. In particular, I examine how the preferences of parents and their individual bargaining power in the home translate into the childcare decision. The data comes from the 2002 National Survey of America’s Families (NSAF) conducted as part of the Urban Institute’s _Assessing the New Federalism_ project. The NSAF examines a variety of issues, such as welfare reform and childcare, and how relevant policies are changing with decentralization—the devolution of responsibilities from the federal government to state and local governments (Converse, et. al. 2001).

The NSAF is representative of the nation’s noninstitutionalized, civilian population under age 65 with a concentration on thirteen states: Washington, California, Colorado, Texas, Minnesota, Wisconsin, Michigan, Mississippi, Alabama, Florida, New York, and Massachusetts. These states were chosen because they represent a broad spectrum of policies and population characteristics (Converse, et. al. 2001). This study will use the 2002 survey results and examines only those families surveyed that have a child under the age of 6, resulting in a sample size of 11,889 families.

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⁴ Nonparent care is defined as any mode of childcare other than care provided by a parent including center care, family day care, etc.
Understanding how the primary caregiver is identified is central to the analysis that follows. This individual is defined as the most knowledgeable adult (MKA) of the focal child surveyed in the NSAF. The focal child is the unique child in the surveyed family under the age of 6 for whom data was collected. The MKA is self-identified as the adult who knows the most about the focal child’s health and education with 83.1% of the MKAs female and 16.9% male MKAs.

A key variable for exploring families’ childcare decisions is the price of childcare. The cost of childcare was acquired in the NSAF, but was only asked of families where the MKA was working, looking for work, or in school. Of the 11,889 families surveyed, 5,263 (44%) had MKAs that where not working, not looking for work, or not in school. This means that these families were not asked what they pay for childcare. To include pay as an explanatory variable in choice of childcare mode, the sample would have to be limited to only those who are working, looking for work, or in school. Doing this also eliminates the majority of families in the sample using parent care as their primary type of childcare. As a first approximation and to maintain a broader representation of childcare modes used the price of childcare is excluded from this analysis.

The following figures convey information on the hours of care used by families. When simply looking at the hours spent in nonparent childcare (Figure 1), it appears that the childcare decisions associated with female MKA families and male MKA families are fairly similar. The children of male MKAs are in care slightly longer hours than those of female MKAs. However, this information is somewhat deceptive because any family using parent care was not asked about hours of care because it is not considered the same as other childcare arrangements.
FIGURE 1: Childcare Hours (per week) by Gender of MKA

![Childcare Hours Bar Chart]

FIGURE 2: Mean Hours Worked (per week) for all MKAs by Gender

![Mean Hours Worked Bar Chart]

Looking at the hours worked by the MKAs, we start to see some clear gender differences. Figure 2 shows the mean hours worked for all MKAs including those who did not work. Evident is that male MKAs are working more hours than their female counterparts, regardless of the presence of a spouse or partner. One explanation for this is that the responsibility for care that society places on women causes women to be less
likely to participate in the labor force and to work fewer hours to enable them to fulfill their care responsibilities (Badgett and Folbre 1999; Blau, Ferber, Winkler 2006).

**FIGURE 3: Mean Hours Worked (per week) for Working MKAs by Gender**

![Mean Hours Worked Chart]

Figure 3 removes those female and male MKAs not in the paid labor market comparing only those working. Male MKAs are still working more hours, but the difference in hours worked is smaller when looking only at working MKAs. Worth noting is that male MKAs without a spouse or partner work fewer hours in Figures 2 and 3 compared to male MKAs with a spouse or partner, and female MKAs without a spouse or partner work more hours in Figures 2 and 3 compared to female MKAs with a spouse partner. This may reflect the increased need for income among single female MKAs because women earn less on average than men, and if as single parents they may have to work more to meet income needs (respectively, from 5.8 hours more and 3.5 hours more).

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5 Less of a change is expected for male MKAs with a spouse or partner than for female MKAs with a spouse or partner when accounting for only working MKAs because only 9.6% of male MKAs identified as not working, while 46.3% of female MKAs identified as not working.
To compensate for not having a spouse or partner, single male MKAs—presumably facing increased care responsibilities—reduce the hours (respectively, from 5.1 hours less and 1.3 hours less) they work as compared to male MKAs with a spouse or partner.

Initially, looking at the hours of care used by families, male MKAs use slightly more care than female MKAs (0.3 hours more total care per week). This seems inconsistent given male MKAs work substantially more hours than female MKAs (22.4 hours more per week for all MKAs and 12.1 hours more per week for only working MKAs). How are the children of male MKAs cared for during their extra work hours? One possibility is through the use of parent care, as survey data did not gather information on the hours spent in parent care. However, this seems ironic given male MKAs identified as the primary care givers. Empirical analysis is needed to further understand this difference in experience of male and female MKAs.

*Empirical Model of the Childcare Decision*

A family’s decision about mode of childcare is a complex choice determined by the cost, quality, and accessibility of childcare and family characteristics among other things. In this analysis, families’ childcare choices between parent and nonparent care are evaluated, focusing on differences in family and MKA demographics, such as household income and the age of the MKA. As discussed earlier, the cost of care is not used because of data constraints. However, the number of children under age 6, the number of children between the ages of 6 and 17 within the household, and the highest degree earned by the MKA proxy as information about the cost of childcare. Variables representing household income and wealth (owning their own home) provide information
on resources available for childcare. Hours worked by the MKA and the spouse or partner convey information about the need for childcare, while accessibility of care is demonstrated by looking at childcare choices for MKAs working at night. The age of the MKA, racial identity of the MKA, and region of the country where families are located are representative of other preferences for mode of childcare.

Using the 2002 NSAF data, binomial logistic regression models are run comparing the likelihood of selecting nonparent care over parent care. Three different groups are examined: (1) all families, (2) only families where the MKA has a spouse or partner, and (3) only families where the MKA does not have a spouse or partner. Separate regressions were run for female and male MKAs to enable a better understanding of how decisions are different based on the gender of the MKA. It is expected that the presence of a spouse or partner will have a different impact on the mode of childcare used by families for female and male MKAs because it makes parent care more accessible to families.

Table 1 shows the log odds ratios for separate regressions categorized by the gender of the MKA for all families. We see that the care decision for female MKAs is significantly influenced by the number of children 0-5 in the household, the number of children 6-17 in the household, the female MKA’s work hours, whether the female MKA works at night, household income, whether she has a bachelors degree or no degree as compared to having a high school degree, whether or not she has a spouse or partner who does not work, and whether or not she has a spouse or partner who works for pay. Key variables in the childcare decision for male MKAs are his hours worked, if he is from the
South, if household income is below 100% of the poverty line, if he has a spouse or partner who does not work, and the hours worked by a spouse or partner if one exists.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children 0-5</td>
<td>0.86*</td>
<td>1.09</td>
</tr>
<tr>
<td>Children 6-17</td>
<td>0.90**</td>
<td>1.09</td>
</tr>
<tr>
<td>Age of MKA</td>
<td>0.99</td>
<td>1.01</td>
</tr>
<tr>
<td>Own Home</td>
<td>1.19</td>
<td>0.91</td>
</tr>
<tr>
<td>MKA Hours of Work</td>
<td>1.04**</td>
<td>1.02**</td>
</tr>
<tr>
<td>MKA Nightwork (1=yes)</td>
<td>0.76*</td>
<td>0.73</td>
</tr>
<tr>
<td>Blurred Income</td>
<td>1.000005*</td>
<td>1.00</td>
</tr>
<tr>
<td>Northeast</td>
<td>0.98</td>
<td>1.26</td>
</tr>
<tr>
<td>Midwest</td>
<td>1.14</td>
<td>1.43</td>
</tr>
<tr>
<td>South</td>
<td>0.96</td>
<td>1.76*</td>
</tr>
<tr>
<td>Black</td>
<td>1.16</td>
<td>1.17</td>
</tr>
<tr>
<td>Other</td>
<td>0.74</td>
<td>0.67</td>
</tr>
<tr>
<td>Vocational/Technical</td>
<td>1.12</td>
<td>0.53</td>
</tr>
<tr>
<td>Associate</td>
<td>1.18</td>
<td>0.98</td>
</tr>
<tr>
<td>BA</td>
<td>1.39*</td>
<td>1.31</td>
</tr>
<tr>
<td>Graduate</td>
<td>1.39</td>
<td>1.35</td>
</tr>
<tr>
<td>No Degree</td>
<td>0.70*</td>
<td>0.80</td>
</tr>
<tr>
<td>Below 100% of Poverty</td>
<td>1.17</td>
<td>0.49*</td>
</tr>
<tr>
<td>Above 300% of Poverty</td>
<td>1.16</td>
<td>0.79</td>
</tr>
<tr>
<td>Spouse, Not Working</td>
<td>0.27*</td>
<td>0.08**</td>
</tr>
<tr>
<td>Spouse, Working</td>
<td>0.38*</td>
<td>0.43*</td>
</tr>
<tr>
<td>N = 9879</td>
<td>N = 2010</td>
<td></td>
</tr>
</tbody>
</table>

Taking a closer look at some of these variables we see that every additional hour worked by a female MKA increases the chance she will use nonparent care by 4%, compared with a 2% increase for male MKAs. The presence of a spouse or partner not working, and if they do work the number of hours that they work, impact the care decision for both male and female MKAs. If a male MKA has a spouse or partner not working, he is 92% less likely to use nonparent care, while a female MKA is 73% less
likely to do so. Additionally, we can see that for a male MKA having a spouse or partner who works makes him 57% less likely to use nonparent care compared to female MKAs who are 62% less likely to use nonparent care, resulting in a 5% difference.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children 0-5</td>
<td>0.88*</td>
<td>1.15</td>
</tr>
<tr>
<td>Children 6-17</td>
<td>0.86*</td>
<td>1.10</td>
</tr>
<tr>
<td>Age of MKA</td>
<td>1.01</td>
<td>1.14</td>
</tr>
<tr>
<td>Own Home</td>
<td>1.21</td>
<td>1.04</td>
</tr>
<tr>
<td>MKA Hours of Work</td>
<td>1.04**</td>
<td>1.02**</td>
</tr>
<tr>
<td>MKA Nightwork (1=yes)</td>
<td>0.75*</td>
<td>0.67</td>
</tr>
<tr>
<td>Blurred Income</td>
<td>1.00</td>
<td>1.00</td>
</tr>
<tr>
<td>Northeast</td>
<td>0.94</td>
<td>1.18</td>
</tr>
<tr>
<td>Midwest</td>
<td>1.08</td>
<td>1.39</td>
</tr>
<tr>
<td>South</td>
<td>0.99</td>
<td>1.52</td>
</tr>
<tr>
<td>Black</td>
<td>1.21</td>
<td>1.14</td>
</tr>
<tr>
<td>Other</td>
<td>0.75</td>
<td>0.70</td>
</tr>
<tr>
<td>Vocational/Technical</td>
<td>1.22</td>
<td>0.64</td>
</tr>
<tr>
<td>Associate</td>
<td>1.08</td>
<td>1.09</td>
</tr>
<tr>
<td>BA</td>
<td>1.25</td>
<td>1.42</td>
</tr>
<tr>
<td>Graduate</td>
<td>1.21</td>
<td>1.40</td>
</tr>
<tr>
<td>No Degree</td>
<td>0.68*</td>
<td>1.01</td>
</tr>
<tr>
<td>Below 100% of Poverty</td>
<td>1.16</td>
<td>0.59</td>
</tr>
<tr>
<td>Above 300% of Poverty</td>
<td>1.13</td>
<td>0.82</td>
</tr>
<tr>
<td>Spouse's Working Hours</td>
<td>1.01</td>
<td>1.05**</td>
</tr>
<tr>
<td>Spouse Works at Night</td>
<td>0.91</td>
<td>0.76</td>
</tr>
</tbody>
</table>

To further understand these differences, the regressions were rerun by the gender of the MKAs for only those MKAs with a spouse or partner. Results are shown in Table 2. The only significant variables for male MKAs are the hours he works and the hours worked by his spouse/partner. Each hour worked by male MKAs increases the likelihood of using nonparent care relative to parent care by 2% and each additional hour worked by
his spouse or partner increases use of nonparent care by 5%. Each additional hour worked by female MKAs increases her use of nonparent care by 4%, but unlike male MKAs, her spouse or partner’s work hours are not significant in choice of care. Alternatively, the more children in the household, the more likely it is that parent care is used. For example, one more child under the age of 5 decreases the use of nonparent care by 12%. With the presence of a spouse or partner, female MKAs working at night are 25% more likely to use parent care than nonparent care. Finally, female MKAs who have not obtained an educational degree are 32% more likely to use parent care than those with a high school degree.

| Table 3 |
|-------------------------|-------------------------|-------------------------|
| **Variable**            | **Female**              | **Male**                |
| Children 0-5            | 0.81                    | 0.29*                   |
| Children 6-17           | 1.02                    | 0.60                    |
| Age of MKA              | 0.96**                  | 1.01                    |
| Own Home                | 1.06                    | 0.05*                   |
| MKA Hours of Work       | 1.04**                  | 1.08                    |
| MKA Nightwork (1=yes)   | 0.78                    | 0.80                    |
| Blurred Income          | 1.00                    | 1.00                    |
| Northeast               | 1.01                    | 16.19**                 |
| Midwest                 | 1.40                    | 9.25*                   |
| South                   | 0.76                    | 10.95*                  |
| Black                   | 1.04                    | 1.46                    |
| Other                   | 0.85                    | 0.04**                  |
| Vocational/Technical    | 0.73                    | 0.02**                  |
| Associate               | 2.14                    | 0.07**                  |
| BA                      | 2.06                    | 0.05*                   |
| Graduate                | 5.28**                  | 0.02**                  |
| No Degree               | 0.81                    | 0.01**                  |
| Below 100% of Poverty   | 0.92                    | 0.18                    |
| Above 300% of Poverty   | 2.38                    | 0.65                    |

N = 2287  N = 185
Examining the childcare decisions by gender of the MKAs without a spouse/partner (Table 3), we find pretty dramatic differences in what influences the childcare decision for male MKAs. Parent care is significantly more likely to be used by male MKAs based on the presence of more young children and if they own their home. Male MKAs with a high school degree are more likely to use parent care than those with other educational outcomes. The absence of a spouse or partner highlights how much the assignment of care to women in our society impacts childcare decisions made by families by showing that the number of young children, education of the MKA, and region now become important in the decisions of male MKAs. However, decisions of female MKAs remain centered on similar concerns as those of female MKAs with a spouse or partner.

Conclusion

The increased participation of women in the labor force and changing U.S. welfare policies necessitate the understanding the childcare choices of families. This research examines the selection of parent or nonparent childcare by families conditioned on the gender of the primary caregiver. Results show that each additional hour worked by female MKAs increases the use of parent care relative to nonparent care by 4%; for male MKAs, this is 2%. When only MKAs with a spouse or partner are examined, male MKAs increase their use of nonparent care by 5% for each hour worked by a spouse or partner; hours worked by the spouse or partner of female MKAs have no significant effect on the use of nonparent care relative to parent care. Upon examining MKAs
without a spouse or partner, the choice of childcare by male MKAs was influenced by his education, region of the country, the number of young children, and owning a home—all variables that did not previously factor into his childcare decisions.

The results show how important the assignment of care is in influencing the childcare decisions of families. It is clear that her work choices, whether or not she is identified as the MKA, have the most impact on the childcare decisions of families for both female and male MKAs. Although at first glance it looked like the childcare decisions and work hours of female and male MKAs were fairly similarly, the statistical analysis reveals the underlying gender differences in influencing these decisions. When he is the primary caregiver and in a relationship, these results show that his preference is to not to be the physical provider of care and that he is able to successfully negotiate this outcome as demonstrated by the importance of her work hours and not his work hours in choice of care. This shows that his bargaining position in the home is stronger—even when he self-identifies as the primary caregiver, he is able to shirk his care responsibilities. It is clear that his preference is not to be in charge of direct care of children and that patriarchy supports him in assigning care responsibilities to her.

The success of any empirical analysis is contingent upon the data used. Consideration of these research results raises a question about how primary caregivers are identified in the NSAF. The NSAF data has adults self-identify as the most knowledgeable adult of the surveyed child. However, given that 90% of male MKAs have a spouse or partner and that his hours of work have less impact on childcare decisions than his spouse or partner, why he self-identifies as the most knowledgeable adult is not clear. Although the NSAF is more inclusive of childcare concerns than most
national surveys, room for improvement remains. National surveys need to do a better job of gathering information on the cost of childcare and the availability of the various modes of childcare.

This research highlights the importance of examining childcare decisions from a gendered perspective. Care responsibilities are assigned to women in our society and as such any analysis of care that does not incorporate this is incomplete. Additionally, just examining the role of women in childcare is insufficient because it does not explore how men are involved in the care of children. Creating a more equitable distribution of the cost of care requires studying how care is gendered.

Future research should examine how the childcare decisions of families vary by expanding modes of childcare beyond just parent and nonparent care to include relative care, nonrelative care, and center care. Additional exploration is needed on how hours in care arrangements and pay for childcare impact choices about mode of childcare by developing ways to measure time spent in parent care and constructing estimates for cost of childcare for those not asked about the price of childcare. Other possible areas of research will involve including other variables important in the childcare decision such as the importance of trust in deciding on childcare mode, variations in state regulations and funding, hours of availability of care, and location of care arrangements.
CHAPTER 2 NAVIGATING CHILDCARE INSTITUTIONS
IN LARIMER COUNTY, COLORADO

Abstract

The family plays a central role within our society and our economic structure. Historically, one of its key functions has been the provision of childcare—with this essential economic activity primarily the responsibility of mothers. The second half of the 20th century witnessed a substantial increase in the labor force participation rates of women, particularly women with children. This dramatic change necessitated the movement of childcare beyond the institution of the family, resulting in the expansion and creation of new institutions dedicated to the provision of childcare. Today, changes in U.S. welfare policy have increased the need for the provision of childcare to be performed outside the institution of the family.

This paper explores those institutions such as gender norms and childcare representing diverse perspectives of the childcare system in one community, such as directors of childcare centers, members of mothers’ groups, and welfare recipients, offer insight on how families in Larimer County, Colorado handle the childcare problem and the importance of gender in their childcare system.

Introduction

The increase in women’s labor force participation over the last half a century necessitated the creation of institutions other than the family to provide care in our
society. However, today’s families struggle when making their childcare choice to meet their quality, availability and affordability care needs (Blau 2001; Helburn and Bergmann 2002). The 1996 changes to welfare legislation intensified the childcare problem because it required increases in the labor force participation of welfare recipients without addressing the problems faced by working parents (Albelda and Withorn 2002). This childcare problem highlights the trade-off between quality, affordability, and availability parents face to participate in the labor market.

To serve their care needs parents can select from an array of childcare arrangements. A parent may be a full-time caregiver, parents may split care responsibilities, or relatives may provide care. Additionally, there are nannies and babysitters, family daycares—licensed and unlicensed, and childcare centers. Care may also be self-care, school, or extracurricular activities. Table 4 organizes the formal and informal modes of care based on a hierarchy of quality and costs. On average as we move away from self care and babysitter to parent and center care, the quality of care increases along with the opportunity cost associated with that mode of care. Formal care options are available to many families in markets for care that determine the price of a particular mode, while modes of informal care are unique to individual families and primarily have indirect costs.

<table>
<thead>
<tr>
<th>TABLE 4 Modes of Childcare</th>
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<tbody>
<tr>
<td><strong>Informal Care</strong></td>
</tr>
<tr>
<td>Parent Care</td>
</tr>
<tr>
<td>Relative Care</td>
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<tr>
<td></td>
</tr>
<tr>
<td>Self Care</td>
</tr>
</tbody>
</table>
Given all of these possible modes of childcare, what are families choosing? Figure 4 illustrates the diversity in the types of childcare used by families in the United States with 31.68% of families using parent care, 30.73% using center care, 23.52% relying on relative care, and 14.06% using other types of care such as nannies. Looking at the primary care arrangements that parents use, we can see that there is a preference for parent and center. Examining childcare arrangements by income we see that 43 percent of lower income, two-parent families used parent care as their primary source of care versus 26 percent for higher income two-parent families who chose to use center-based care (Sonenstein, et. al. 2002).

![Figure 4 Childcare Arrangements for Children Under 6 Years Old](image)

Source: 2002 National Survey of America’s Families

Although exploring the outcomes of the childcare decision for families provides insight on what modes of care they are selecting, it does not inform us of the process used to make this choice. To analyze the process of care we need to understand the following questions: How do families decide which type of care is best for them? Who is
providing daily care for children? What organizations have emerged to offer childcare services? How do we as a society organize the provision of care for our children? How do families navigate our childcare system? How is the childcare decision unique for different family types?

This paper addresses these questions by taking a critical look at the childcare problem through personal interviews with individuals embedded in the childcare institutions of Larimer County, Colorado. It works to understand how families navigate childcare institutions to cope with the childcare problem, how the childcare problem is a function of our social construction of gender, and how the childcare decision is unique for welfare recipients.

The Childcare Problem

Current literature on the childcare decisions of families generally discusses it as the childcare problem, defined as the difficulty parents have in acquiring quality and affordable childcare. (Bergmann and Helburn 2002; Blau 2001). This problem is then analyzed as a labor-leisure decision of women with primary attention on responsiveness to price changes in the cost of care and the effectiveness of childcare subsidies (Blau and Tekin 2003; Blau and Tekin 2001; Kimmel 1998; Connelly 1992; Powell 2000). For example, I find in Chapter 1 that the hours worked by females in two parent families primarily determine if parent care or another mode of care is used for families with both female and male primary caregivers. This model offers insight into what choices families are making and how changes to prices and incomes effect these decisions. However, this research stands to gain from a feminist and institutional perspectives as they allow critique of the role of gender and of the process of making a decision about childcare.
The social construction of gender in our society assigns the responsibility of care to women and supports the gender division of labor in the home and the market (Blau, Ferber, and Winkler 2006; Bergmann 1986; West and Zimmerman 1987). Women’s responsibility of the care of children restricts the choices they can make. When women decide to work outside the home, it becomes their responsibility to secure care for their children when they are unable to provide themselves. They also become the ones to worry about the well-being of their children when cared for by another (Badgett and Folbre 1999; England and Folbre 1999; England and Folbre 2003).

Because women have been and continue to be the primary caregivers, they frequently have a better understanding of the need and importance of care. This is often misinterpreted that women are naturally better caregivers. It is perceived that women are “choosing” to be caregivers, however, given our social construction of gender that assigns the responsibility of care to women, how much choice do women have in being caregivers (West and Zimmerman 1987; Lapidus 2004). Additionally, women are placed in a double bind when it comes to care. Because they have been socialized to care, they are unable to walk away from their care responsibilities (Badgett and Folbre 1999). Although women have entered the paid labor market, their care responsibilities are still present. Providing care is costly to women as confirmed by the gender wage gap and explanations for it, while men and firms benefit from women doing care (Waring 1988; Bergmann 1986; England and Folbre 1999; England and Folbre 2003; Folbre 2001; Hochschild 2002).

Our social construction of gender is at the center of the childcare problem and thus, using a gendered perspective helps in understanding why parents struggle to find
quality, affordable care for their children. Our social norms associated with gender impact the care decisions of families and their decision making process. The following further examines the childcare decisions of families by exploring the childcare system of one community.

**Studying the Process of Choosing Childcare**

Studying the process of how parents choose a childcare arrangement requires moving beyond quantitative research methodologies. Qualitative research allows for a more personal and real-world look at how childcare decisions are made by families. “While specialized surveys may lend themselves to standard econometric techniques, other more qualitative methods necessarily place the researcher outside the economic mainstream” (Macdonald 172). Hancock (2002) provides a good example of this in her qualitative research that tells the stories of three families on welfare and their experiences over time. Her work shows that knowing their stories provides a personal aspect that is not included in statistical models. Readers can learn such important information such as personal histories of the families, the impact of the political climate, and the role of institutions in the family’s struggles.

Using a feminist, institutional pedagogy, I explore the childcare decision-making process from the perspective of a parent searching for childcare. As a parent searching for childcare, I would have to contemplate the following questions: Where would I get my information? How would I find quality, available, and affordable care? How would the choice of other parents be different? What institutions would I interact with? Who would I consult with in making my decision? These questions guided my scholarship in understanding the process of choosing childcare.
In the summer of 2006, 30 interviews were conducted with individuals connected to a range of childcare institutions in the Fort Collins and Loveland metropolitan area in Larimer County, Colorado to answer these questions. Interviewees were directors of childcare centers, welfare recipients, home care providers, and members of organizations that contribute to the care of our children such as mothers’ groups and the county referral center. Interviewees were selected to represent the diverse institutions that families may encounter in selecting childcare. All interviewees were identified the same way families would find them by word of mouth, newspaper, internet, and the local childcare referral center.

Located along the Northern Front Range of the Rocky Mountains in Colorado, Larimer County has a population of approximately 265,000 and roughly 31,500 family households with own children under the age of 18. Of these family households with children, 71.5% were married-couple families, 24.0% female householders with no husband present, and 4.5% male householders with no wife present (American Fact Finder 2005). In 2006, Fort Collins was ranked first in Money Magazine’s “Best Places to Live” for its “great schools, low crime, good jobs in a high-tech economy and a fantastic outdoor life” (Money 2006). The community of Larimer County and its preferred living amenities provide an appropriate setting to explore our childcare system and addressing the question of how a community identified as a “Best Place to Live” cares for its children. Although results are specific for Larimer County, Colorado, they offer a framework for understanding the breadth of our childcare institutions and how the childcare problem is created.
Experiencing Childcare Institutions

The following reflects the range of responses and perspectives of the difficult decisions parents face in choosing a childcare arrangement as expressed by members involved in Larimer County’s childcare system. These conversations share the story of this community’s childcare problem. These stories highlight the complexity of the childcare problem and the importance of gender in the childcare system.

Our exploration of the childcare problem in Larimer County, Colorado begins with an examination of the availability of formal childcare and how parents receive information on the local childcare system. Approximately 37,000 children under the age of 12 reside in Larimer County and roughly 400 formal childcare providers serve this community. In May of 2003, an estimated 6,900 full-time equivalent childcare care slots were utilized with 17 percent of slots being provided by unlicensed providers (Economic Impact 2003).

With 37,000 children in need of care and 6,900 childcare slots, families must be using other modes of care outside of the formal childcare market to meet some of their care needs. The difference between those children in need of care and the slots used reflects the importance of examining parent care and informal arrangements when studying childcare. For example, only 63.2 percent of families with children under the age of 6 years have all parents in the labor force (American Community Survey 2005). Generally, the availability of different modes of childcare was not a concern in most of my interviews. However, it was noted that some centers have waiting lists, that there are limited choices for infant care in this community and that only one center offers evening and weekend care.
Families are receiving assistance in their childcare decisions from various formal organizations connected to the local childcare system. One formal organization that exists to help connect members of Larimer County’s childcare system is The Child Care Resource and Referral Program of Larimer County. It assists families by matching them with lists of licensed centers and home care providers that meet specifications provide by the families, but they do not recommend providers. Additionally, they educate parents on what questions to ask care providers to help families find a caregiver that best fits their needs. Families can access a database containing information on childcare providers in Larimer County maintained by the Childcare Resource and Referral Program by phone, in person, or online.

This organization acts as a resource broker (Small 2006) for families by providing them information about Larimer County’s childcare system, such as cost of care and location of providers. However, many of the individuals, parents and providers, that I spoke with expressed a broad range of knowledge about this organization. Many did not know of the referral service and others did not have a favorable view of this organization because it did not make recommendations. Others expressed that it provides a central place for information on childcare. Even with this valuable community resource, many interviewees discussed the importance of their social networks (family, neighbors, co-workers, etc.) as a trusted source for information on childcare and where they go for information on childcare.

On its own finding care does not appear problematic in this community until care is characterized by its affordability and quality. In Larimer County, families and organizations are restricted by the cost of childcare—a concern raised in all of the
interviews conducted. Table 5 contains information on the market cost of childcare in Larimer County in 2006. Full-time weekly center care for children 2-5 years averages $164.72 and that same care is $135.06 in family childcare homes. “Affordability is a huge issue. We didn’t even consider a [center] just because of the cost,” expressed a mother who became a home care provider to ensure her child had affordable, quality care.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Min $</th>
<th>Max $</th>
<th>Avg $</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-12 months</td>
<td>150.00</td>
<td>273.00</td>
<td>223.80</td>
</tr>
<tr>
<td>1-2 years</td>
<td>125.00</td>
<td>273.00</td>
<td>193.23</td>
</tr>
<tr>
<td>2-5 years</td>
<td>70.00</td>
<td>246.00</td>
<td>164.72</td>
</tr>
<tr>
<td>5-6 years</td>
<td>70.00</td>
<td>246.00</td>
<td>155.49</td>
</tr>
<tr>
<td>6+ years (full day)</td>
<td>115.00</td>
<td>210.00</td>
<td>156.24</td>
</tr>
<tr>
<td>6+ years (B/A school)</td>
<td>10.00</td>
<td>125.00</td>
<td>83.50</td>
</tr>
</tbody>
</table>

We can understand this mother’s labor-leisure decision by comparing the cost of care to earnings information. Table 6 provides information on the cost of care and income using the self-sufficiency standard. The self-sufficiency standard is a measure of the income needed by a family type to meet all of the living expenses in a given location without public or private assistance. These are expenses that would be considered a normal part of everyday life such as childcare. Using this model, a single parent of a preschooler
would need to earn $31,771 annually to cover the average cost of living in Larimer County and 25% of this income would go to childcare expenses.

| TABLE 6: The Self-Sufficiency Standard for Fort Collins-Loveland, CO MSA, 2004 |
|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Monthly Costs   | Adult           | Adult +         | Adult +         | 2 Adults +      | 2 Adults +      |
|                 | Adult preschooler | infant          | infant          | infant          | preschooler     |
| Housing         | 597             | 739             | 739             | 739             | 739             |
| Childcare       | 0               | 663             | 1253            | 1253            | 1010            |

Self-Sufficiency Wage

<table>
<thead>
<tr>
<th></th>
<th>Hourly</th>
<th>Monthly</th>
<th>Annual</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$8.27</td>
<td>$1,455</td>
<td>$17,456</td>
</tr>
<tr>
<td></td>
<td>$15.04</td>
<td>$2,648</td>
<td>$31,771</td>
</tr>
<tr>
<td></td>
<td>$19.43</td>
<td>$3,420</td>
<td>$41,043</td>
</tr>
<tr>
<td></td>
<td>$11.19 per adult</td>
<td>$3,938</td>
<td>$47,261</td>
</tr>
<tr>
<td></td>
<td>$10.33 per adult</td>
<td>$3,636</td>
<td>$43,637</td>
</tr>
</tbody>
</table>

Childcare as Percentage of Expenses

|                   | 0.0%   | 25.0%  | 36.6%  | 31.8%  | 27.8%  |

Source: Pearce 2004

Given the above information, we can easily see that childcare costs are a significant part of family budgets, regardless of family type. The self-sufficiency standard provides estimates for how much income families need to meet all of their expenses. However, many families have income levels that fall short of the self-sufficiency standard (Pearce and Brooks 2001). In Larimer County, 11.7% of children under 5 years of age are living below the poverty level and 31.8% of single parent households headed by females have fallen below the poverty level in the past 12 months (table 7). This is not surprising when the median earnings for women of $33,000 a year are compared to the self-sufficiency standard.
Our social construction of gender informs us that single parent households are more likely to be female and that women generally earn less than men in the labor market. In this community, women are making on average 68.8% of men’s earnings. When wages fall short of self-sufficiency standards, families must either seek outside help or cut corners. Given that help is often difficult to get and there is not enough available (Giannarelli 2003), many families are likely to cut expenses, such as by selecting lower quality childcare.

<table>
<thead>
<tr>
<th>TABLE 7: Income of Families in Larimer County, 2005</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Families with Income Below Poverty Level in the Past 12 Months</strong></td>
</tr>
<tr>
<td>All Families</td>
</tr>
<tr>
<td>Married-couple Families</td>
</tr>
<tr>
<td>Female householder, no husband present</td>
</tr>
<tr>
<td>Children under 5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Earnings and Family Income</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Median Family Income</td>
</tr>
<tr>
<td>Median earnings for male full-time, year round workers</td>
</tr>
<tr>
<td>Median earnings for female full-time, year round workers</td>
</tr>
</tbody>
</table>

Source: 2005 American Community Survey

Many of the stay-at-home parents and home care providers cited the cost of care as the primary issue in their childcare choice illustrating their understanding of the cost of care. Organizations that support families in providing care are also challenged with how to assist families with the cost of care because their resources are limited as an organization. This director articulates this dilemma in discussing that trade-off between addressing childcare needs of parents and other program offerings.

“For us as an organization, part of our struggle is do we take a dollar that we would normally use for general operating support and move it over into childcare.”—Director of supporting organization
Providers also struggle with offering high quality, affordable care to parents and operating as a successful business as the following interviewee highlights.

“For all parents the cost of care is a tremendous challenge. It can be up to 30% of their actual income...you have lots of parents struggling to pay for the cost of care and then you have the cost of what it is to provide the care...high quality care costs a lot of money. It is a real juggling act for providers to provide high quality care and stay afloat.”—Director of supporting organization

All interviewees regardless of their role in the childcare system expressed their primary concern as finding and providing quality, affordable childcare. Although the childcare organizations vary in their specific services, all were focused on ensuring parents had quality, affordable care. However, the ability of the formal childcare organizations to succeed in their goal is restricted by how we value of care in our economy.

“I think our community is focused on providing quality childcare in Fort Collins/Loveland in Larimer County. I think because that is a focus that there is more attention drawn to early childhood and so we are able to provide better childcare.”—Director of a childcare center

One program designed to make quality care affordable to low-income parents is the Colorado’s Child Care Assistance Program (CCAP). As of July 2006, the Child Care Assistance Program (CCAP), a government program providing financial assistance with childcare for low-income families, was serving a total of 694 households in Larimer County. In addition to making care affordable, government assistance generally means greater regulation of the childcare that parents use because services providers must meet government requirements to be eligible for CCAP funds. These requirements are designed to enforce minimum standards for the quality of care. For example, if CCAP
recipients wanted to use an unlicensed childcare provider, then CCAP interviews and does a background check on the provider prior to approving them to receive CCAP funds. Like parents, this program is concerned with parents accessing affordable, quality care. Even though everyone desires the same outcome, limited resources make this reality difficult for all.

“I feel like people are supportive and concerned and we all want the same thing and that they have tough choices to make about their resources.”—Employee of supporting organization

In 2003, Larimer County CCAP was forced to make substantial cuts in the childcare assistance they provided because their budget did not increase as fast as the cost of care and the number of families eligible for assistance. Budget restrictions forced them to reduce the number of eligible families because changes to welfare laws required welfare recipients to work and increased the demand for childcare assistance. “…The pie isn’t any bigger and so the more Colorado Works [welfare] families you serve the less low-income families you can serve. It’s just a shifting of priorities…” explained one interviewee.

Previously families with income below 185% of the poverty level were eligible for CCAP, now families must be below 140% of the poverty level. Additionally, students were no longer considered in an eligible activity—this impacted 84% of the population being served by CCAP. For one mother, this resulted in her turning to TANF to meet her childcare needs.

“Basically with students we are no longer allowed to participate in that program [CCAP] about 2 years ago and I really had no other option than to get onto TANF. Prior to that I was going to school full-time and working full-time and my daycare was covered by CCAP…Once CCAP was
taken away, I couldn’t afford to go to school and pay for childcare because our financial aid systems does not provide nearly enough for what you need as a full-time student.”—Mother, student, TANF recipient

Providers were also impacted with a decrease in paid absence days and a year without rate increases from CCAP. To avoid such drastic cuts in the future, the CCAP budget is now routinely reviewed with small changes in eligibility and assistance as needed to meet budget restrictions (CCAP interview). Many of the individuals interviewed expressed their concern and dismay for the 2003 CCAP cuts. They understood that CCAP did not have the funds to continue providing services as previously offered, but they were frustrated that parents working to improve their economic situation through higher education and low-income work were not being supported.

The challenges of the CCAP program are a reflection of how our society responds to the childcare problem. The changes to CCAP were a product of national welfare reform legislation that considered welfare recipients to be poor decisions makers and unwilling to work (Albelda and Withorn 2002). The childcare problem of welfare recipients in Larimer County is a challenge that all families face, but the limited resources of welfare families makes it more difficult for them to overcome this obstacle on their own.

A Gendered Childcare System

In navigating the childcare institutions in Larimer County, the gendered nature of the childcare system became very visible. Men were generally peripheral figures within
the provision of childcare within the system. None of the organizations I spoke with currently had male employees and no one was able to refer me to an organization in the community with a male employee. Men were not just invisible as employees, many organizations expressed that they had little interaction with fathers. For example, of the 1,500 families assisted by the referral center roughly 3% of those seeking assistance for their families were fathers. No fathers participated in any of the mothers’ groups and a fathers’ group did not exist. The limited role of men in this community’s childcare system demonstrates how gender norms have assigned care responsibilities to women. For example, in an interview with a stay-at-home mother in her home, she had made arrangements with her partner for him to supervise the children during our discussion. However, she was continually distracted by care responsibilities because even though he was in the home he was not following through with their arrangement.

“I think he could do a better job. I feel like I always have to tell him ‘can you go change him,’ ‘can you put him in the tub,’ ‘can you get him out of the tub,’ ‘can you give him a drink,’ just like tonight ‘can you please keep them outside’—do you not see what they are doing? I just feel like he is not observant...he does not see the need of what’s going on. I am the one that gets up in the middle of the night and not him and even on the weekends, granted he’s working during the week, but when it is 6:50 and I have already been up at 4 and 2. He could get up a few minutes before that alarm and just deal with them for a minute. It doesn’t happen. I think he takes me for granted—that I am home all day...” –Stay-at-home and member of a mother’s group

This responsibility of care that women have and the ability of men to avoid it did not go unnoticed by the women interviewed. When asked about the role that fathers play in the care of their children interviewees expressed the following.
“When my husband wants to be, he is very helpful…I think I am slightly devalued as a person because I choose to stay home and not earn a salary now…I don’t think he resents it or anything but I think in his mind I am less than human in a certain respect or not as worthy as I once was. And so the expectation is that I handle everything related to the kids and it’s kind of a [whew], you know, get down on your knees and praise him when he stands up and he does something that anyone else could do, you know. Um, and I don’t know if the understanding is always there, especially when I am exhausted and frustrated or had a bad or sick—there’s a good one—last time I got sick my husband said ‘I’m so sorry you’re sick. I’ll stay home today. You can take a nap.’ He fell asleep on the couch for 4 hours. I was sick. I didn’t get a nap.” –Stay-at-home mother and member of a mother’s group

Although fathers participate in the care of their children, the responsibility belongs to the mothers (Badgett and Folbre 1999; West and Zimmerman 1987; Self 2005). These women express how it is expected they will do the carework, but this is not an expectation of fathers. The emotion in their words shows the frustration of bearing the burden of care. They also articulate how challenging care work is. Unfortunately, the responsibility of care and the work these women do is not seen as having value in the home or the market.

“It’s hard as a woman because you are constantly making that decision that I want the social interaction, I want to work, I want to be a contributing member of society…there is a constant inner conflict I think of every mom—whether they’re working or not working—should I be doing one or the other.” –Stay-at-home and member of a mother’s group

“America would want us in the work force. We are bright. We are extremely hard-workers. We are computer literate. We multi-task…This country would go to pieces if women stopped working.” –Stay-at-home and member of a mother’s group
Their statements show they recognize that care and women are devalued in our economy. They know that their work is “not counted” and that being responsible for care is economically costly (Waring 1988; Bergmann 1986; England and Folbre 1999; England and Folbre 2003; Folbre 2001; Hochschild 2002). Their dialogue shows the social perception that carework is not considered work.

Men were not only absent from the process of caregiving, but sometimes they faltered in their role as breadwinner as well. For multiple women, their reliance on TANF was connected to the absence of childcare support. As this mother articulates,

“I actually have turned off TANF. This is the first month I haven’t received it because I am supposed to be receiving child support for the first time in three years. You can’t have both, which is fine as I am getting about three times as much in child support than I did with TANF."

Men’s contributions to the care of children, whether it is doing carework or covering the cost of care, greatly impacts the well-being of women.

Even though I sought out male interviewees, I was only able to arrange a discussion with one, a single father on welfare. The father I spoke with did not feel that he received the same support that women receive ranging from financial assistance to coping as a victim of domestic violence to enforcement of child support payments. “I feel I’m not given a fair shake…You rarely hear how we are going to give the male part help,” articulated a single father and TANF recipient. He recognized that he was not the norm in the provision of care and that gender norms assign women the responsibility of care. “You rarely see this, you know, where the fathers are taking steps on taking care of their children…I’m trying to be different.”
However, he knew that taking on the feminine role of caregiver meant stepping out the box of masculinity. “I encourage and I feel strongly that, you know, a male can do it also—just as well as a female...just give him the chance and, you know, the resources are out there...just ask...don’t feel ashamed if you have children...think for your children and not just yourself. ” His experience illustrates how we are uncomfortable with men doing care and how we reinforce gender norms with our care expectations (Murray 1996; Rolfe 2006; Sargent 2005). Sharing the responsibility of care between women and men is one way to address the burden of care. Shared care responsibilities can improve the economic well-being of women, enhance the care received by children, and enrich the lives of men.

**Conclusion**

Conversations with individuals imbedded in the childcare institutions of Larimer County, Colorado show us that we need to reexamine how we care for children in our society. Quality, affordable childcare is a priority for families and organizations in this community, but this concern is not visible in an economic system constructed by the pervasive patriarchal, capitalist ideology in our society. This ideology does not prioritize care or gender equality. However, even within this framework, an argument can be made for the positive externalities associated with well-cared for children and combined with the gender equity gains of reorganizing the provision of childcare offer a strong argument for government intervention in the childcare market (Blau 2001; Helburn and Bergmann 2002; Folbre 1994).

Our economy needs to balance competition, cooperation, and care (Nelson 1996; Folbre 2001; Hochschild 2002). Currently families are competing with one another in
our market system for quality, affordable, available childcare. This competition is a win-lose game for families and society. Those with adequate resources win and those without lose. The common goal of the childcare organizations in Larimer County illustrates a place for cooperation in our economy. Care is an essential component of our economy that is undervalued. We need to reexamine how we value care and women to address the negative consequences of the assignment of care to women.

In 2003, the Early Childhood Council of Larimer County along with the Early Childhood Council of Boulder County commissioned a study of the economic impact of early care and education in Larimer County. The total economic impact of the early care and education industry in Larimer County in 2002 was estimated to be $302 million--$48 million from the direct and indirect impact of early care and education providers and $253 million from additional disposable income of parents who would have to forgo wages without the early care and education industry (Economic Impact 2003). The economic impact report commissioned by the Early Childhood Council of Larimer County is one step in seeing the value of care because it examines care from a market perspective. However, the report failed to examine the assignment of care to women and to address the economic costs associated with poor care.

We need to move beyond the ideology of “economic man” in order to value care, which requires interdependence and altruism.

“I think what will have to happen before childcare issues are every addressed—it is an issue of what our country’s priorities are and where we put our resources.”—Director of supporting organization

The navigation of childcare institutions in Larimer County, Colorado shows how families experience the childcare problem and how the social construction of gender is a
component of this problem. As a society, we need to question why the childcare problem exists and our attempts to solve it.

“I feel that we live very individual lives and if that somehow people can continue to work together to come up with holistic ideas of how to make solutions and brainstorm and think together to keep their truest hearts dreams in consideration that it moves history.” –Mother and former TANF recipient

Do our current childcare institutions best serve the needs of families and if not how might we develop a better system of childcare? Moving our research questions beyond a focus on the outcomes of the labor-leisure decisions of women and the price of childcare is one step to determining the best way to organize how we care for children.
CHAPTER 3 CHILDCARE IN PERSPECTIVE:
THE SYNERGIES OF WORK AND FAMILY

Abstract

In contemporary U.S. society, parents struggle to balance the demands of work and family. This balancing act is a result of the constraints parents face from the context of their lives such as workplace policies and social expectations about gender roles. A key component for parents in managing the work and family conflict is the childcare they use.

This paper explores the inclusion of the family in mainstream and feminist economic theory and critiques our understanding of the childcare decisions. I offer a conceptual framework for the childcare choice in context. This contextual analysis explores how awareness of constraints from household structures, institutions and policies, and culture, customs, and norms provides enhanced knowledge of the realities of childcare decisions and challenges our understanding of the work and family conflict.

Introduction

"The economically independent mother, widened and freed, strengthened and developed, by her social service, will do better service as mother than it has been possible to her before. No one thing could do more to advance the interests of humanity than the wiser care and wider love of organized human motherhood around our babies. This nobler mother, bearing nobler children, and rearing them in nobler ways, would go far toward making possible
the world which we want to see. And this change is coming upon us overpoweringly in spite of our foolish fears."
Charlotte Perkins Gilman, *Women and Economics* (1899)

Over one hundred years ago, Charlotte Perkins Gilman (1860-1935) argued that economically independent women would be better mothers and that those responsible for the care of our children should be trained and educated to improve the care children receive. Her work resonates with discussions of childcare today because she addresses the cost of care, concern for high quality care, and the predominant role of women as caregivers in our society. Since Perkins Gilman (1889) wrote her essay, *Women and Economics*, she would likely be excited by the economic progress that women have made in becoming economically independent, but disappointed that we have not better organized the care of our children and concerned that this failure continues to create negative economic outcomes, particularly for women.

Not enough attention has been given to exploring what childcare structure will ensure that all families have access to quality care, are able to pay for childcare, and over who should be responsible for childcare. Currently, U.S. childcare policy generally considers childcare an individual choice of the family, and thus, not a place for government intervention. To complicate matters, our social construction of gender has placed this responsibility primarily on women. Combined, these perspectives make the childcare problem one that is perceived to only affect individual women in the private sphere and, therefore, it is up to them to find a solution.

The following explores how our understanding of the childcare problem and policies are influenced by the economic analysis that we use to explain this choice. Section one analyzes childcare policy in the United States from competing economic
views and how the perspective we use changes our understanding of childcare decisions.

Section two explores our policy approach to the childcare problem and what the goals of childcare policy should be. Finally, I develop a conceptual framework of the childcare choice in context and examine how this model changes our understanding of the childcare problem and possible solutions for it.

The Childcare Problem

The childcare decision of parents throughout the United States is like many economic decisions in that it is centered on the ability of families to use the resources they have to fulfill their preferences. The struggles families face in making this decision are labeled “the childcare problem” and is characterized by the trade-offs families face between the quality, affordability, and availability of childcare (Blau 2001; Helburn and Bergmann 2002). Table 8 provides an overview of each of these categories and their unique characteristics that create the choice set available to families. Although the childcare problem is created by the interactions of availability, affordability, and quality, I begin with a discussion of each individual component of the problem.

<table>
<thead>
<tr>
<th>TABLE 8: Components of The Childcare Problem</th>
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<tbody>
<tr>
<td>Availability</td>
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<tr>
<td>Number of care providers</td>
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<td>Number of (open) slots</td>
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<td>Types of care providers</td>
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Availability is one component of the childcare problem that is defined by the ability of parents to access childcare. The supply of childcare in the local market influences the availability of childcare by determining such characteristics as the number...
of care providers, types of care providers, the number of (open) slots, and the time that centers are open (Riley and Glass 2002; Blau 2001; Helburn and Bergmann 2002). Regional variations will exist in all of these. For example, a family that lives in a small rural community may reside in a region that has one formal childcare center, but they live near relatives. Another important dimension of availability is the needs of parents such as the distance of childcare from their home and their workplace, what time of the day is care needed, and do they have specific childcare needs (i.e., infant care, child health needs) (Folk and Yi 1994).

Like availability, affordability is a multi-dimensional category. One aspect of affordability that families often confront is whether or not both parents can or should work outside the home as determined by their family’s income and wealth (Camasso and Roche 1991; Folk and Beller 1993; Blau 2001; Helburn and Bergmann 2002). For example, some families may not be able to afford to have both parents not in the paid labor force. For other families, it may not make financial sense to have a second parent in the paid labor market if their secondary income is less than or equal to the cost of childcare. Childcare is also made more affordable for families from transfer payments from the government and employers, and from in-kind income earned by trading services with others (i.e., grandparents watch children in exchange for having their lawn mowed) (Hansen 2004).

Quality care is a complex component of the childcare problem because different perceptions of what quality care is and difficulties in measuring it. Parents often place a premium on trust and safety (Vandell and Wolfe 2000). Their first priority is being confident that their child will not be harmed by the childcare used, but beyond this, there
is a range of characteristics that quality care may possess (Johansen, Leibowitz, and Waite 1996; Blau 2001; Helburn and Bergmann 2002). First, consideration is often given to whether the care provided will correspond or conflict with family values. Parents want their children to develop their perspectives and lifestyles, such as preferring care providers with similar religious beliefs. Other aspects of quality care important to parents are the staff:child ratio, the training of providers, and adherence to childcare regulations (Riley and Glass 2002; Blau 2001; Helburn and Bergmann 2002). Finally, quality care should be developmentally effective for the child by being educational and engaging (i.e., television is considered a bad babysitter).

The childcare problem centers on the struggle to obtain childcare that meets expectations related to all three components: quality, affordability, and availability. The interactions of these three categories reflect the choice set for a family in making the childcare decision. The importance of each component in the childcare decision is dependent on the distinct challenges individual parents face.

Figure 5 is a visual representation of the childcare problem and illustrates the interactions of quality, affordability, and availability. Each component of the childcare problem is a circle showing the family’s choice set for that category. Combining the choice sets for each component, we create the childcare choice set (A) and can visually see the childcare problem faced by a family. The childcare choice set (A) represents the childcare options available to the family that meets all of their affordability, quality, and availability requirements. All other areas are possibilities, but they do not fulfill all the childcare requirements of the family. For example, area B meets affordability and quality preferences, but not availability needs of the family (i.e., grandparent care that is free and
considered high quality, however, located in another state). The childcare problem is that families have little choice when making the childcare decision because of the limitations created by combining quality, affordability, and availability needs.

FIGURE 5: The Childcare Choice

The bigger the childcare problem is for a family the smaller the overlap of the components (represented by the change in the size of A from Figure 5 to Figure 6). Figure 6 presents an alternative childcare choice that a family may face. This family is limited more by affordability than the other components. Once again, area A corresponds to the childcare choices that meet all their affordability, availability, and quality needs. However, the affordability restrictions faced by the family limits the choices that they may make. This may encourage a family to sacrifice one of their availability or quality needs. For example, a family could trade-off quality care and prioritize affordability and availability to enlarge their childcare choices, represented by area C.
The childcare problem is uniquely defined by the needs of each family. However, the majority of families in the United States are faced with this problem of limited choice in their childcare decision. Addressing this problem requires understanding how family preferences for affordability, quality, and availability are formed and working to increase the overlap between these components enabling families have greater selection in the childcare choice.

_Economic Analysis of the Childcare Problem_

Economic analysis of childcare decisions of families begins by examining how economists approach the family as an economic unit. Historically, the family and economic decisions made within the family have been pushed to the margins of economics, and sometimes outside the realm of the discipline deemed more appropriate for sociologists and anthropologists. Much of this exclusion of the family has to do with
the focus of economics on the individual and the market, while the family centers on connectedness and the home. Our capitalist economic system and neoclassical economic theory emphasize competition and individualism and do not place a priority on care and cooperation within the economy (Nelson 1996; Nelson 2006; Folbre 2001; Eisler 2007; Barker and Feiner 2004; England 2003).

Some economists have worked to provide insight into the functions of the black box that has historically been the family in economic analysis. Noble Prize winning economist, Gary Becker, sparked this exploration of the family from a mainstream economic perspective by applying standard economic models and methodology to such decisions as fertility and marriage choices. Additionally, feminist economists, such as Nancy Folbre and Julie Nelson, have also worked to include the family within the scope of economic analysis using a feminist pedagogy. The following section explores the economic analysis of family decisions in mainstream and feminist economic thought and how these approaches critique the childcare problem.

Neoclassical economists frequently define economics as the study of the allocation of scarce resources among unlimited human wants. The focus of analysis is on markets, the individual and economic growth (Eisler 2007; Stilwell 2002; Hausman 1994). At the heart of this economic story is *homo economicus*, an individual who is rational, independent, self-interested, acts by choice, and utility maximizing, and he is the central character for the models constructed in neoclassical economic analysis (Nelson 1996; Nelson 2007; England 2003).

Positive economics underlines the economic models used to understand the decision-making of economic man. In his article “The Methodology of Positive
Economics,” Friedman (1994) argues that economic theory does not need to exactly replicate reality as long as we act as if the theory suggests, and thus, making the theory an accurate predictor of our economic decisions. If theory accurately predicts results and another theory does not exist that is a better predictor, then the assumptions are irrelevant regardless of how (un)realistic they are. Becker (1993) applies this methodology of the rational, utility maximizer to the family by suggesting families act as economic individuals that make decisions as if they compared calculations of the marginal benefit and marginal cost of their choices.

This perspective of families as rational, self-interested individuals enables the use of consumer choice models to analyze decisions of the family. This model examines how individual preferences as predetermined by homo economicus are combined with individual constraints created by prices and income to produce a utility optimizing outcome. From this model, we learn the optimal choice for a rational, self-interested individual with given preferences and a budget constraint. Unfortunately, it does not inform us of how preferences are formed and it considers constraints only in the form of prices and income. This approach of applying the standard consumer choice models to family choices has been extended to the analysis of the childcare decision of families.

From this perspective, the primary role of the family is as a consumption unit in mainstream economic theory and included in its consumption habits is the purchase of children as a result of the utility maximizing behavior of parents. This is reflected in models that turn the childcare decision into a numerical cost-benefit analysis done by rational, self-interested consumers with given preference sets. For example, significant research on the childcare decisions of families studies connections between the labor-

This method of analysis explains the childcare problem with market failures explain the childcare problem. One reason why market failure is argued to exist is that parents have incomplete information when making childcare decisions (Blau 2001). If families do not have accurate information about the quality, affordability, and availability of the different childcare possibilities, then it is difficult for them to accurately complete cost-benefit analysis of their childcare options. To address this market failure, families need to be provided with complete information.

A second market failure contributing to the childcare problem is externalities (Blau 2001). This argument focuses on the positive externalities associated with children being well cared for (i.e., higher worker productivity, healthier population) and the negatives externalities associated with poor childcare outcomes (i.e., higher crime rates, higher unemployment). The externality perspective of the childcare problem argues that the outcomes determined by the individual choices of families do not correspond to the outcomes preferred by society as a whole. From this perspective, the solution to the childcare problem is for families to internalize the social costs and benefits of their childcare decisions by subsidizing the use of high quality childcare or taxing their poor decisions. These incentives will help align the individual choices of families with the preferences of society.

Both of these market failure perspectives argue for government intervention to correct the childcare problem. However, market failures are not the only possible
explanation for the childcare problem as expanding information and accounting for externalities does not necessarily expand the choice set available to families. The childcare problem can also be viewed as the dilemma of scarcity present in all economic decisions, and as such, the childcare problem is an individual problem of families. Their choice is a direct result of their quality, affordability, and availability preferences and the resources available to them—they are acting like *homo economicus*. This argument advocates that markets are producing efficient outcomes in the childcare market, based on the rational choices of families. Families could change their preference set, their consumption choices, or work to adjust their resources if they are unhappy with their childcare options. This view of the childcare problem suggests that any government interference in the childcare choice will create inefficiencies, rather than improve efficiency, by interfering with the utility maximizing decisions of rational, self-interested individuals.

All three of these perspectives of the childcare problem offered by mainstream economists are focused on the choices of families as determined by their given preferences. Primary concern is for maintaining individual choice and efficiency, while working in the realm of scarcity. We now turn to an exploration of how feminist economists analyze the family’s childcare decision and their understanding of the childcare problem.

Feminist economists begin with a pedagogy that acknowledges the historical and contemporary systems of oppression present in our society. A commonality of all feminist economists is the perspective that the feminine is devalued within society and the inclusion of gender is necessary in economic analysis because women and men
experience the economy differently (Barker and Feiner 2004). This approach establishes a solid basis for questioning mainstream economic assumptions about the economic individual and the outcomes of models based on those assumptions. Feminist economists have greatly added to economic thought by offering an alternative methodology focused on inclusion. The following discussion focuses on key contributions of feminist economists relevant to the study of the economics of the family and their childcare decisions.

Feminist economists examine the economy through a gendered perspective and this changes their understanding of economics and the economy. For example, Julie Nelson (1996) developed a “gender-valued compass” to explain the gendered nature of economic man and the limitations of him. Using Nelson’s gender-valued compass, it is clear how economics associates high value with masculinity and low value with femininity and how this view limits our understanding of economics. Studying economics through a gendered lens gives us a more complete picture of what economics is. It highlights how topics and issues important to women have been marginalized in masculine mainstream economics (Barker and Feiner 2004).

A gendered lens makes visible the different experiences of women and men in our economy and how this effects the creation of economic policy. In 1986, Barbara Bergmann published “The Economic Emergence of Women” and critically examined the role of women in the economy and the value of their work. For example, her chapter on the job of housewife evaluates this job as if it were any other job by exploring pay, advancement opportunities, work requirements, and occupational changes over time. She argues that women are moving away from this traditional occupation because of the
inherent risks associated with this job stemming from the devaluation of women and their work in our economy.

Marilyn Waring (1988) highlights how the exclusion of nonmarket work in measures of economic productivity results in the exclusion of women’s needs from important policy decisions. This is problematic because it leads to a misrepresentation of how the economy is doing, who is doing work, and who should benefit from policy. This devaluation of women’s work is important in our analysis of the childcare decision of families because the way we value the work of caring for children impacts who bears the cost of caring.

The conflict created by the sexual division of labor in the home has caused women to revolt against this oppression and exploitation by moving into the paid labor market (Bergmann 1984; Barker and Feiner 2004). But even with their increased paid work, they have not been able to shake the care responsibilities assigned by the social construction of gender (Badgett and Folbre 1999). In many ways, it is a cyclical phenomenon that women earn less than men. Women earn less in the market because they specialize in home production, but their specialization in home production causes them to earn less in the market. The expansion of women in the labor market means that women are now responsible for caring in the home and the market. This responsibility has created a double day for women have and explains a significant portion of the gender wage gap (Barker and Feiner 2004; Folbre 2001).

For feminist economists, the childcare problem is explained by inefficiency and inequity in our economy. Inefficiency is created by the public good characteristics of children resulting in market failure. The mainstream economic perspective has generally
been that families decide to have children, like they would choose to purchase a pet or any other consumption good, and thus, parents are responsible for the care of their children, like they would be responsible for the care of their pets (Folbre 1994; England and Folbre 1999; England and Folbre 2003; Folbre 2001; Folbre 2008). Folbre (1994) argues that children should be considered public goods, rather than private goods. This implies that we all benefit from the care of children, and as a result, the free rider problem makes it impossible for the market to efficiently care for children. In particular, our social construction of gender has predominantly assigned care responsibilities to women and these caregivers are paying for the cost of caring while everyone else free rides on the benefits from the care children receive.

Using feminist economic methodology, Folbre challenges the mainstream view that rational, self-interested behavior will produce optimal social outcomes. Her approach is concerned with the process of economic decision-making and the outcome. A gendered perspective of the childcare decision accounts for power dynamics in the decision-making process and acknowledges that the outcomes determined by preferences and constraints are socially constructed. It becomes visible that women unfairly bear a greater burden of the costs of care. From this efficiency and equity view of the childcare problem, the solution requires the burden of care be shared by all (Badgett and Folbre 1999; Barker and Feiner 2004; Nelson 2006; Eisler 2007; Folbre 2008).

*Childcare Policy in the United States*

Like many topics in economics, the childcare problem boils down to a discussion of the trade-off between efficiency and equity and the role of the government. These economic debates have shaped childcare policy in the United States. To illustrate how
policymakers have addressed the care of children, we will explore how childcare was included in the 1996 welfare reform. The 1996 welfare reform officially came into law with the passing of the Personal Responsibility and Opportunity to Work Reconciliation Act (PROWRA). This bill intended to “end welfare as we know it” by eliminating the so-called welfare queen and others viewed to be taking advantage of the welfare system. Key changes made to welfare policy by the federal government were the introduction of mandatory 5-year time limits, work requirements, decentralization to the states, and limitations in federal spending (Albelda and Withorn 2002).

Childcare became a source of concern for policymakers, social workers, and low-income advocates because of the conflict between putting welfare recipients to “work” and ensuring that their children were cared for. In particular, welfare reform enhanced the childcare problem by reducing the assistance available to low income families who now have to compete with welfare recipients for childcare subsidies (Albelda and Withorn 2002; Mezey 2004). Although additional funds were devoted to providing childcare assistance, the increase in childcare funding was not enough to offset the increased needs. Many communities were forced to raise income requirements for childcare assistance to offset the increased demands for assistance, while others ended up with waiting lists that they could not realistically accommodate (Shlay, Weinraub, Harmon, and Tran 2004). Although welfare reform changed how the policy operated, it did not address the underlying causes associated with why people were seeking assistance to begin with (Johnson 2002; Sklar, Mykyta and Wefald 2001; Young 2002).

Albelda (2002) points out that self-sufficiency for welfare recipients would require (1) a job market that provided wages and the necessary flexibility to support
families in caring for their children, or (2) supplemental support to families from the
government to cover expenses necessary for adequately caring for a family such as
childcare, healthcare, and housing. Unfortunately, welfare reform reinforced the
devaluation of carework by not valuing the efforts of welfare recipients who stay home to
care for their children. Welfare reform legislation did not address how the devaluation of
care in the market, as demonstrated by poorly paid caring occupations and the lack of
mother ready jobs, contributes to the need for assistance—the heart of the problem. The
prominent perspective and ideology was that welfare recipients are poor decision-makers
who need incentives to make better decisions, rather than considering the choices of
welfare mothers a reflection of labor market inefficiencies and our social childcare
problem.

Examining the childcare problem as highlighted by welfare reform in the United
States raises many questions. Should the government intervene to help solve the
childcare problem? Is there a market failure in the childcare market? If so, what type of
market failure exists (lack of information, externality, public good)? If government
intervenes in the childcare market, what should the goals of our childcare policy be?
Economic theory argues for government intervention in markets only for (1) the
promotion of efficiency when monopoly power, imperfect information, externalities, or
public goods exist and (2) the promotion of equity. Both efficiency and equity claims can
be made to support government intervention to address the childcare problem.

In his analysis of the childcare problem, Blau (2001) suggests that there are two
possible goals for childcare policy (1) to improve the employability of parents and (2) to
improve the quality of care received by children. He prioritizes improving the quality of
childcare because of the external social benefits of better care. Blau advocates for the use of childcare subsidies to generate an efficient outcome of the socially optimal level of quality care. Helburn and Bergmann (2002) also promote government intervention as a solution for efficiency. They argue that parents need to be better informed and that childcare markets need to be better regulated. Additionally, they articulate the social benefits of subsidizing care and lay out a plan for government intervention.

A key issue not addressed from this efficiency perspective is the role of women in the economy. The debate about women’s place in the market or the home is ignored or assumed, but not critically analyzed in this discussion of the childcare problem. For example, Blau (2001) says that some argue for childcare subsidies to ensure “lazy” welfare mothers work, but he does not take on the issue of whether mothers caring for their own children is an efficient use of our resources, particularly for those likely to be viewed as “poor” mothers. Blau approaches the childcare problem from a mainstream economic perspective focusing strictly on efficiency and avoids equity discussions by attempting to not making value judgments.

Mainstream economics generally leave equity concerns to the policymakers because analyzing equity requires making value judgments, which contradicts their preference for positive analysis. Feminist economists make explicit their values in the analysis they do and this promotes normative discussions of equity (Barker and Feiner 2004). Amartya Sen (2000) provides us with one way of understanding if the childcare market is equitable. He defines freedom in terms of capabilities, where positive freedom measures an individual’s actual ability in acting their choice and negative freedom is focused on non-interference. The ability to exercise a right is dependent upon the
“functionings” that have been developed by society to ensure capabilities. In relation to the childcare problem, we can ask the following questions: (1) are families capable of choosing their preferred childcare arrangement, and (2) how can we ensure that families have the capabilities necessary to truly have childcare choice?

Regardless of how we measure the fairness of a childcare policy, it would be difficult to disagree with the reality that women and children are bearing the burden associated with the provision of care and that we should have a discussion of whether this outcome is equitable and efficient. Key to this discussion is who *should* pay the cost of childcare provision (Folbre 1994; England and Folbre 1999; England and Folbre 2003; Folbre 2001; Folbre 2008). If we ignore the role of gender in this problem, then we limit our understanding of the issue and solutions to it.

Interestingly, both mainstream and feminist economists argue for government intervention. Although there are still some that would argue that government intervention, even with good intentions, is never a good option, many economists would support government involvement in the childcare market because of the existing inefficiencies and inequities. However, as welfare reform illustrates, policymakers have not effectively addressed either the efficiency or equity concerns, but view the childcare problem as the poor decision-making of individuals. This approach to childcare problem suggests that the solution to the problem is helping individuals make better choices and ignores the underlying context of these decisions.

*The Childcare Choice in Context*

Understanding the childcare choice in context requires an examination of how families form their preferences and provides alternative solutions to the childcare
problem. Our discussion until now has focused on the childcare choice that families make. However, families face a variety of constraints in the decision-making process. Mainstream economists would treat these constraints as factors that determine the given individual preferences of rational decision makers (England 2003). As a result, the focus of analysis is on the outcome of the choice, and not on the process of choice, which includes preference formation. The mainstream economic approach ignores preference formation because they do not want to make value judgments about how preferences are formed. However, this is a value judgment in support of the individual, prices, scientific, and economic man. Our description of the childcare choice developed earlier is an example of this. We did not question how parents know their availability, affordability, and quality needs, but assumed that they do.

The availability, affordability, and quality preferences of parents reflect the context of their lives and the constraints they face in making choices. Three distinct, but interrelated, sets of constraints impact the childcare choice as illustrated in figure 7. First, the childcare decision is constrained by the culture, customs, and norms of society. Our culture, customs, and norms offer the broad context of our choices by defining such guiding factors as our economic system and our social construction of gender. Set within the contextual constraints of our culture, customs, and norms are institutional and policy constraints. Our institutions and policies can be designed to reinforce current culture, customs, and norms or they can be used to help change the context to how we would like it to be. The third set of constraints that impacts the childcare choice is the household structure and how this defines the process of family decision-making (i.e., patriarchal, egalitarian).
FIGURE 7: The Context of the Childcare Choice

These constraints positively and negatively shape and influence one another as illustrated by the arrows moving between the constraints. For example, an egalitarian household is supported by and promotes the creation of policies and institutions that ensure an equitable decision-making process in the home such as the marriage and divorce laws of a society. Additionally, an egalitarian household is more likely to exist if our society’s culture, customs, and norms advocate for equity in decision-making.

We can than use this model of context to understand the childcare choices of families (figure 8). Here the childcare choice is given a setting determined by the social constraints that families face. A contextual view provides transparency for how families form their preferences for availability, affordability, and quality of childcare. Putting the choice in context allows for discussion of our values and addressing the questions of how
we are caring for our childcare, what our goals are, and how we are using policy to meet those expectations.

FIGURE 8: The Childcare Choice in Context

The importance of examining the childcare choice in context becomes apparent by studying how the social construction of gender impacts preference formation. Gender can be seen in all of the different constraints that factor into preferences for affordability, quality, and availability. First, our culture, customs, and norms define the role of gender in the childcare choice. The social construction of gender is a direct product of this constraint that assigns care responsibilities to the feminine. This is also where our market economy is established and the devaluation of care. Our culture, customs, and norms also define what it means to be a mother in our society and define expectations about the care
children receive. This influences quality preferences because parents want to be seen as “good” parents.

Our second constraint is institutions and policies in our society. A gendered analysis brings awareness to how women and men are impacted by such policies as welfare reform and family leave. It also brings awareness to the gender wage gap in the labor market and inequalities within other social institutions. These institutions and policies directly impact affordability and availability preferences for families. For example, if women received higher wages, it would be easier for them to afford care.

Finally, the household constraint conveys information about the family structure and the process of decision-making in the home. The importance of this can be seen in the way care responsibilities are negotiated in a family. For example, how does a family negotiate who drops off and picks up their child from a childcare provider. If a parent is not able to successfully bargain for the sharing of caregiving duties, then preferences will be more restricted.

A gendered discussion of the childcare decision highlights who is doing the care and who is paying most of the high cost of care. When we do not discuss childcare in context, we do not have a complete understanding of the childcare problem and limit our vision for potential solutions. When we approach the childcare decision from a perspective of choice of the rational consumer, it implies that the only way to change the outcome would be to influence preferences or create inefficiencies, both things economists do not want to be a part of. Placing the decision in the context of families’ constraints suggests that socially constructed inefficiencies and inequities preexist and already influence any economic decision that is made. Critiquing and analyzing the
constraints provides room for change and the possibility for community or government to actively promote preferred outcomes by changing the constraints families face in the childcare decision.

For example, U.S. family leave policy as established by the Family and Medical Leave Act (FMLA) encourages the assignment of care to women by not requiring leave to be paid. Unpaid leave discourages participation in caregiving by men because young families cannot afford to be without an income. As a policy, unpaid leave reinforces the stereotypical gender roles of men as breadwinners and women as caregivers. If we examine leave decisions as individual choice, we do not see the social and cultural norms around gender, the gender pay gap, workplace discrimination, etc. that factor into the preference construction of the economic individual in deciding to use family leave. It is assumed an individual will always select the choice that is best for them.

Placing family leave decisions in the context of society, institutions, policies, and family structures changes our understanding of the choice by exploring the factors that create preferences. It opens a discussion of the intersections of these constraints and questions the effectiveness of policies to address constraints. Leave policies created may be more effective if they exist in a social and cultural context that supports gender equity; however, if that context does not exist, policy could support efforts to change the context to become one that promotes gender equity.

Figure 9 illustrates how policy can be a strategic element of change. Our current goal of family leave policy is to ensure that women are not negatively impacted in the labor market if they temporarily leave to be caregivers. However, this reinforces the assignment of care to women and why we have gender differences in earnings. If we
really wanted policy to reduce the cost of care to women, then we would create a family leave policy that encourages men and women to share care responsibilities. This policy would have paid leave available to each parent. Thus, to receive this subsidy for the cost of caring, men would have to participate in caregiving. This policy is directly designed to change our culture, customs and norms (arrow 1) by changing the assignment of care to women. This feeds back into the household structure (arrow 2) because sharing care responsibilities changes the bargaining positions within the home.

**FIGURE 9: Policy as a Strategic Element of Change**

An *effective* family leave policy changes the constraints that factor into the childcare choice and changes the childcare choice (figure 10). Faced with a new set of constraints, families have different quality, affordability, and availability options when it comes to childcare. This policy successfully increases the childcare choice (area A) by
reducing the assignment of care to women, a direct cause of our childcare problem. When the childcare choice is explored in context it is clear that the goal of childcare policy should be broadening the childcare choices of families by changing the constraints they face.

FIGURE 10: Changing the Childcare Choice

*The childcare choice without an effective family leave policy.*

*The childcare choice with an effective leave policy.*
Making the Childcare Decision

The best way to understand how this framework enhances the analysis of the childcare decision is by examining a childcare choice using this analysis. Currently, I do not have any children, but if I had a child what would my childcare choice be. This is a question that I have asked myself throughout my research. My choice makes for an interesting case study as I am an expert on the childcare decision and I am passionate about the care of children. A neoclassical economic perspective would begin by using my childcare preferences to determine my optimal childcare choice. I begin analysis of my childcare decision here as well, but then explore my childcare choice within the contextual framework.

Like all families, my childcare choice set reflects the intersection of quality, affordability, and availability. My preferences for childcare quality include safety, an engaging environment, and development of my values within my child. First of all, any type of quality care must meet a minimum level of safety expectations. As a parent, it is important to know that your child will not be in harm’s way. Although safety can be measured by meeting legal standards of care facilities, it also incorporates an unquantifiable component reflective of trust in a care provider.

In addition to being safe, my perspective of a quality childcare arrangement is one that engages the child. To me, child engagement involves learning, socializing, and fun. It is not necessary that all of these are included in every activity, but I prefer that my child would be exposed to all of these elements of engagement throughout time spent in childcare.
A third important aspect in my quality care preferences is that the care arrangement matches (and at minimum does not contradict) my values. Given my child would spend a substantial portion of time in childcare, I want to be confident that the values I am teaching my child are reinforced or further learned in the childcare arrangement. For example, I am an advocate for social justice and I would like any childcare provider to be the same by creating an environment the respects all people.

It is possible that a range of childcare types could successfully meet my quality preferences. However, I know that the best way to ensure my quality expectations are meet is through active parent involvement. Finding a quality childcare provider will require research and my knowledge of a care provider will develop overtime in the relationship.

Quality is only one component of the childcare choice. A second determining factor of the childcare choice set is affordability. I am privileged in that my personal income is above the median income in Colorado. Combining my income with a partner would make for a family income that would eliminate concerns of affordability and make all types of childcare feasible from a financial perspective.

For me, the most challenging component of the childcare choice will be matching my availability requirements. My primary concern is finding childcare that meets my work needs as a college professor and a commuter. I need to be on campus an average of 3 days a week during the academic year and I am able to work from home the other days of the week. This means that I will generally need childcare 5 days a week and that on 3 days a week care is needed beyond the standard workday. In particular, my commuting days are often 10-12 hour days. This means that I am often not home until after 7pm,
while most childcare arrangements do not provide care that late. In having a child, I am likely to have a partner who is not commuting and more normal work hours. This would allow for coordination and sharing of picking up and dropping the child off at a care provider that may eliminate some of my availability difficulties.

In addition to restrictions of my work hours, my preference for active parent involvement means that I would want flexibility in the days I need care. In particular, on non-commuting days I would want my child to spend less time in childcare. Working on an academic year also means that I would need less childcare during academic breaks. This flexibility in the care arrangement will make it more difficult to use a formal care provider. The location of a childcare provider would also be an important element in my availability requirements as I would need an arrangement that does not add substantially to my commute time. Finally, it is important to note that I do not live in the same state as my relatives—making them an unavailable care option.

My childcare problem is defined by my individual needs for quality, affordability, and availability. However, my childcare needs are constructed from my experience in a larger social context. This context defines the formation of my childcare choice set and allows for understanding the childcare decision as being much more than a simple utility maximization decision. Culture, customs, and norms underline the context of all decisions that we make including the childcare decision. Some important group memberships that define my culture, customs, and norms and factor into my childcare preferences are academia, feminism, Catholicism, patriarchy, and capitalism.

The culture of academia is visible in my childcare preferences in multiple ways. It obviously influences my desires for availability of care by determining childcare needs
by the academic year and day. Face time is central to the academic culture requiring me to be visible on campus and to also engage in extracurricular events such as attending speakers or presenting at conferences. Additionally, being successful in the academic culture requires moving to wherever the available jobs are. This migration moves people away from their families and often eliminates family as a care option as my experience demonstrates. Finally, like many occupations, academia is not conducive to the dual earner family, but more suited to the breadwinner and housewife family structure. First, it is often ignored or deemed irrelevant that workers are trying to balance work and family responsibilities. For example, I have worked at two institutions with Friday seminar series with strong pressure and expectation for all faculty members to participate. Generally, speakers begin at 4 p.m., talks end between 5 and 6, and are then followed with socializing. As a parent, it would be very difficult to attend these functions and use a formal childcare facility because of the hours of these facilities. Secondly, the required migration for academic jobs pressures couples to value one career over another. The culture of academia definitely has room for growth in supporting workers in their care responsibilities.

My identity as a feminist directly influences my childcare preferences. Feminism has taught me the importance of economic freedom for women and encourages me to work for social change. For this reason, I do not desire to be a full-time caregiver to my child. My feminism also means that I want a partner who is willing to actively and fairly engage in care responsibilities. Although I have become a feminist overtime, this identity often conflicts with my strong history in Catholicism. My Catholic roots are deep as I was raised in a dominant Catholic community, attended Catholic grade school, and grew
up in a Catholic home. A central aspect of this experience was learning traditional
gender roles. Even though I am not a practicing Catholic today, I still feel pressure to be a
primary caregiver from this experience.

Combining my personal experience with our patriarchal society, I will be
continually fighting against expectations to be the primary caregiver for my child. Even
if I do not make this decision, social norms will result in others assuming I have. For
example, I have already had the experience of a colleague assuming I have a child when I
do not. Capitalism also plays a defining role in our culture, customs, and norms and it
sets the stage for my childcare problem. The self-interest and individualism in our
economic system explain why the childcare problem is viewed as a private matter.
Capitalism also contributes to expectations of what a good worker is and pressures
individuals to compete for better standards of living including myself.

Examining the institutions and policies impacting my childcare decision, a range
of issues surface. One obstacle already apparent is the mismatch between when I need
care and the time care is available. Most childcare providers, particularly formal
providers, operate on standard work hours, but my work requirements do not match this.
This conflict eliminates my ability to select a formal childcare provider. Another
institutional constraint is the inadequacy of the on-campus childcare facility. The on-
campus center is inadequate as a workplace childcare center because it does not meet the
needs of workers by being too small and not having hours that match worker needs.
Other policy considerations important to my childcare decision are those aimed at
reducing the gender pay gap and gender discrimination. My salary is essential in
affording care and important in being able to choose not to be the primary caregiver.
A third contextual aspect of my childcare decision is my household structure. As a feminist, my household is likely to be more egalitarian than most households. This means that it is likely that care responsibilities in my home are shared between my partner and myself. However, our relationship would still be impacted by the patriarchal structure of society pressuring us to conform to gender norms. For example, his workplace is less likely to expect and accept his family obligations, making it harder for him to take on care responsibilities.

Household income is a central element in the childcare choice. Even though, my personal income is above the median income of Colorado, approximately 33% of my weekly income would be used to cover the cost of childcare. Assuming my partner’s income is at least as much as mine, the addition of my partner’s income would mean that childcare is only 15% of our household budget. Our household financial position means that I would likely be able to truly have a choice between parent and nonparent care if I am willing to be the stay-at-home caregiver. This is a privilege most families do not have as they can either not afford childcare or not afford to have a parent removed from paid employment. However, being a stay-at-home caregiver is not a commitment that I am willing to make because I value paid work in my life and I have student loan obligations.

Examining our egalitarian relationship and our household income raises uncertainty about how negotiations around childcare would be made in the home. It is unlikely that bargaining power in my egalitarian household would be equal. Assuming I have a partner with a comparable level of education, the gender wage gap implies that my partner will have higher earnings than me and be in a better bargaining position. Being a less credible threat will make it more difficult for me to negotiate shared care
responsibilities and my preferences for childcare, even if my partner and I strive for an egalitarian relationship.

At this time, I believe that my childcare choice would be reflective of the decisions that most families make in that it would be complex. I know that I would need a network of care, as it is unlikely that one type of childcare would meet my care needs. Most challenging for my family and me would be finding care that would adequately covers my broad range of work hours. Although I could use a center for most days, I would not need or want this option everyday or throughout the year. Given my long workdays, I think it would be important for me to have extra time with my child on my non-commuting days. I would still need to work on these days, but would probably work less than a typical 9 to 5 as I could put in extra hours in the evening. In this regards, I think my family would likely opt for a family day care center, a nanny/babysitter, or a combination of these types of childcare. Both of these options are more likely to have the flexibility in hours needed for my work schedule.

Although this would meet my availability needs and be affordable for me, I think it will be difficult for this arrangement to match my preferences for quality of care. I think it will meet minimum standards of my child being safe and occasional educational and fun activities. However, it will be difficult to find the right-mix of care that matches my values and expectations. The inadequacies of the childcare system in the United States become very apparent when someone as educated and as privileged as myself would have to piece together childcare that only meets my minimum standards of care. Using the contextual framework highlights that the constraints of my childcare choice are
a product of norms, culture, institutions, policies, and my personal preferences and that we all have responsibility in solving my childcare problem.

My childcare decision demonstrates the struggle of parents to balance work and family. Parents are continually faced with a trade-off between these critical aspects of their lives. The reality is that many people in the U.S. today want and need both. Families are at the core of our social structure. For many of us, family nourishes our spirit by making us happier and more productive members of society. However, as the feminist movement has shown us, family is not enough; we also need income and community involvement beyond our families to live fulfilling lives.

For many individuals in the U.S., the choice of children automatically results in a work and family conflict because of how we have structured the care of children in our society. We require parents to balance work and family. Why must it be a balance? The image of balance supports a separation of work and family and the use of an historical model of private and public spheres. This does not reflect the realities of our lives today. We identify and connect with others through our work and our families. We need both to sustain who we are. Our balancing act of work and family creates a competition between these important aspects of our lives. Is competition the best way to organize these life necessities? How might other ways of structuring work and family, such as cooperation, meet our needs better?

Interesting is that the childcare problem is extremely difficult to solve on an individual basis. The only way individual families can solve this problem is by not having children. When we approach analysis of the family from an individualistic perspective, this filters into policy focusing on an individual solution, and the reality is
that we have a social problem that needs a social solution (Gormley 1995; Folbre 1994; Folbre 2008). Families experience the childcare problem uniquely, but looking at all families as a whole we can see clear overlaps in the struggles they have in caring for their children.

Examining the constraints of the childcare choice of families, we quickly see that work and family are not separated in the decision. It is not possible to disconnect them in analyzing childcare—so, how can we expect parents to separate them in their daily lives? By ignoring the context of childcare decisions, we have restricted the realm of possibilities for how we coordinate our work and family needs. It becomes the problem of individuals and a trade-off they must face. Exploring the constraints of childcare decisions requires that we analyze the synergies of work and family. We clearly see in this analysis that we cannot disentangle work and family because of the centrality of both in our lives, evident, when examining the childcare decision within social and cultural context, institutions and policies, and family structures.

**Conclusion**

We need to develop an ethic of care within economic analysis and economic policy (Tronto 1994). Left to its own devices it seems unlikely that the market will be inclusive of care with its focus on self-interest, independence, and competition; thus, we need to find a place for care within our market system. Care needs to be respected and valued because it is essential to the functioning of our economy, society, and culture (Tronto 1994; Fine 2006; Eisler 2007; Nelson 2006). Care is not just needed by our children, but the environment, the elderly, the poor, those who are different from us, etc.
and in turn, we also need care. Care has the potential to connect us as human beings and requires us to show love and compassion. It enriches our lives and is more likely to be fulfilling than all the stuff we continually purchase in the market in hopes of maximizing our utility. The nature of our economy today requires us to make connections locally, regionally, and globally; care for our fellow human beings is a starting point for developing these connections.

This discussion highlights the importance of how we define economics and economic well-being. At the heart of understanding the childcare decisions that families make is realizing these decisions have a lasting impact on the well-being of everyone. All human beings have the right to be valued and respected because of their humanness. This means we need to acknowledge and address how women are disadvantaged by the cost of care, how poor quality care harms children, and the social impact of how we structure the provision of care. Examining the childcare decisions of families contextually enables us to be inclusive by incorporating gender, race, ethnicity, class, caste, ability, age, sexual orientation, geography, nationality, religion and other differences within our analysis and provides a more realistic view of the conditions that decisions are made in.

Our systems of oppression have allowed us to free ride off of current care providers for too long. The childcare choice is biased by the privileges afforded to the “normal” white, heterosexual, male capitalist. The continued oppression and devaluation of women, resulting in the assignment of care, restricts women’s choices and limits their power in public and private spheres. Additionally, although many white women are more successful economically today than ever before, this success is partly attributed to their
power and privilege that allows them to push off the assigned care responsibilities to women of color; evident by the increased use of imported female care workers. A contextual analysis provides awareness of how our systems of oppressions impact care choices.

Oppression and privilege determine many of the constraints individuals face. We need to think about the complicated, intersectional realities of the lives of individuals that result from the complexity of how their identities are influenced by their race, gender, class, etc. (Brewer, et. al. 2002). An ethic of care requires a process of transparency and inclusion, whether it is individual decision-making or collective policy-making. Transparency of the process illuminates inclusion and exclusion, making it difficult to ignore privilege and oppression in the process. Understanding the constraints that impact the childcare decisions of families gives us a new perspective of their choice and provides new directions for policy. It raises questions about how we can share the responsibility and associated costs of caring and what is lost when we do not have the care that we need.

We need to capitalize on the synergies of work and family, but also on those of self-interest and altruism. We need to consider how they interact and can work together to offer us more. If we want families to truly have childcare choice, then we should work to minimize the constraints families face. An ethic of care requires us to move beyond economic man to develop solutions to the childcare problem that create real choice.
CONCLUSION: LEARNING FROM THE CARE OF OUR CHILDREN

As a feminist, I believe that how we confront the devaluation of care, as illustrated by the childcare problem, is a defining issue for third wave feminists and our society. Women have the right to vote, control over our reproduction, and access to the labor market, now women and men need the power to choose care. Tackling how we distribute the responsibility of care is not just challenging the feminine, but necessitates reconsidering our definition of masculinity because care is a concern for all—not just women. The childcare decision is an important economic decision because of both the efficiency and equity implications of this choice. Our current childcare system does not ensure that children are receiving the socially optimal level of care. Reorganizing the early care and education of our children can lead to more productive members of society in the future and improve equity in our economic system.

I introduced our discussion of the childcare problem with how the care of children has surfaced in my life and how I have been trained to care. My research demonstrates that my story is one that many women are familiar with. As long as women are primarily responsible for care than the cost of caring will negatively affect the economic well-being of women. This outcome requires us to question our process of caregiving and how our social norms, particularly gender, determine this process.

Studying the childcare problem raises questions about how resources are distributed in our society and how privilege impacts the care choices available to
families. Families face tough trade-offs between quality, affordability, and availability because of socially constructed constraints in the childcare choice. It causes many women to forgo their individual economic well-being to ensure care for their children. Additionally, children from families with fewer resources have unequal access to good care, which reinforces our current systems of oppression.

The goal of my scholarship is to lay the groundwork for reconsidering how we organize and value the care of our children. All three of my essays examine the childcare decision-making process from a gendered lens. Understanding this process enables us to conceptualize how we can reconstruct our childcare system to promote efficiency and equity. The following discusses the specific findings from each essay on the childcare decisions of families, the contributions of my work to the discipline of economics, and directions for further research.

Specific Findings from My Scholarship

In essay one, Does Daddy Daycare Really Exist?, I analyze the choice parents make between parent care and other forms of childcare (relative care, center care, etc.). This research is unique from other research on the childcare decision because it examines the decisions of both female and male primary caregivers in and out of the labor market rather than concentrating on employed mothers. Results show that even when men self-identify as primary caregivers that the hours worked by their female partners and not the hours that men work are key in determining the care choice. Our standard economic methodology helps us understand the outcomes of the childcare decision, but a bargaining model provides insight into why women are the center of care decisions.
Additionally, it challenges what questions we ask and fail to ask when gathering information such as does parent care qualify as childcare and what defines a primary caregiver.

In my second piece, *Navigating Childcare Institutions in Larimer County, Colorado*, conversations with members embedded in one community’s childcare system narrate our childcare problem and its gendered context. Navigating through the organization of care in this community we observe the absence of men, the devaluation of the carework women do, and the limitation family face in their childcare decisions. Because the focus is on process and not outcomes, qualitative research methods allow the story of childcare problem to be understood as a social problem that we have constructed.

Finally, my paper entitled *Childcare in Perspective* uses mainstream and feminist economic methodology to build a conceptual understanding of the childcare decision. This model considers the childcare choice within our social context. In trying to comprehend the childcare decisions of families, we learn that they face trade-offs between quality, affordability, and availability. This outcome is socially constructed by our customs, culture, and norms, our institutions and policies, and our household structures and dictates our decision-making process. Our constraints in the childcare decision are formed by our assignment of care to women. A conceptual understanding of this care choice allows us to explore how we can construct our institutions and policies to challenge our definitions of femininity and masculinity and support a sharing of care responsibilities and changing bargaining power and specializations in the home. By changing our constraints, we reconstruct the childcare decision to allow for the synergies of work and family.
My Contribution to Economic Knowledge

My scholarship contributes to our economic understanding in three distinct ways. First, I demonstrate the importance of a gendered perspective and how using one explores a different topic (childcare), asks different questions (what is our decision making process), uses a different process (quantitative and qualitative methods), and provides a different understanding (an active role for policy). It is necessary to use a gendered lens when examining this economic decision because it is a choice made in our gendered society. Indeed, the lack of a gendered approach in economics has historically marginalized this economic decision. This gendered perspective does not mean I just add gender as a variable, but I consider how a gendered lens changes our economic inquiry.

Building on this, the second contribution that I make is illustrating the value of diverse research methods because they each provide unique insight into how families make childcare decisions. My methodological approach contrasts the mainstream economic focus on quantitative research and shows how we can expand our understanding by using mixed research methods. I increase our economic knowledge of the childcare decision by shifting the focus of discussion from the outcomes of the childcare decision to the process of decision-making. I move our analysis beyond the labor-leisure choice to a consideration of the context of this decision (whom is making the decision, how are they doing it, and why are they the ones making it). This concentration on process is an application of institutional and feminist economic pedagogy to the contemporary social problem of childcare.
Finally, I challenge the purpose of policy and how our economic theory can inform policy decisions. My approach as an institutional, feminist economist allows me to make explicit my value judgments in the research process. Some of the values central to my approach are gender, process, efficiency and equity, care, context, and change. The explicit nature of my value judgments enables a dialogue and critique of economic methodology and promotes progress in the science of economics.

**Direction for Future Research**

My scholarship is but a small addition to the significant task of understanding the childcare decision and how we value care. Although I became a caregiver at a young age, my carework as a social scientist is just beginning. When considering the care of children, my research supports the need to further explore how parents are informed about childcare and how we regulate childcare. We need to better understand how to reduce worker turnover in childcare centers and to have a clear definition of what quality early care and education is. My work and the work of others promotes that we need men and women to share care responsibilities. This means we need to examine how we can get men involved in care.

My research only provides a gendered analysis of childcare. However, we know other differences, such as race, class, ethnicity, sexual orientation, and location, all contribute to differences in outcomes and processes. We need to study how privileges associated with these differences impact the childcare decision-making process and what insight these perspectives will provide us in how we should organize and value care.
Unfortunately, the childcare problem is just one dimension of the crisis of care in our global economy. We also need to reconsider our provision of care for the elder, the ill, the disabled, and the environment. Our global economy requires that we develop a global ethic of care.

Finally, my research offers new direction for how economists do research. It supports the need to for us to evaluate the effectiveness of our economic theories constructed with an inherent bias because they have been formed in our white, patriarchal, capitalist society. As economists, we need create economic theories that are inclusive of the differences we experience in our decision-making.

Economics is often considered the study of decisions we make about the allocation, consumption, production, and distribution of our resources, but needs move beyond this to the study of social provisioning. Our economic decisions are a reflection of the society that we live in—created by our past and our process of change. My scholarship tells the story of our childcare decisions from a gendered perspective and provides a new understanding for how this choice is made. As our economy and our economic methodology evolve, we are presented with the opportunity to create the change we want to see in the society we construct.
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