FROM THE ARCHIVES

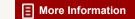**Services for Children: An Agenda for Research (1981)**

Pages
126

Size
5 x 9

ISBN
0309031478

Committee on Child Development Research and Public Policy; Assembly of Behavioral and Social Sciences; National Research Council

🔍 **Find Similar Titles**   📄 **More Information**

Visit the National Academies Press online and register for...

✔ Instant access to free PDF downloads of titles from the

- NATIONAL ACADEMY OF SCIENCES
- NATIONAL ACADEMY OF ENGINEERING
- INSTITUTE OF MEDICINE
- NATIONAL RESEARCH COUNCIL

✔ 10% off print titles

✔ Custom notification of new releases in your field of interest

✔ Special offers and discounts

NATIONAL ACADEMY
OF SCIENCES
1863–2013
Celebrating 150 Years
of Service to the Nation

Services for Children:

An Agenda for Research

Panel for the Study Project on
Children's Services

Committee on Child Development Research
and Public Policy

Assembly of Behavioral
and Social Sciences

National Research Council

NATIONAL ACADEMY PRESS
Washington, D.C. 1981

STUDY PROJECT ON

CHILDREN'S SERVICES

CONTENTS

_____

PREFACE

When the Committee on Child Development Research and
Public Policy began this project--to develop a
research agenda for children's services--the task
appeared quite manageable. We were familiar with
issues relating to the development and well-being of
children, had had experience with a variety of
federal, state, and local services for children, and
had been involved in research on children's
services. Furthermore, we felt we already had a good
understanding of the problem. Although there are
policies and programs for children at many different
levels of government, children's services lack
coherence, focus, and a sense of direction. Some
children are well-served, others are served not at
all, and still others seem to be actually harmed by
fumbling governmental efforts to assist them.
Accordingly, we welcomed the task, and agreed to

consult experts, review available literature,
reflect, and write what we anticipated would be a
crisp and concise diagnosis and prescription for
future research.

After more than two years of work, we have reached
one unanimous conclusion: We would rather deliver
children's services, or even raise children, than
prepare a report on the subject. The task, in other
words, has been anything but easy, and we were often
tempted to give up in frustration. The reason was
not lack of cooperation from people who knew and
cared about the delivery of services to children. We
have had many fruitful conversations with virtually
everyone whom we sought out. Rather, the difficulty
lay in our approach and in the effort to develop a
convincing justification for it.

Our recommendation about how research can lead to
improvement in children's services and children's
lives emerged with great force from our consultation
and deliberations: research on children's services,
as well as the services themselves, must be more
fundamentally concerned with the child and informed
by an understanding of the way children live and
manage. Both research and services approach children
from dozens of specialized perspectives. They are
hardly ever viewed as entire human beings in their
homes, families, and community environments, services
are hardly ever designed in the light of that kind of
broad understanding of children's lives and the

people and forces that shape them. Largely for this
reason, services for children are falling short of
the expectations of parents, program administrators,
and legislators.

There seemed to be three problems in explaining
and justifying this rcommendation.

First, it might sound too simplistic or obvious,
the prelude to another appeal for "holistic
conceptualizations" and "comprehensive policy," which
is standard fare from a committee such as ours, but
hardly helpful to people who actually do research,
design policies, or deliver services. As one early
reader put it: Is that all we can say? At times we
were tempted to deliver a message that appeared to
make a grander appeal: researchers should concentrate
on identifying gaps in existing research--questions
we are not addressing, knowledge we do not have--and
large increases in expenditures are needed to finance
major studies, longitudinal panels, needs
assessments, better theory, etc. In the end we chose
to resist this temptation. Although it is difficult
to state the case for what may seem obvious, in this
instance we felt the effort had to be made.

Second, research on "how children live and
manage," however edifying, might go for naught as far
as policy making is concerned and end up being merely
more social science research gathering dust on the
shelves. Congress, executive agencies, service
providers, and researchers are in fact specialized,

categorical, and problem-oriented. They see children
in terms of specific kinds of problems, specific
developmental needs, or concrete circumstances of
deprivation. The policy audience has little interest
in research that does not have operational
applications or in ideas that cannot be implemented
by the existing service system.

Thus, a more efficacious message might be that we
must do more of what we are doing now but do it
better, and at the same time foster innovative
additions to the existing array of children's
services. We believe this, and we say now: If
nothing else, we must do more of what we are doing
now, do it better, and foster innovation. We do not
think this enough.

Third, our message may be wrong in some
fundamental sense. Some of us involved in this
project were also recently involved in an assessment
of research needs for urban policy. Participants in
that study contemplated the same kind of
recommendation--focus on the city in toto rather than
on specialized views of its problems. In the case of
cities, however, the more organic or holistic
approach was rejected. For a variety of reasons, the
city did not seem to be the right unit of analysis;
more specialized approaches seemed justified. Maybe
the case of services for children is similar:
although the object of concern, the child may be an
inappropriate focus of analysis. This is a harder

issue to resolve. Yet upon reflection we still do
not think that numerous specialized perspectives are
a sufficient basis for policy concerning children's
services.

Fragmentation in the service system is inevitable,
as is the tendency for political debate to focus on
particular problems and issues. The fact that
programs and discussions tend to be categorical
leads, however, to real difficulties with the system
of children's services. Children are whole human
beings. Their problems and needs are connected and
not always readily treated piecemeal by categories.
For this reason, there are pressures to connect and
unify various parts of the service system, pressures
that to a certain extent counterbalance the forces
leading to further specialization of the parts of the
system. Because children's needs are not neatly
dividable and because an important part of the
ongoing policy debate involves considerations that
cut across categories, it is exceedingly important
that a considerable portion of research not be bound
by existing categories.

In particular, we think that private foundations
and other research funding agencies not preoccupied
with particular programmatic responsibilities play a
major role in supporting research that is not
categorical, research that proceeds from a broader
view of how children live and manage. This is one of
our principal recommendations.

Is such a humanistic, idealistic appeal practical? Is it right? We think so, but doubts on this score are not unwarranted, and, as we have said, the case is not easy to make. Changing the world of research, policy, and services to accommodate new perspectives is never easy. You will no doubt sense this as you read what follows. We urge you to consider the message carefully; we try to give several examples of what we mean; and we suggest funding strategies that might stimulate the right kinds of change. Admittedly it is not a message that, if heeded, could better the lot of children today. Yet if taken seriously and put into practice, it can have a powerful influence tomorrow. Children will still be there.

This report represents an attempt to discover and synthesize the views of a large number of people who have extensive experience in the field of research on services for children and who are thoroughly familiar with its literature. Although we recognize that education is the most prominent and universal service provided both publicly and privately to children in our society, we have not dealt in this report with the development and implementation of curricular education programs. We have instead focused on the range of child welfare, health, juvenile justice, recreation, child development, and family support services provided to children. Views on the quality and usefulness of existing research differ widely,

ranging from qualified praise to qualified condemnation, and opinions on what changes are needed are similarly wide-ranging. We listened carefully and, in the light of our own views and experiences, prepared what we believe to be a fair assessment and prescription concerning research on children's services. This is our report, however, and inescapably reflects the subjectivity with which we approach the topic. Accordingly, we have chosen not to include the copious footnotes and accounts of scientific disagreement that would be characteristic of a review of the literature or a state-of-the-art survey.

We would like to acknowledge the support and encouragement of Terry Saario and the Ford Foundation in the launching and completion of this report. She had the vision that an effort of this kind was needed, shared our frustrations in searching for a proper approach to the subject, and urged us to present our conclusions as crisply and forcefully as possible.

The study project was undertaken by the members of the Committee on Child Development Research and Public Policy in 1978. Although the membership of the committee changed in the course of the project, those who made the original commitment persevered. By bringing diverse perspectives to bear on the subject, they ultimately helped ensure that the effort was co-opted by no particular perspective but

instead was preoccupied with formulating a message aimed at helping children. Special thanks are due Sheldon H. White, ex officio member of the committee, whose ideas inspire the report at many points, especially in the first chapter.

Study director for the project was Cheryl D. Hayes, who organized and directed a substantial consultation effort as well as the drafting of this report. She was assisted by Wendy A. Warring, who served as research assistant, and by Jeffrey R. Travers, who provided useful criticisms of early drafts. Frank Farrow also assisted in the drafting process.

The committee would also like to thank David A. Goslin, executive director of the Assembly of Behavioral and Social Sciences, for his advice and assistance at many points during the project, and Christine L. McShane, the Assembly editor, for her work on the report. Finally, we owe thanks to the many people, too numerous to list, who gave generously of their time and knowledge. Though absolved of responsibility for what we have produced, they provided the advice and assistance that made it possible to say anything at all.

LAURENCE E. LYNN, JR.
Chair, Study Project on Children's Services

HISTORICAL
BACKGROUND

Since American colonists began binding orphaned and
abandoned youth in craft apprenticeships, people and
organizations outside the family have shared
responsibility for the care and well-being of
children. The role of these institutions--schools,
asylums, welfare agencies, courts, churches and
charities, and foster homes--has steadily expanded in
response to specific problems and needs. This
expansion has always been accompanied by
controversy. What do children need that parents
cannot provide or cannot provide without help? When
should government rather than private and charitable
groups be involved in addressing those needs? Is
public assistance to and protection of children a
federal, state, or local responsibility? Should
publicly supported services for children be available
to all children "at risk" or only to the poor?

In recent decades, as the growth in public
programs that benefit children has accelerated, such
questions have become more insistent, and
controversies among elected officials, practitioners,
and parents concerning public policies affecting
children have become even more intense and widespread
(Kenniston and the Carnegie Council on Children 1978,
Sheehan 1977, Case Western Reserve University 1977,
Steiner 1976, National Research Council 1976).
Because these issues are both value-laden and
political, they will not be "resolved" by research
alone. Unless future research on children's services
takes fundamentally new directions, however, the
available knowledge, information, and ideas will be
insufficient to provide the foundations for wise
political choices on public policies and programs
affecting children. Basic issues will remain
unaddressed, and shortcomings in the existing system
of services to children--unmet and poorly met needs,
public efforts that seem to conflict with each other
or to undermine private efforts--will become more
severe and prove increasingly harmful to the
interests of children and their families.

The purpose of this report is to chart some of the
new directions that research on children's services
should take and to underscore the importance of this
research to future policy debates concerning
children's services. In particular, we shall urge
that a significant body of research should focus on

children, rather than on specific agencies or
programs, as the subject of study.

Public
Programs for
Children

"Children's services" comprise numerous activities
designed to meet children's physical, social,
emotional, and educational needs. One survey of
federal expenditures for children, conducted in 1976,
identified some 260 programs that provide services to
children and their families as their major function
(Rose 1976). The numerous public programs for
children from birth to 18 years of age can be grouped
by their general functions into seven categories,
which are described below.

Child welfare services are generally provided by
public and private agencies and proprietary agencies
to ensure continuation or replacement of parental
care; examples are foster care, adoption services,
and protective services. Day care, once generally
considered part of this category of services, has
more recently been grouped with child development and
early childhood education services, unless it is
provided for therapeutic or protective purposes.
Child welfare services may involve the placement of a
child outside his or her family in adoptive, foster

care, or institutional settings; they may also involve support, counseling, or strengthening a family to keep it intact as well as programs for treatment and socialization.

Child development and early childhood education services generally include day care for infants and children, prekindergarten, nursery schools, and other services designed to maximize the physical, emotional, and cognitive development of the young child. Project Head Start in the Office of Human Development Services of the Department of Health, Education, and Welfare (now the U.S. Department of Health and Human Services and the U.S. Department of Education) has become a prototype for compensatory early childhood education programs intended to increase the overall competence of economically disadvantaged preschool children.

Education services include programs designed to meet the needs for special education of particular groups of children. In addition to standard educational programs and supportive services (such as transportation) for the handicapped, vocational education, and education for children who do not speak English, these programs provide special services to educationally deprived or disadvantaged children, neglected or delinquent children in institutions, Indian children, and gifted and talented children.

Child health and mental health services include

primary care for children and prenatal care for
mothers. These services typically involve screening,
diagnosis, treatment, and follow-up of physical and
mental illness. This category also includes
nutrition and feeding programs. Recipients of
services may receive care on an out-patient basis or
within institutional settings such as hospitals.

Youth services include activities that focus on
the special needs of youths other than those
generally addressed by health and education programs.
They include programs for recreation, the prevention
and treatment of drug and alcohol abuse, pregnancy
prevention and abortion, employment training, and
individual and group counseling. Services may be
provided in residential settings, but they are
typically delivered through daytime community-based
programs.

Juvenile justice services include the range of
services provided in conjunction with or as a
substitute for the activities of the police and the
juvenile courts. This category incorporates the more
traditional functions of probation and detention as
well as the placement and care of runaways and abused
and neglected children for whom training schools and
residential correctional facilities are usually
inappropriate. States vary widely in their
definitions of juvenile justice services. In some
instances these services are provided by child
welfare agencies; in others they are provided by

adult correctional or juvenile justice agencies.

Other statutory and publicly supported social services that affect children include a variety of supportive services, usually in conjunction with cash assistance programs, such as special counseling, referral and outreach, vacations, budgeting, and educational programs.

These categories are not mutually exclusive. Programs may overlap categories or might as easily be placed in one category as another. In many instances, for example, juvenile justice and youth services are interchangeable labels for the same program. Alcohol and drug abuse programs are often classified as both youth and health services. Nevertheless, such a typology is useful because it reflects the terms and categories that policy makers typically use.

The existing structure of children's services reflects the gradual assumption of responsibility for particular problems and categories of children by all levels of government throughout the nation's history. Because of the nature of the political process, services have been created and expanded in an incremental, piecemeal way. They are not the manifestation of a comprehensive and clearly rationalized national policy to coordinate public and private efforts on behalf of children. Rather, they comprise numerous separately conceived and administered parts, reflecting an exceedingly large

and diverse number of independent actions by all
levels and branches of government (Lynn 1978).

Throughout American history, local governments and
private charities protected and cared for children
who were homeless, abandoned, or neglected. Colonial
courts placed these children in substitute families
as servants and apprentices; later, with the advent
of orphanages and asylums, children without families
were cared for in institutions. In the 19th century
the states began to provide education, child welfare
services, and some public health services, a trend
that accelerated in the 20th century as advocacy on
behalf of children became better organized and more
effective. The White House Conference on the Care of
Dependent Children in 1909 and the establishment of
the Children's Bureau in the Department of Labor in
1912 made children's services a matter of federal
interest and sparked the Mother's Pension Movement of
the 1920s and ultimately the creation of the Aid to
Dependent Children Program in 1935. The Children's
Bureau, established as a research and information
center to generate knowledge about the conditions of
children's lives and plans for programs of action,
institutionalized federal interest and involvement in
promoting the health and well-being of children
(Eliot 1962).

The Sheppard-Towner Act, passed in 1921, expanded
the federal role from a responsibility for a
relatively small number of children dependent on the

state to health care for pregnant women and infants.
The act aimed to reduce infant and maternal mortality
by providing the states with matching federal funds
to establish health centers for pregnant women and
infants. Although Sheppard-Towner was short-lived,
it laid important groundwork for the major federal
health care initiative in the Social Security Act of
1935. The act established the principle of social
insurance as protection against income loss due to
unemployment, old age, disability, or death. It also
provided public assistance to the poor with the Aid
to Dependent Children Program, which provided federal
grants-in-aid to the states to administer programs of
cash support and services to children in families
headed by women. The act also included provisions
for child welfare services, handicapped children's
services, and maternal and child health services.

Until the mid-1960s the federal role in providing
for children's services was limited to the programs
initiated under the Social Security Act and other
isolated initiatives, such as the School Lunch
Program. Since then, a large number of additional
federal programs have been created. Many of these
were implemented by state and local governments and
neighborhood groups; others were operated directly by
federal agencies. Lyndon Johnson's war on poverty,
drawing on research demonstrating the importance of
the first years of life in human development,
established numerous programs to enhance the

development of economically and culturally deprived
young children. Most important among these was
compensatory education for poor preschool children
(i.e., Head Start). After Head Start, a variety of
programs were established to improve children's home
life (i.e., Home Start), to ensure that they received
adequate diets and health care (i.e., the Special
Supplemental Food Program for Women, Infants and
Children and the Early and Periodic Screening,
Diagnosis and Treatment Program), and to ensure an
adequate public education to disadvantaged children
(i.e., the Elementary and Secondary Education Act).
Statutory and publicly financed children's services
at both the federal and state levels continued to
expand in the 1970s.

Thus, in the past several decades a complex system
of statutory and publicly financed services has
developed to meet the special needs of children. For
families that are incompetent, ailing, or
unavailable, orphan asylums, foster care, and
adoption services were established to try to provide
something like a home for every child. To provide an
instructive and pleasant environment for small
children in urban settings and to provide relief for
parents under stress, preschools and day care centers
were opened. Common schools arose as places to give
publicly supported education to children in diverse
places and stations in American society; in a wave of
state enactments from about 1880 to 1937, these

common schools became universal and compulsory. With
all children required to attend school and with
public expectations that such schooling would be
egalitarian and optimal for all children, subsequent
school-related activities were committed to providing
support to handicapped children, bilingual or
bicultural children, children with emotional
problems, and educationally gifted children. For
youths who were increasingly being displaced from
jobs, in a prolongation of what has been called
social adolescence, social facilities offered
recreational programs, employment training and
counseling, services for unmarried mothers, and, more
recently, treatment for drug and alcohol abuse and
pregnancy prevention and abortion. With neither
families nor schools perfectly attuned to the
problems of a prolonged adolescence, with the loss of
community control mechanisms as more families settled
in urban environments, and with the growth in the
number of immigrant families, courts took on the
functions of youth control and discipline through the
concept of status offenses. A variety of auxiliary
mechanisms arose in conjunction with such court
activities, ranging from auxiliary diagnostic and
counseling facilities to the establishment of
reformatories and training schools.

As these hundreds of programs have come into
existence, they have become the seeds for further
progammatic and professional evolution. These seeds,

at first widely scattered among states and
localities, have multiplied and become more dense.
The density itself becomes a problem. Seeds-of-a-
kind, such as local child welfare services or state
institutions, produce new structures to cope with
these problems, such as local, state, or federal
coordinating and regulatory agencies. Service
providers form professional associations and national
organizations for comunication, regulation, and
advocacy. The resulting growth is profuse, richly
varied, and tangled.

Services are highly diverse in nature and include
medical care, foster care, day care, remedial
instruction, recreation, nutrition, supervision and
counseling. Some are provided by highly trained
professionals, such as physicians, psychologists,
social workers, and teachers; others are provided by
paraprofessionals, volunteers, and parents. Some
services, such as health care and education, are
provided directly to children; others, such as
homemaker services and public assistance, benefit
children indirectly as members of a family or
household. Some services are directed to poor
children and their families, while others, such as
subsidized school lunches and milk, are available to
virtually all children. Still other services are
intended to meet the special needs of certain
children without regard for ability to pay, such as
shelters for runaway youths, programs for the

prevention of drug and alcohol abuse, and special
education programs for the physically and mentally
handicapped. For the most part, programs provide for
specific treatments or interventions to help
alleviate specific problems. The problem of child
abuse, for example, or the problem of infant
mortality, or the problem of teenage drug abuse all
have identifiable symptoms. Public programs are
designed to treat those symptoms by removing a child
from an abusive parent, providing prenatal care to
pregnant mothers who are at high risk, or teaching
adolescents about the harmful effects of narcotics
use.

Large amounts of public resources are now being
provided for children participating in a variety of
federal, state, and local programs. In 1935, child
welfare services provided under the Social Security
Act received approximately $1.5 million of federal
funds in grants-in-aid to the states; in 1977 more
than $1 billion in federal funds was allocated to
these services under Title XX of the Social Security
Act alone (U.S. Office of Management and Budget
1977). This public financing of services for
children is, for the most part, for quite specific
purposes. Grants for categorical programs specify in
detail eligibility requirements and the nature of the
services to be provided. In order to obtain funds,
public and private agencies tend to label children
according to the characteristics specified for

program eligibility. If, for example, funds are available for mentally retarded children, children who are legally identified as wards of the state, or "predelinquent" children, agencies tend to identify the needs of children in these terms.

Financial and administrative arrangements vary. Some services are financed and delivered by churches or other private charitable groups. Many are financed and operated by public agencies of the states or municipalities. Others are administered by the states with substantial federal financial contributions through revenue sharing or block grants, which provide fiscal support without specifying its use. Many more, although delivered by state and local agencies or private organizations, are financed and regulated by the federal government through categorical grants that provide funds for designated purposes. With the increase in the availability of federal grants, private, voluntary child welfare agencies, which have retained primary responsibility for service delivery, have become increasingly dependent on federal support.

Program authority is widely dispersed among all levels of government. Twenty-two separate federal agencies in five cabinet-level departments are authorized to support children's programs (Hayes and Davis 1979). At the state level still other agencies may be involved. In Illinois, for example, a state with a relatively long public welfare tradition, at

least 11 state agencies are responsible for serving
children. A child may receive special tutoring for a
learning disability at school. If a child is too
young for school and has a mother who works, he or
she may be cared for at a publicly subsidized day
care center. A child may receive health check-ups
and innoculations at a "well child" clinic, but if he
or she is sick, the child must see a private
physician, whose fee will be paid by the Illinois
welfare department. If she or he has some physical
or mental handicap, services are likely to be
provided in still another location. If the child is
under age four and the family is unable to provide an
adequate diet, he or she may be taken to yet another
health clinic to receive yet another check-up in
order to be eligible to receive supplemental food.

   Children in need have unquestionably benefited
from these public efforts on their behalf. At the
same time, our perceptions of children's needs are
increasingly distorted by the necessity of viewing
them through a categorical service structure that may
be unmanageably complex, expensive, and confusing.
In the process of program creation, little thought
was given to how these separate programs might be
coordinated or might reinforce one another, the
extent to which their administrative procedures may
duplicate or be at cross purposes with one another,
the likelihood of unintended consequences, or the
extent to which these programs may not adequately

meet children's health and nutrition requirements.
The resulting symptoms of dysfunction are of various
kinds.

First, existing services do not necessarily
address all or even the most important needs of
individual children. It is not unusual for a child
with several problems (a troubled adolescent, for
example) to receive a label from an available program
(drug abuser or delinquent, for example) when, in
fact, his or her troubles do not fall into one
prescribed category--or into a prescribed category at
all. A child may run away from home, perform poorly
in school, have social and emotional difficulties
dealing with peers, and use drugs and alcohol.
Perhaps, in addition, he or she may have encounters
with the police and/or juvenile authorities. Chances
are that when and if this child is brought into the
service system he or she will be diagnosed and
treated for only one type of problem--perhaps a
learning difficulty, a mental health disorder, or on
a juvenile delinquency charge. If the treatment
corresponding to the diagnosis is unsuccessful, he or
she may be referred for another service or shuttled
between programs and agencies. The child will
probably not, however, receive help that coordinates
attention to the various problems simultaneously.

Second, services do not reach all the children who
need them or are eligible to receive them. In the
first nine years of the Early and Periodic Screening,

Diagnosis and Treatment Program (EPSDT), for example, fewer than one-quarter of the eligible children were screened. Moreover, only about 50 percent of those who were screened and found to need treatment ever received it. Similarly, Head Start and the bilingual education programs have reached only a small number of the children who are eligible and would benefit from them (Children's Defense Fund 1977, Steiner 1976).

Third, various institutions administering children's programs rarely communicate with one another, largely because they operate on different premises, with different professional orientations, and different arrangements of governance. Because there is no central point of coordination in the system, agencies frequently duplicate or overlap administrative and/or service functions, while others are not performed at all. In Massachusetts, for example, several agencies perform diagnostic tests as part of their in-take procedures. Although these tests may focus on slightly different aspects of physical, psychological, or cognitive development, there is substantial duplication among them. A child served by more than one agency or enrolled in more than one program thus may be tested several times (Sheehan 1977). And the agencies often are unable to demonstrate that their tests are uniquely related to their services or that knowledge of the results of required testing increases the effectiveness of their services.

In California, several agencies have general responsibility for children who are mentally retarded and mentally disturbed, yet there is no clear statutory responsibility for those who are severely mentally impaired.[1] The closing of many state-operated residential care facilities, which formerly housed these children, has placed the burden of their care on one or another local agency and on their families. In many communities, however, as programs have developed to educate the mentally retarded and to treat the mentally disturbed, the special needs of children who are severely mentally impaired have been overlooked.

Fourth, services frequently have harmful negative effects that are unintended and that may outweigh their benefits to a child's development. Efforts to eliminate these unwanted effects often introduce additional complexity into the services system. "Juvenile delinquency," for example, was a label devised to keep children out of the adult criminal justice system in order to protect them from the stigma associated with being prosecuted as adults and to prevent their being socialized into a life of

[1]The term mentally retarded refers to a condition of deficient intellectual and perceptual abilities. The term mentally disturbed refers to a condition of emotional or psychological illness or malfunction apart from retardation. Mentally impaired is a generic term for both types of mental malfunction, which may be acute or chronic.

crime through incarceration with adult criminals.
However, the effect of employing this label,
regardless of the seriousness of the offense, was to
create another classification--juvenile delinquent--
that stigmatized children who committed relatively
minor offenses. Thus, still another label--status
offender--was devised to classify children, such as
runaways and truants, whose actions were judged to be
offenses only because of their age and would not be
so judged if committed by adults.

Finally, because services are oriented toward the
treatment of problems, there is little impetus to
develop preventive services or services that support
or reinforce children's strengths or healthy personal
development. Indeed, local programs to assist gifted
children or to encourage the development of a child's
natural advantages may be viewed by public
authorities as at odds or in competition with
attempts to eliminate the invidious consequences of
disadvantage or deprivation.

The above diagnosis does not imply that we believe
that decision making and the administration of
children's services should be heavily centralized.
Many of us strongly believe that certain parts of the
system are badly in need of some integration, but
integration in general would not be a cure for all
ills. The pluralistic nature of American politics
and the requirement for a certain narrow coherence in

the administration of programs impose real
constraints on the extent of feasible centralization.
A decentralized, pluralistic system displays a
certain flexibility, creativity, and vigor. We call
attention, however, to the fact that a decentralized,
pluralistic system of child services has certain
innate problems. Research relevant to these problems
is badly needed.

Research on
Children's
Services

One can find scattered research activities among the
seed service programs and institutions that were
scattered throughout the country prior to 1890. The
many local institutions provided the beginnings of
local social statistics and demography, supplying
rudimentary needs assessments for their regions and
offering data relevant to their own accountability;
written descriptions of programs were often
available. More or less evidential arguments dealt
with the essential characteristics of children and
families served by these seed programs. Some of this
information inevitably was biased, and there began
the practice, prevalent for years to come, of having

providers of services serve as researchers and advocates for their services in public discussion. Research opened the doors to service.

From 1890 to 1960, research on children and child development became an explicit, institutionalized activity. G. Stanley Hall's Child Study Movement, which began in 1890, was clearly a smorgasbord--a variety of academic research ventures from many disciplines, a bit of philosophizing, and many odd studies and evidential arguments dealing with the various service settings and service issues that existed in American society at that time. From this pool of interests in children several distinct strains of research activity emerged. One of these was an academic strain, centering on either normative or theoretically guided studies of children's cognitive and social development. Other separate strains of research-and-service appeared as the fields of teaching, social work, pediatrics, and early education developed their own professional structures, journals, and research traditions. These several research lines became interactive--methods and ideas diffused among them--but as a consequence clusters of research journals developed, each belonging to a distinct professional specialty, and differentiations evolved in the activities of government, universities, and foundations designed to respect these professional differentiations.

With some time-outs for two wars and a major

depression, this period was one of significant growth in both the quality and quantity of services for children. The research establishments in this period acted intramurally to support the growth of information and self-reflection for the professions. From 1912 until the depression, the Children's Bureau served as a fact-finding agency, collecting statistics and case records of children with special health conditions and dependent and orphaned children. This research was put to use extramurally in the service of advocacy. During this period the service structures continued to collect the evidence and arguments relevant to the services they provided. Research supported professionalization and service expansion.

About 1960 several changes began to appear in the relationship of research to services. Prior to 1960, research was either benign or irrelevant to the service programs and institutions. Within the service establishments, professionals used data to clarify or upgrade their activities, ignoring whatever was not useful. As advocates, professionals used data selectively to justify claims for efficacy and demand. It was the task of the Congress, presumably, to referee the competing claims.

In the 1960s program planning and budgeting offices began to be attached to federal agencies, the Office of Management and Budget, and Congress. Staffed by competent researchers, they mounted an

increasingly vehement critique on the evidential claims of service providers. "Policy research," inside and outside of government, produced more and more evaluations and analyses that were designed to be objective but frequently were inhibitory to the expansion of services for children. Research became double-edged.

To a significant extent, academic research and researchers were caught up in the new critical and analytic mode of the 1960s. It was initially hoped by some in academia and government that basic research on child development would provide guidance for government--would, at the least, help referee the options for investment in various kinds of service. However, basic research does not relate to federal programmatic structures as relevant units of analysis in studying children (e.g., research on cognitive development does not focus on children's needs and circumstances in the same terms as those of Title I of the Elementary and Secondary Education Act). This was perceived as a failure of basic research and it was one factor in both government disinvestment in grants in favor of contracted research and some internal self-reflection and self-criticism within academia, which led toward the growth of research on children in natural environments and in service settings. The role and utility of research was reassessed.

A great wave of task forces, commissions, and

committees came into being in the 1960s, involving
mixed groups of professionals and academics and
missions ranging in scope from the design of special
programs for children to the effort to formulate a
coherent, synthetic national policy for children.
Some valiant efforts were made to set forth a
coordinated national policy, notably by the Joint
Commission for the Mental Health of Children (1970)
in the late 1960s and by the Carnegie Council on
Children in the 1970s (Kenniston and the Carnegie
Council on Children 1978).

What these efforts revealed is that even heroic
analytic efforts will not untangle the complexity of
children's services. The tangle arose from a
historic accretion of assorted programs, and will not
be unraveled by principles alone. The "children's
cause" remains today as Gilbert Steiner has described
it--diverse professionals locked together in a
love-hate relationship, partly cooperative and
interfacilitating, partly redundant, partly
rivalrous. Together they form a coalition able to
agree on little more than the goals of advocacy--
provided one does not ask individuals to describe too
carefully what they want to advocate--a diffuse,
noisy, and frequently self-cancelling coalition
(Steiner 1976).

In the meantime, most current research on
children's services reflected the characteristics of
the existing service system. Studies tended to focus

on specific programs and policies; many examine the
agencies and professional service providers who
deliver services to children or evaluate the
effectiveness of those services. The major reason
for this pattern of research is that the federal
government, which administers the bulk of service
programs, is also by far the largest supporter of
research on children's services. Federal
expenditures for research and development on
children's services reached approximately $94.8
million in fiscal 1977.[2] (The next-largest
supporters of these activities are private
foundations, which spent only an estimated $6.9
million in 1977.[3])

Federal support for research on children's
services is derived from (National Research Council
1978): (1) research and development (R&D) funds
associated with particular federal categorical

[2]This amount does not include large social
programs, such as Head Start and the Community Mental
Health Centers, which are carried on the federal
budget as demonstrations, despite their substantially
service-oriented objectives.

[3]Estimates of federal expenditures represent rough
calculations based on unpublished data compiled for
the Administration on Children, Youth and Families by
the Social Research Group of the George Washington
University; estimates of expenditures by private
foundations were derived from compilations by the
Committee staff.

programs (e.g., throughout the Department of
Education and in the Administration for Children,
Youth, and Families); (2) agencies whose primary
mission is to support social, behavioral, and
related research (e.g., the National Institute of
Mental Health); (3) statistical agencies (e.g., the
Bureau of the Census and the Bureau of Labor
Statistics); and (4) policy-making offices having
advisory and oversight responsibility for a number
of human service programs and nonprogrammatic
policies (e.g., the Office of the Assistant
Secretary for Planning and Evaluation in the
Department of Health and Human Services).

The types of research sponsored vary from agency
to agency.[4] R&D funds associated with categorical

[4]Research on children's services is of several
types: (1) Basic research is directed toward the
increase of knowledge, the improvement of
understanding, and the discovery of fundamental
relationships involved in the provision of
services. This type of research is not necessarily
applicable to the solution of immediate social
problems. (2) Applied research is aimed at showing
how existing knowledge can be used in new and
useful ways to solve immediate or anticipated
policy problems. (3) Evaluation research is
intended to determine the overall effectiveness of
programs, projects, models, strategies, materials,
methods, and costs. (4) Data collection and
analysis are related to social accounting. (5)
Demonstrations are intended to test or promote
particular methods of operation in the delivery of
services. (6) Research utilization is associated

programs tend to be used for evaluations of service delivery at the state and local levels, for demonstration and pilot projects to develop and promote improved means of providing services, or for curriculum development. R&D agencies and policy-making offices tend to support general theoretical and empirical studies of children's services. Statistical agencies are mainly supporters of data collection and special analyses of demographic data on clients and providers.

The funds associated with categorical programs support the largest amount of federal R&D on children's services—approximately 80 percent. Most of this research is on special and alternative education programs in the Office of Education. R&D agencies support approximately 19 percent of total federal R&D. The remaining 1 percent is almost equally divided between statistical agencies and policy-making offices.

The states also sponsor research on children's services. States generally support studies relating to short-term political or administrative problems, which tend to be associated with categorical programs. Total state R&D expenditures cannot be estimated from available data. State-

with the dissemination and diffusion of research findings, such as information systems, conferences, and publications (National Research Council 1978).

supported research generally involves monitoring
program implementation and compliance because state
agencies must be able to prove accountability to
state legislatures, federal program authorities,
and courts. Research is usually conducted under
the auspices of a blue-ribbon panel or task force,
which issues reports commissioned by the governor
or legislature. Other state-supported research
activities include: data collection and analyses
of state service providers; evaluations of service
programs for children that are mandated by federal
or state laws and operated by the states and
localities; demonstrations to develop and promote
improved means of service delivery; and materials
development.

Many analyses of categorical programs sponsored
by government agencies are intended to highlight
inequities and inefficiencies in program management
and to aid decision makers in remedying unequal
distributions of resources and improving the
quality and uniformity of services across
jurisdictions and client groups. Two examples are
studies of educational services for poor and
minority children and of health and child welfare
services. Such research has generally compared
expenditures per child with effectiveness per
dollar spent in several localities within states in
order to determine if expenditures and services are
equitably distributed and utilized across

jurisdictions and among client groups--most notably the economically disadvantaged, the handicapped, and the non-English-speaking (Kirst et al. 1980). For the most part, these analyses have been focused on individual programs and have relied on quite specific concepts of costs and effectiveness.

Private foundations sponsor a relatively small amount of research on children's services. Approximately $7.0 million was spent in fiscal 1977 by the 11 foundations with the greatest interest in research on children's services.[5] In contrast to government agencies, foundations tend to invest in discrete projects that present innovative conceptualizations, analyses of emerging trends, or problems that have yet to reach the attention of policy makers. Many foundations support demonstrations and innovative or experimental projects in service delivery to children that are of either national or local interest. In addition, foundations tend to provide core support for private think tanks. Funds are frequently provided with the expectation that these organizations will also have other sources of support. Foundations are also a major source of support for child-advocacy activities, many of

[5]This figure reflects an estimate based on staff calculations.

which contain research and development components.

Regardless of the source of support, studies rarely extend beyond the scope of a single program because the incentives of mission-oriented funding agencies discourage broad-gauged approaches. And because decisions affecting the design and delivery of services are made on a program-by-program basis, research tends to be oriented to the information needs of program decision makers and is generally limited in its applicability to other issues. Research supported by Title XX of the Social Security Act, for example, is unlikely to explore children's nutritional problems, even though such problems may indirectly influence the effectiveness of child care, homemaker services, and protective services supported under Title XX. Descriptive data collected by federal, state, and local agencies and private organizations for management uses are frequently not comparable. The underlying definitions of services or the characteristics of an eligible client population often differ across political jurisdictions. Availability of information concerning the circumstances of children--indicators of health, education attainment, and the like--are not consistent across states and localities; hence meaningful national aggregates are hard to come by. Similarly, data relevant to children's services collected by social science researchers, although often highly informative, have also tended to be

restricted in applicability and lacking in comparability.

Recent advances in knowledge about the development of children have not been fully integrated into assessments of children's needs or the design of services. Basic research findings have too seldom been incorporated into categorical program studies. For example, outcome measures for early childhood education programs are usually based on IQ tests or related instruments, which do not reflect current thinking on the sequential and interactive nature of cognitive development and which totally ignore the dimensions of social and personality development that have been examined in many basic research studies.

Applied research rarely influences the directions of basic research. For example, by studying how a wide variety of programs affect children, we should gain insights into how the environment shapes development. At a macro level, the key question would be: How does provision of a given service by a particular federal agency affect supply and demand for this and related services by other federal agencies, states and localities, and formal and informal private institutions and organizations? At a micro level, key questions are: How do the children and their families experience the total service system--as fragmented, confusing, and hostile or as unified, rational, and supportive? How does the total service system affect a child's growth and development? Both macro and micro questions have

implications for basic understanding of organizations
and people as well as for more effective service
delivery. So long as research remains fragmented
along programmatic lines, it is unlikely that the
larger picture will be sought.

The kinds of studies conducted within the existing
program framework can be judged fully appropriate
only if one is content with existing programs.
Studies that attempt to achieve broader perspectives
concerning children's needs or the relationships
between public programs and other activities--for
example, supports for children provided by families,
employers, and community organizations--are seldom
undertaken on any significant scale. Few
investigators will be pushed to seek more than
partial perspectives on either children or the
services they receive. An extensive search of the
major journals in the fields of human resorces and
social services recently conducted by Michael Kirst
at Stanford University revealed no comprehensive or
systematic study of children's services (Kirst et al.
1980).

A New
Direction

Often, recitations of this kind do little more than
complain about the apparent impossibility of
achieving comprehensive, well-coordinated, and

adequately financed policies through the political process. That is not our intent. Current policies and programs reflect a constitutional system that provides for the separation of powers, administration in accordance with law, and judicial review--the collective effect of which is to encourage the formation and interplay of interest groups. There is no point in recommending policies and approaches that could only be accomplished by a central planning ministry in a single-party state.

On the other hand, we should not conclude that we are inextricably bound to exactly what exists now. The existing service structure, built by adding but not subtracting, has embedded in it governmental responses to the trends and alarms of the past. We are reluctant to add to it, because it is very complex, expensive, and confusing. But an arterio-sclerotic service structure is not responding to the trends and alarms of the present. Family structure is changing, and services--day care, schools, child welfare services--need to change to provide new cooperative arrangements with families. The trend toward a diminishing supply of jobs and prolonged adolescence implies needs for new kinds and dimensions of youth services. The deinstitutional-ization movement has generated a variety of new and tentative community-based arrangments. Demographic and monetary trends--decreasing fertility,

inflationary pressure on the service sector--require reconsideration of the most efficacious means of implementing services for children.

Redesigning existing programs can improve coordination. Creating new programs or combining or modifying existing ones can improve their relevance to children's needs. Altogether new approaches can be attempted. Changes of these three kinds--redesign, redirection, and reform--ultimately depend on convincing legislators, public administrators, and professional service providers that change can actually lead to greater benefits for children that are at the same time affordable. They are likely to come around to such beliefs, however, only if the appropriate kind of knowledge and information are available. Producing knowledge that will enhance the prospects for beneficial change is a function of research--but it must be of a broader character than the research that is prevalent now.

The contemporary structure of services for children is complex and needful of serious study if it is ever to be understood and managed. That seems to be the purpose of children's budgets (accountings of public spending for children's services and related activities) that are now being developed at several levels of government, as well as children's puzzles (studies of the tangle of local publicly supported activities intended to benefit children).

They are efforts to trace the flow of funds and authorizations as they go through the pipelines. One approach to such study would be simply to establish the structure of the current system, in order to think about more desirable alternatives and possible pathways of change. One must examine and understand knots to untie them. Another approach would be to consider how the definition of needs, policy decisions, and management might reasonably be sited at local, state, and federal levels. Suppose some old knots can be untied--where would we want to tie new ones?

We are still uneasy and unsure about how the complex programmatic structure that exists fits constructively into children's lives--to what extent it is overloading some children (as when they are periodically pulled from their classroom for an entire day, now going to their 94-142 remedial reading program, now going to their Title I facility) and missing others completely. All the perspectives now available on children and families are episodic and limited: behavioral researchers have been looking at children in their laboratories; service providers have been looking at children from the doors of their service establishments. We need to look beyond those doors to see children in the midst of service. We need to look outside the service establishment to see how children and families spend

their days and, in light of such studies, to consider
how services from various sources contribute to their
well-being. Thus we could illuminate the unintended
consequences, both positive and negative, of service
programs.

A BROADER
FRAME OF
REFERENCE

We believe there is a need for research that views
the existing system of statutory and publicly
financed programs in the context of all the sources
of support and assistance for children and their
families.

Government programs in fact account for only a
small part of the overall commitment of resources to
the care and development of children. The family is
the basic provider. Outside the family, several
"systems," ranging from the highly structured and
formal to the personal and informal, serve children
and aid parents in their child-rearing roles. Public
programs are the most formal of these systems. Other
systems include the marketplace and kin and community
networks (Bronfenbrenner 1979). Children usually
receive aid and support from more than one of these
systems. The extent to which families rely on these

37

systems depends on their needs, the availability of services, and their access to the services available.

Patterns of use vary. Low-income families, for example, are less likely to rely on the marketplace; families with no employed workers are unlikely to receive benefits in the workplace; and families that have recently moved into a community are unlikely to depend on their neighbors for help. In addition, patterns of service use may change over time as conditions within the immediate and larger societal settings change. The increased availability of a subsidized public service, for example, may cause family members to rely less on one another. Public programs can complement, reinforce, or improve the functioning of these other, less formal systems, or they can disrupt and undermine them. To the extent that decision makers are ignorant of the inter-relationships among these several systems, the latter is more likely to occur.

Research based on a broad concept of children's services would be concerned with understanding how the circumstances in which families live and manage affect children's development and how these circumstances can be altered to promote growth and socialization or to deal with more specific problems. Such studies would examine how children's needs develop in different contexts, how service responses are initiated, with what effects on

children, families, and society. Different racial,
ethnic, social, or economic subgroups could be
compared in these terms. Cross-national transfer of
data and findings would add an important dimension to
the study of children's services.[6] A broader
approach would encourage consideration of how the
adoption of public policies and practices can improve
the overall circumstances in which children live and
develop.

[6]While we did not conduct an extensive survey of
international studies of services for children,
several useful illustrations come to mind. A British
longitudinal study, in which a birth cohort has been
studied and followed since 1958, has yielded findings
relevant to child development and a variety of
service issues (Davies et al. 1972, Fogelman 1976).
A multivolume series on child care was produced by an
International Study Group for Child Care (Robinson
and Robinson 1972-1979). Werner (1979) summarized
available knowledge about the physical, cognitive,
and social development of chidren living in the
developing countries of Africa, Asia, Latin America,
and Oceana, which are experiencing rapid social
change. Rapoport and Rapoport and their
collaborators (1977) have summarized American and
British literature on emerging patterns of parenting
and their known effects. Kamerman and Kahn (1981)
have studied the known rationales, consequences, and
costs of alternative service and benefit packages in
six countries with different policy approaches to
families in which parents of infants and toddlers
work. Bradshaw and Piachaud (1980) have compared the
systems of child support and the economic value of
that support in European countries.

In this chapter we try to show by three examples how enlarging the frame of reference for studying children's services changes the focus of research questions and shifts the terms of policy debate. These include: child care, services for youth development, and the costs and benefits of financing children's services.

Child
Care

In America today more mothers than ever before are working outside the home: 59 percent of those with school-age children and 43 percent of those with children not yet of school age (U.S. Department of Labor 1980). More than half of all children under the age of 18 live in families in which the mother works or is looking for work, compared with only 39 percent in 1970 (U.S. Department of Labor 1980).

There has been a substantial increase in the proportion of families with only one parent present. Although most children continue to live with two parents, almost one of every five children under the age of 18 is living with a single parent--a rate that is more than 40 percent higher than that in 1970 (U.S. Department of Labor 1980). This increase has been most rapid among families with children under age 6. The vast majority of single-parent families

are headed by mothers; only a small proportion
(approximately 1.5 percent) are headed by fathers
(U.S. Department of Labor 1980).

Comparative employment rates for women with
children show a substantially higher proportion of
single-parent mothers in the labor force (although
the greatest increase has been among mothers in
two-parent families). In 1979, nearly 72 percent of
single-parent mothers with children ages 6-17 and 56
percent of those with children under 6 were employed
or looking for work; nearly 84 percent of those who
worked were working full time. In the same year, 59
percent of mothers in two-parent families with
children of school age and 43 percent of those with
preschool-age children were in the labor force; 66
percent of them were working full time (U.S.
Department of Labor 1980).

In sum, as the number of single-parent families
increases and as the number of mothers in single-
parent and two-parent families seeking outside
employment increases, fewer adults remain at home to
care for children. What are the implications of
these trends? What does it mean that more mothers,
particularly mothers of preschool-age children, are
working, the majority of them full time? What does
it imply about the care children receive at home?
And what does it mean to the variety of institutions
and organizations that care for children?

The care and supervision of children for whom no

adult family member is at home during the day falls into two categories: full day care for children below school age and supplemental care for children who are in school, but for only part of their parents' working hours. Most existing studies focus on the former type of care; consequently, most of this discussion deals with day care, although we return later to the issue of care for school-age children.

Day care has diverse historical and philosophical roots. It has served as a form of care for deprived children or children of parents regarded as inadequate, designed to substitute for parental care or to offer corrective, protective, or therapeutic experiences. This rationale has become less and less appropriate as the number and kinds of children receiving daytime care have changed from a small group with special needs to a very large group of normal, healthy children. As more and more women with young children enter the labor force, it is overwhelmingly the "average" child who is participating in these programs. Although many of these children are from low-income families, increased maternal employment in two-parent families means that many children enrolled in these programs are from middle-income and upper-middle-income families as well. Hence, most day care now responds not to special problems, but to normal needs. From the parents' point of view, these services fulfill

caretaking, socializing, and educational functions, regardless of their auspices.

The other historical and philosophical origins of day care are much more closely linked to its current social functions. Day care has long been regarded as an institutional arrangement designed to free mothers to work outside the home; for example, the Lanham Act passed during World War II provided federal funds on a relatively large scale to provide child care for women working in war-related industries. In the more recent past, the concept of early childhood education, especially for children from low-income families, has become legitimized through the establishment and growth of Head Start and many precursory programs. Day care centers have increasingly committed themselves to providing educational services and are frequently viewed as sources for providing developmental benefits to children.

Over time the distinction between care provided under social welfare auspices and other types of care, particularly that offered under educational auspices, has become blurred. The central aim of all types of care is to provide "good" experience, at reasonable cost, in a convenient location, that will offer a supplemental and enriching experience for children. Day care is not a substitution for parental care, because the children who are served

clearly do have parents--for the most part concerned
and caring parents.

Existing day care research largely falls into two
categories: academic research in developmental
psychology and applied or policy-related research,
much of it oriented toward the agency service system
and the children in it. This discussion is concerned
primarily with the latter body of research. It is
important to recognize how little articulation there
is between the two types of research and how
incomplete a picture they paint of the settings in
which children receive care and of the effects of
different environments on their well-being and
development.

Policy-related research focuses on publicly
subsidized care and examines its costs and benefits
in light of the goals of particular social service
systems or social policies. For example, policy
analysts such as Steiner (1971) and Rivlin (1972)
have examined the costs and benefits of providing
child care for families receiving public assistance
(AFDC) in order to allow them to work (Steiner 1971).
Similarly, policy researchers such as Ditmore and
Prosser (1973) have examined the effects of day care
on labor force participation among low-income
mothers, indicating how day care might facilitate or
impede programs such as the work incentive (WIN)
program. Some research that combines the policy and
development traditions asks whether the day care

experience reduces the developmental gap between children in poverty and other children in society (e.g., Golden et al. 1978). To date, such research has barely begun to address broader questions about the full range of day care options available to parents and children.

The National Day Care Study, carried out in 1977, illustrates some of the strengths and limitations of this research tradition. The objective of the study, funded by the Administration for Children, Youth, and Families, was to examine the impact of regulatable characteristics on the quality and cost of center care, primarily for preschool children ages 3-5. The study focused on staff/child ratios, group size, and the qualifications of service providers. Centers and sites were carefully chosen so that low-income and middle-income groups, as well as black children and white children, were adequately represented. In addition to collecting detailed cost information, the study produced an extensive body of information on the effects on children, their family backgrounds, and the expectations of their parents in choosing particular care arrangements (Ruopp et al. 1979). Results of the study have influenced the recently proposed revisions of federal day care standards for the purchase of services, thereby indicating the value of research on categorical programs. However, because the study was tailored to meet specific agency needs, it did not address several issues

critical to planning future government support for day care.

First, the study did not address the relative cost and quality of family care and care in a child's own home by relatives or paid caregivers. Nor has this crucial issue received the attention it deserves in other studies. One relatively large-scale study (Golden et al. 1978) conducted in New York has addressed these questions. A few smaller studies have been published or are currently in progress (e.g., Prescott 1973, Cochran 1977, Doyle and Somers 1975), as is a large-scale descriptive study of family day care being conducted for the Administration for Children, Youth, and Families. However, a great deal of comparative work remains to be done.

Second, the National Day Care Study, like other policy studies, provides almost no information on the interaction of day care with the home environment in shaping the life of the child. Current research fails to address such questions as: to what extent does a supportive home environment reinforce the positive effects of day care or overcome a negative experience? While some research and commentary exist on parent participation and parent-caregiver relationships (Sjlund 1973; Robinson et al. 1973; Fein 1976; Powell 1977a, 1977b, 1978a, 1978b, 1979; Kamerman 1980), there are few direct investigations of the effects on children.

Third, the National Day Care Study, and policy

studies in general, have not measured the effects of multiple care arrangements on children. Many youngsters attend kindergarten or preschool for part of the day, receive group day care for other parts of the day or on alternative days, and are cared for by a baby-sitter or relative at other times. Research has provided little insight concerning the consequences of these arrangements for children, their parents, and the variety of institutions that provide substitute care.

Finally, one of the most striking limitations of policy studies and academic studies alike is their failure to consider critical age distinctions in relation to types of care. Policy studies, such as the National Day Care Study, have largely focused on children in the 3-5 age group, who often receive some form of group experience through prekindergarten or nursery schools, whether they are in day care or not. In contrast, many studies in developmental psychology have examined the effects of group or center care on much younger children because of the presumed importance of very early experience, particularly mother-child attachment, on the child's social and intellectual development (Belsky and Steinberg 1978, Etaugh 1980, Kagan 1976, Riccinti 1976). Both bodies of research have largely neglected the large group of children under 3, who receive care from family day care mothers (women who care for other children as well as their own) or from

paid or unpaid substitute caregivers in their own homes as well as those of school age, who may receive care before and after school hours and during vacations in a variety of makeshift arrangements.

Other policy studies have similarly been limited in focus and have therefore been less influential than they might have been in informing policy. For example, the National Child Care Consumer Study attempted a comprehensive mapping of the demand for different types of care (UNCO 1975). However, the study followed the research tradition in this area in not tabulating kindergarten and school attendance of children ages 3-5 as child care, thus limiting substantially the worth of its report for planning purposes. It also did not make obvious distinctions in length of care, lumping casual baby-sitting with formal arrangements and creating a category of care of 10-29 hours per week, thus obscuring significant distinctions within that range.

We believe that research should proceed from a broad definition of child care, one that includes out-of-home care under many auspices and even some forms of in-home care. Future research on child care should place it in the larger contexts of the daily life of the child and family and of current social trends and governmental responses to those trends. This widening of the traditional definition will draw attention to critical issues that are not currently being addressed or that are being addressed

inadequately. Examples of areas of potential policy-relevant inquiry based on this broader definition include:

• More comprehensive and accurate studies designed to specify the demand and supply of child care, taking account of the full range of care arrangements available and parental preferences for different types of care for children of different ages.

• Studies of the comparative effects on development of different care environments, taking account of the actual distribution of children across types of care by age. Such studies would include studies of the consequences of formal and informal care arrangements for children of school age and below, the consequences for the shrinking group of children ages 3-5 who do not receive some form of group experience, and the consequences of age-segregated versus age-integrated care.

• Studies of the effects of multiple forms of full-day and part-day care, including nursery school, Head Start, kindergarten, playschools, and other preschool programs as well as center care and family day care. Such studies would investigate the convenience of different mixes of care for parents, the ways in which parents resolve conflicts between

child care and work schedules, the effects of
multiple forms of care on children, and redundancies
or gaps in the total public and private child care
service system.

• Research on the effects of day care on the
well-being and functioning of parents and of the
family as a unit. Existing research on the effects
of day care focuses almost exclusively on direct
outcomes for the child. Almost no attention has been
paid to the significance of day care to parents and
thereby (indirectly) to the child. Both on
theoretical and experimental grounds, there are
reasons for believing that such indirect influences
may be of major importance and therefore should
constitute a major focus of future research efforts.

• Investigation of the extent and type of
public subsidy (and the level of government providing
subsidy) needed to provide access to child care for
families currently unable to afford it. Such studies
would focus in detail on the effects of different
mechanisms (e.g., direct fees for services versus
vouchers) on different segments of the child care
market. Studies would also investigate the
interaction of state and local regulatory policies
with subsidy mechanisms in determining the market
response to public funding.

• Studies investigating the costs of care that
distinguish between costs attributable to the core
care program and those attributable to ancillary
services (e.g., nutrition, counseling, or health
care). The National Day Care Study found that costs
of mandated ancillary services account for a large
fraction of the difference in total cost between
federally subsidized care and less costly parent-fee
care, although the study was unable to attribute
specific costs to specific supplemental services.
The need for such services--hence the cost of
care--varies markedly with the type of population
served (poor versus middle-class groups). Moreover,
ancillary services are much more widely available in
center care than in other care arrangements. A full
understanding of the costs of different forms of care
in relation to their benefits for different
populations must take account of this critical
element.

• Research on the costs and benefits of not
providing care: the cost to a child who may not have
what is becoming the normative experience for most
children; the cost to parents of trying to manage a
complicated amalgam of care arrangements while coping
with work and home responsibilities; the cost to
women and to society of having to withdraw from the
labor force for at least some portion of their lives;

and the benefits of a parent's staying at home to
care for children.

• Research on the costs and benefits to
parents, children, and society of alternative forms
of social insurance provided to families with young
children--e.g., cash subsidies to all mothers versus
subsidized child care--and on ways in which society
can support working parents without creating
disincentives for two-parent families who would
prefer to get by on a single income.

• Studies of the changing relationship between
work and family life as women enter the labor force
and of ways in which the apparent intransigence of
the workplace can be modified to enable adults to be
more productive in both domains.

Adolescence:
Services for
Youth Development

Adolescence, as a socially defined period of life,
seems to be lasting longer for many young people.
Teenagers are experiencing greater social
independence from their parents as patterns of family
care change. The increasingly earlier onset of
physical maturity, the accelerating entry of mothers

into the work force, the increasing numbers of
single-parent families, the access of young teenagers
to automobiles, and patterns of peer interaction that
take teenagers out of the home for extended periods
seem to have resulted in a reduction in close
parental supervision of adolescents. At the same
time, the expansion of higher education and the rise
in unemployment of young people have held back their
entry into the competitive labor market and thus held
them in an independent adult status. For certain
groups of adolescents, particularly black and
Hispanic males, difficulty in getting jobs has become
a prominent national issue. The broader underlying
issue is the extended dependency of adolescents
generally, which leaves them in a kind of limbo with
no tasks to perform and few options for using their
time.

As the Panel on Youth of the President's Science
Advisory Committee noted, when America was still
primarily an agrarian society, the needs of youth
were "necessarily subordinate to the economic
struggle, and the occupational requisites permitted
them to be brought quickly into adult productivity."
The dominant institutional settings in which young
people grew up were the home and workplace, and
parents generally exemplified the future roles of
their children. In short, socialization was
accomplished through continual interaction with
parents and nearby adults. But as society evolved

through the 20th century, a long period of formal
training with specialized instruction was initiated.
As a consequence, the world of the maturing child,
formerly dominated by the home, became dominated by
the school at the formal level and by the peer group
at the informal level (Panel on Youth of the
President's Science Advisory Committee 1974).

Reduced supervision by the family and a reduced
impact of the world of work on older adolescents has
changed the experience of adolescence. Peers, social
institutions, and the broader community have become
more influential. Advertising has fostered and
sustained the notion of a separate teenage culture,
with distinct patterns of consumption, recreation,
and peer associations. Research on the effect of
these larger forces on youth is unequivocal in
affirming their importance, but knowledge about how
youth interact with the institutions and communities
surrounding them is sparse (Hill 1973).

We do not know enough about what contemporary
adolescent lives are like. We can sense what may be
missing from the lives of many young people--e.g.,
close family supports, clear paths to the adult
world--but our knowledge of the forces that have
replaced them in importance is inadequate, as is our
knowledge of the way adolescents interact with the
numerous programs available to them. This lack of
knowledge hinders the design of programs that hold
some promise of benefiting youth. It also gives rise

to the perception, frequently encountered in schools
and juvenile courts, that the youth being served are
alienated from many community norms and relationships.

All levels of government are being pressed to
assume greater responsibility for services to
adolescents who are termed "high-risk" youth or
"youth with special needs" for whom traditional
services have apparently not worked. The Juvenile
Justice and Delinquency Prevention Act of 1974
emphasized a movement away from the provisions of
children's services in residential institutions
toward supervision at home or in residential
community environments such as halfway houses and
outreach centers. As a stipulation for states to
receive federal funds (specifically from the Office
of Juvenile Justice and Delinquency Prevention), the
act mandates deinstitutionalization of status
offenders and of dependent and neglected children
through reductions in the rates at which these
populations are institutionalized. It prohibits the
incarceration or detention of juvenile offenders in
adult correctional facilities, the commingling of
delinquents and status offenders, and the institu-
tionalization and commingling of dependent and
neglected children. Though no federal laws have been
enacted to mandate the deinstitutionalization of
mentally impaired children, several lower court
rulings have upheld the principle of maintaining
these children in "least restrictive" environments

(Wyatt v. Stickney 1971, New York State Association for Retarded Children v. Carey 1975).

The emphasis on deinstitutionalization has brought many children who were not ordinarily part of the service system or who were cared for previously in isolated residential facilities into supervisory settings closer to the mainstream of community life. In so doing, it has stimulated expansion of publicly financed home and community-based services to meet the special needs of these children and their families.

The full effects of this change in the pattern of services to youth are not yet understood, but several trends are emerging. First, the effort to avoid institutional care of youth may have resulted in more of them coming under public jurisdiction. At least in some states, the growth of programs to divert youth from the penalties of the juvenile justice system has increased the overall number of youth in the public purview; for example, those who once were sent home by police are now referred to a "diversion" program. Second, many observers believe that the movement away from residential care has brought many adolescents and pre-adolescents with severe behavioral disturbances into the child welfare system, thereby placing special demands on child welfare and educational institutions. There has been an increase in the number and rate of placements of children in various forms of foster care. According

to a recent national survey of children's services, a significant proportion of children referred for foster care or other traditional child welfare services were identified as status offenders and juvenile delinquents by the court, the probation officer, or the police (Shyne and Schroeder 1978). Between 1960 and 1974 the rate of placement of children in foster care increased from 3.7 to 4.7 per 1,000 of the population. There has also been an expansion of care in group homes, from a 1970 capacity of 4,800 children nationally to a capacity of 6,000 in 30 states (excluding New York and California) in 1974 (Wiltse 1978). In addition, there has been a proliferation of special community-based social and educational programs for the mentally retarded, the mentally impaired, and for the vaguely defined category, "youth with special needs." The nature, extent, and value of these new service programs are little understood.

Programs associated with the trend toward deinstitutionalization are not the only evidence of growing government involvement in services to adolescents. A variety of programs provides vocational and employment training and job opportunities to unemployed youth, treatment and education to young drug and alcohol abusers, and treatment and counseling to pregnant teenagers. However, these programs are focused on specific target groups labeled by reference to their most

highly visible problem: delinquents, status offenders, foster children, unemployed youth, substance abusers, teenage parents, etc. Most programs reach only a fraction of those who could benefit from them, and the vast majority of existing services do not take a developmental approach. They do not encourage continuity from childhood to adulthood and do not promote the notion of healthy development based on recognition of social, cultural, intellectual, and emotional differences among adolescents in different social and economic circumstances.

The prevailing view of an appropriate strategy for youth services has not always been so narrow as it is now. Broader lines of thought on youth services can actually be identified in the early work of Shaw and his colleagues (1929) on the influence of delinquent subcultures and the relationship of these subcultures to the broader community. Similarly, in the late 1950s and early 1960s, the work of Cloward and Ohlin (1964), Spergel (1964), and other researchers investigating patterns of delinquent youth behavior stressed the close and subtle ties of youth to the institutions and social agencies that surrounded them as well as to the social norms of these surroundings. Their problems were then perceived as reflections of social problems defined in the broadest sense; the way to change youth behavior was to change society. Attempts were made to translate this thinking into

operational strategies, first in local demonstration projects and then in national policy. (The Youth Development and Delinquency Prevention Act of 1961 grew, to some extent, from this line of thought.)

Yet this broad view of youth and their problems proved difficult to sustain in policy and program terms, because it dealt with youth services primarily in terms of large-scale social change. The difficulties in accomplishing such change have proved immense, and the public commitment to such change has been variable.

Research has not pictured adolescence as one phase in a continuing developmental process. Researchers have tended to focus on the typical psychological and maturational changes of this stage of life. Funding and programming for both research and services have concentrated on the adolescent problems that have dominated public and voluntary activities with adolescents. There is a large research emphasis on delinquency and crime, pregnancy, drug use, alcohol-ism, and employment. There has been insufficient research oriented at the larger, more basic question of the role of adolescence in American society.

To obtain knowledge that can help define the appropriate level and form of public responsibilities for youth, investigations of the social nature of adolescence must supplement individual-oriented findings. A research agenda in this area should maintain an intermediate course between a broad

approach focused solely on institutional and social changes--over which public policy has little influence--and a narrow approach focused on the individual--which may be ineffective. The research agenda we outline below makes four main suggestions for research: research on the social context and incidence of specific behaviors among adolescents; research on patterns of family care for adolescents and the impact of public intervention on the family; research on the effectiveness of new community-based service delivery systems; and research on the issue of adolescent emancipation.

Research on the Social Context and Incidence of Specific Behaviors Among Adolescents

If we are correct in assuming basic changes in the nature of adolescence, an initial step for research is to build a greater understanding of the impact of these changes on the lives of young people. The research we suggest focuses on learning more about the day-to-day experiences and perceptions of adolescents. Not only do we need to know more about the interactions of adolescents with their families and peers and in schools, but we also should study their interactions with public and private agencies, with informal networks of community support, and with disruptive community conditions. More investigation of the changing economic role played by adolescents within their families would also be valuable. To

what extent do youths in different social groups work at part-time jobs, and how do they spend the money earned? If both parents or the single parent is working, to what degree are family needs (e.g., child-care and household needs) fulfilled by the children and adolescents? To what extent do children of different ages still contribute to family businesses and farms through their labor? What is the impact of such work on the adjustment of families and children and on their use of and need for agency services? How do these economic activities affect the lives of children and relate to changing definitions of adolescence?

Examination of specific types of behavior and experiences among adolescents would also have great utility in planning youth services. What is now interpreted as problem behavior among some adolescents who come to the attention of public authorities may be typical behavior, characteristic of adolescents of all social and economic backgrounds. Self-reported data by adolescents tend to support this view, indicating that minor misbehaviors and mild delinquent behavior are widespread among youth. Research on the nature and prevalence of misbehavior in school, running away, minor crimes against property, and so forth could provide a basis for identifying behaviors that raise public concern and require intervention whether they are typical or not.

Much of what now seems to be an increase in minor
juvenile misbehaviors may in fact be harmless, quite
common behavior when examined within a broader under-
standing of adolescence. On the other hand, serious,
violent criminal activity among youth appears to be
growing (Strasberg 1978), and public agencies in most
states report an increase in the number of adoles-
cents who exhibit destructive behavior and extreme
conflicts with family, schools, and courts. It can
be argued that for these youth, the period of adoles-
cence establishes the range of adult vocational
options and determines subsequent antisocial patterns.

Research related to these adolescents has two
aims: the identification of demographic and
behavioral characteristics of youth who cause severe
damage to themselves and others and analysis of the
effects of conditions experienced in adolescence over
time. The behavior of many young people is
disruptive to the community as well as to their own
social and intellectual development. There are now
few empirical data on the characteristics of "high
risk" youth who exhibit violent, destructive, and
antisocial behaviors. A suggested first step for
descriptive research is to define this group and
identify the characteristics of youth who are
perceived as placing new burdens on public services.

To identify forms of intervention in adolescence
that can make a difference in adult life, longitudi-
nal studies are suggested to track the effect of

major life experiences and of various interventions
on subsequent adult patterns. Research over time on
target groups such as foster children, youth who act
out in schools, and youth who commit violent crimes
could begin to identify those characteristics that
should receive program response.

Research on Patterns of Family Care for Adolescents and the Impact of Public Intervention on the Family

As public responsibility for supervision, support,
and assistance to youth continues to increase, there
is growing concern about the effect of this expansion
on family care of adolescents. Ultimately this
question must be examined at two levels: How does an
expansion of public support for certain categories of
youth (for example, handicapped youth or mentally
impaired youth) alter the general pattern of family
care? And how do service interventions on behalf of
an adolescent affect his or her family support? To
some extent, recommending research in this area is
anticipatory. The usual pattern would be to expand
public responsibility for a target population and
then, retrospectively, examine its effect on family
patterns and on behavior. We suggest instead that
demonstrations and experimental research intended to
measure the effects of promising interventions be
initiated to guide the likely expansion of public
services for youth.

Key issues involve the activities and especially

the responsibilities that are expected of adolescents in different segments of American society. A widely held view is that participation in responsible activities serves to counteract problem behavior, but the phenomenon has not been sufficiently researched. Investigations along this line are of high priority.

A related topic requiring systematic study is the availability of adults in the lives of adolescents. Adult participation, which is seen as a constructive force in the development of teenagers, is being reduced as a function of decreasing adult volunteerism. As more parents, both mothers and fathers, work outside the home, they are not available to participate in the activities of adolescents. Such roles as scout leader, which have traditionally been filled by parents or other adults on a volunteer basis, are either remaining unfilled or are being filled by paid service providers. Both the extent and the role of adult participation in the lives of adolescents should be subjects of further research.

Research on the Effectiveness of New Community-Based Service Delivery Systems

The pressure to produce community-based services has resulted in many new programs and agencies for youth. These agencies claim an increasing proportion of public and private service dollar, but almost no sound evaluative research is available on their

performance. To a great extent, the responsibility
to produce this research should rest with the public
sector, yet the strength of the existing public
policy commitment to these new, community-based
programs suggests that the private sector should
support research in this area as well, since its
efforts are unbiased by prior policy decisions.

Research on the Issue of Adolescent Emancipation

Many of the current issues relating to parental
consent for medical service, independent living,
receipt of transfer payments, and labor-market policy
are premised on views of the age of emancipation--the
age at which youth are able and are allowed to make
their own decisions about their actions and well-
being--or differential emancipation by issue or
domain. Research is needed to provide an empirical
base for consideration of such questions in a policy
context.

Our suggestions include both basic research and
evaluation. Little knowledge currently exists
concerning adolescent decision making. In designing
interventions it would be useful to know much more
than we do about the nature and quality of the
decisions adolescents make when they are
"emancipated"--who influences them, what weight is
given to the future consequences of their choices,
etc. as well as how these factors vary among
adolescents at different ages. Such research could

include the evaluation of youth service bureaus,
youth advocacy agencies, nontraditional networks for
youth that have emerged in urban areas, and
coalitions of informal service providers that have
developed as the result of recent public and private
financing.

Financing Children's Services:
Tracing Costs and Benefits

As noted above, in 1935 child welfare services
provided under the Social Security Act were supported
by approximately $1.5 million in federal funds
through grants-in-aid to the states; in 1977, more
than $1 billion in federal funds was allocated to
these services under Title IV and Title XX alone
(U.S. Office of Management and Budget 1977).
Although data concerning the proportion of federal,
state, local, and private funds expended for
children's services in each of the states are
unavailable, studies done in Ohio, Illinois, and
Massachusetts indicate that a combination of federal
grants and state and local tax revenues comprise the
dominant source of supply (Case Western Reserve
University 1977, Sheehan 1977).

With this increase in public funding, private (or
voluntary) child welfare agencies have become more
dependent on government support for two reasons.

First, private agencies have found it increasingly difficult to finance their programs from voluntary funds alone and have relied on public funds to meet their rising costs. Second, since the late 1960s, as federal categorical programs specifying types of service and delivery have become more prominent, states have tended to rely on the purchase of services from private agencies. When state administrative structures prevent public agencies from delivering services or when specialized services, such as abortion counseling, are required by specific client groups, state officials have found greater flexibility in subsidizing the private sector than in delivering services directly through their own agencies. This is also true when voluntary interest groups are strong in certain areas of service delivery, as, for example, are the United Way and the Child Welfare League of America; they advocate public subsidies and the purchase of services (Haring 1976). Significantly, however, the current strategy of using general tax revenues to support children's services, particularly child welfare services, has made it difficult to trace expenditures and to know exactly what public resources are buying.

Complete data concerning public support of services delivered by private child welfare agencies in each state are unavailable. However, 90 voluntary agencies for which comparable data are available for

1960 and 1975 showed an average increase from 28
percent to 57 percent in the proportion of their
income derived from government sources (Haring 1976).
In Illinois, for example, private voluntary agencies
serving children derive between one-third and
one-half of their funding from government sources.
In New York City, 85-95 percent of the operating
budgets of the nearly 90 agencies serving children
are supported by public funds. Moreover, voluntary
child welfare agencies were deriving 90 percent of
their budgets from public sources in 1978, while
voluntary family service centers were deriving 22
percent of their budgets from public sources.

In a very real sense, the method of financing
services for children drives the system. Budgeting
allocations determine who gets services; the
long-established pattern of grants and contracts
often determines which agencies deliver services; the
priorities associated with financing create
incentives that influence the type of services
provided; and the amount of financing influences the
level and quality of the services. In this regard,
several pioneering studies have attempted to describe
patterns of expenditures at the federal and state
levels. For example, as a part of a larger study of
federal programs and policies related to children,
Ruth Rose of Harvard University presented a scheme
for categorizing expenditures according to whether
programs were intended to benefit only children or to

benefit children as a part of a larger population (e.g., families, the mentally ill). Programs were also categorized according to whether they were intended to benefit children directly by providing cash and social services or whether they benefit children indirectly by providing technical assistance, training, and research support (Rose 1976).

"Children's budgets," which attempt to trace the flow of funds from the federal government through the states to the point of service delivery, have been developed for Ohio, North Carolina, and Illinois, and one is now being developed for New York City by researchers at Columbia University.[7] The National Institute of Education has recently supported a more ambitious effort to develop a national youth budget.[8] The purposes of the research are: (1) to examine the changing scale and nature of federal expenditures for youth by conducting a longitudinal analysis; (2) to examine equity in the distribution of federal expenditures for youth by comparing the geographic

[7]Charles Brecher and Raymond Horton, senior research associates at the Center of Conservation of Human Resources, Columbia University, are developing a children's budget for New York City with support from the Ford Foundation.

[8]Brecher and Horton (see note 6) are carrying out the Youth Budget Project, supported by the National Institute of Education.

distribution of resources with the distribution of children; (3) to examine the nature and scale of total public expenditures for youth; and (4) to measure efficiency in the delivery of services to youth by analyzing the cost structure of these services.

These studies have found it a major effort merely to identify the patterns of fund disbursement from federal to state to local levels of government and to identify which services are financed with what funds. The lack of data partially explains the lack of research attention to financing issues. In addition, service financing is usually considered a narrow economic issue. For example, much of the available research on the financing of children's services consists of cost-benefit studies that evaluate alternative program strategies for foster care, day care, and institutional care, etc., in comparison to community-based services. The costs considered in these analyses have been the direct dollar expenditures by the state or local government or by the private sector.

Examination of service financing in this way can be useful, particularly if the goal is to clarify a practical range of program choices. However, choices framed in these terms—that is, within the framework of an existing service system—do not promote an examination of the benefits of one service sector in comparison to another. Nor can such analyses provide

information on how decisions about resource allocation are made. As long as financing is thought of only as a technical aspect of the existing system of services, there is little possibility for a comprehensive review of how public responsibility for children is financed and discharged.

Financing should be viewed not only as a disbursement of funds but as the embodiment of decisions on how to carry out society's responsibility for children. This perspective suggests a number of research issues.

Basic to any analysis of the efficacy of children's services is a comparison of the stated intentions of service programs with the services actually financed under these programs. This type of analysis has been undertaken within specific programs, but rarely at levels that enable the actual uses of service resources to be evaluated against the broad public goals that these resources are expected to accomplish.

Financing children's services involves a complex process of choice influenced by program guidelines, the pattern of intergovernmental relationships, and political realities as well as professional decisions on effective service interventions. There is surprisingly little research that documents how service financing and budgeting are accomplished or why certain decisions are made rather than others.

A first step in building a greater understanding

of these decision-making processes could include
studies of the budgeting processes of state
governments, particularly the processes by which
financing for children's service is negotiated in
relation to financing for other target groups; the
process by which public finances are allocated to
private agencies rather than to direct delivery by
public agencies; and the degree to which executive
and legislative decision makers are aware of the
results inherent in their decision making.

One of the most rapid changes in children's
service financing has been the shift from private to
predominantly public financing. The long-standing
control of children's services by private agencies is
changing, largely because the bulk of financing for
these agencies now comes from public funds. Although
this change is acknowledged as a key factor in the
nature of service delivery and has been documented by
the Child Welfare League of America and others, its
implications are little understood. Two types of
research seem useful here. Policy researchers could
examine such issues as: the incentives created by
public financing and how private delivery systems
respond to these incentives as well as the nature of
the authority exercised by a private agency when it
is supported by public funds but governed by a
private board. Empirical research and data gathering
are needed on such issues as the extent to which
residual private financing for children's services

shapes service delivery; the extent to which the
influx of public money has driven out private
financing; and the effect of public financing, both
direct expenditures and tax expenditures, on informal
service networks and supports for children and on
services provided in the marketplace.

The current patterns of children's service
financing have been so well established that little
research attention has been given to alternative
methods of financing. Alternative financing
mechanisms have been suggested for public education,
e.g., a voucher system that would provide parents
cash or coupons redeemable at several different
schools for educational services, thus allowing
parents to select the learning environment for their
children. One alternative for children's services
does, in fact, exist, in the form of the income tax
credit for the purchase of child care services. It
is possible that other alternative financing methods
could be effective in other areas as well. Both the
voucher mechanism and a refundable tax credit could
be worth testing for child welfare services as well
as for youth services. Providing more direct control
to families over the service they receive may promote
a different level of participation.

Current measures of the effectiveness of public
program expenditures have focused on the direct costs
and benefits of service provision. Cost-benefit
analyses, however, have generally ignored the costs

to families and society of not providing services--
for example, the opportunity costs to a parent who
refuses employment outside the home because adequate
child care is unavailable or the costs to society of
providing long-term care to a mentally retarded
individual who was not provided the necessary basic
training to improve his or her self-sufficiency.
Similarly, analyses have often focused only on the
direct benefits of interventions, thereby missing
important outcomes, such as the strengthening of
informal helping networks as a result of early
education programs that require parental
participation. In addition, not only have such
analyses frequently focused on the short-term costs
of providing services or of providing services versus
cash benefits, but also they have not given adequate
attention to the long-term costs of alternative
interventions. Future analyses of public service
financing should include measures of the costs to
parents, communities, and society of providing or not
providing particular services. They should take into
account both direct benefits to children and indirect
benefits to their families and other institutions
participating in their care.

AN AGENDA

FOR RESEARCH

_____

Children are dependent on a wide variety of people,
institutions, and circumstances in their daily lives.
Publicly financed services are only a part--usually
only a small part--of the child's environment. To
study children's problems and needs only in narrow,
program-specific contexts is to miss a vital point:
the effectiveness of these services depends on how
they relate to the overall environment in which
children live.

In our discussions of child care, youth services,
and public financing of children's services, we have
tried to show that focusing on children rather than
on agencies and programs leads to more fundamental
questions concerning children's needs and the ways in
which statutory and publicly financed services can
meet those needs. Child care may better be
approached as a broad range of formal and informal

75

activities contributing to the care and development
of children, rather than as the daytime maintenance
of youngsters in the child welfare system. Adoles-
cent services, now established as categorical
programs to curb juvenile delinquency, teenage drug
abuse, youth unemployment, and the like, may better
be conceived as activities organized to support a
healthy transition from childhood to adulthood. The
financing of children's services may more appropri-
ately be recognized as the product of a complex
process of choice involving the allocation of time,
money, and human resources among a wide variety of
public and private, formal and informal activities.

These examples indicate that future research and
analysis concerning policy on children's services
requires the development of a strong base of
empirical knowledge concerning children's lives. We
need to learn much more than we now know about the
actual experiences of children and their families in
different segments of society. For example, where
are they living? What are the conditions of their
homes, neighborhoods, and communities, including
their schools, churches, parks, playgrounds, and the
other important places where they go? How do
children spend their time out of school and in what
environments? Who are the important people in their
lives, including parents, siblings, extended family
friends, and caretakers outside the family? What do
these people do for children, when, and where?

Future studies should be more informative as to how children's needs vary with differences in environment or context. For example, what are the differences in children's needs between low-income and middle-income households, between single-parent and two-parent households, between one-earner families and two-earner families, between families under stress (e.g., from serious illness, separation, or unemployment) and those not under stress, and between rural, urban, and suburban settings? How does a child's age affect these subcultural differences? All children require food, shelter, clothing, and health care. They also are presumed to benefit from the continuous involvement of one or more loving and concerned adults. Yet certain environments are more supportive of a child's healthy development than others. How do social conditions affect the ability of a child's family to meet these needs or the ability of others outside the family to provide for his or her care? Which needs are not being met? How do children whose needs are not met within the family or by social programs cope? What alternative mechanisms are available to them? To what extent and under what circumstances do they benefit or are they adversely affected?

New information is needed on services, highlighting how services in different systems complement or conflict with one another. Because families generally rely on a variety of supports, it is

important to understand how these supports vary among different sectors of society and among different societies and how they improve the contexts in which children live. New information can be gained from research on children, families, and services in other countries. Although we have not attempted a systematic review of the status of research on services for children outside the United States, an agenda for strengthened research on children's services would certainly include topics that would benefit from cross-national transfer of data and findings.[9]

A range of questions awaits further research efforts: to what extent are children from different social and economic circumstances dependent on the state to meet their needs? How does that dependency affect their capacity to become self-sufficient adults? How does the availability and/or imposition of government aid and support affect the availability of services provided in other systems, such as kin

[9]Some studies that we are aware of include an examination by Kahn and Kamerman of income packages potentially available to 15 family types in 8 countries; a study supported by the Foundation for Child Development in which children and parents in France and Japan are being interviewed about critical aspects of their experiences; and a cross-national longitudinal study by Bronfenbrenner of formal and informal community support systems and service networks.

and community networks? And how do entrenched
organizational patterns and professional practices,
such as those characteristic of schools, social work
agencies, and health care agencies, constrain
opportunities for redirecting or reorganizing service
delivery?

Suggested
Topics for
Research

Child care, youth services, and public financing are
by no means the only important issues for future
research. Indeed, for the existing system of public
services to be redirected in ways that increase its
capacity to enhance children's normal and healthy
development, future research should address a number
of major themes and topics, of which the following
list is suggestive but by no means exhaustive.

The Role of the Schools in the Provision of
Children's Services

Schools have traditionally defined their role as
the provision of academic education--the development
of cognitive skills such as reading, writing, and
mathematical reasoning. Yet as we understand the
circumstances that mitigate the ability of teachers
to teach and students to learn, issues are raised

concerning the provision of services in schools other than basic instruction. Research has shown that services such as nutrition, medical care, recreation, and psychological counseling may significantly affect a child's ability to perform well in the classroom. Similarly, the Education for all Handicapped Children Act has highlighted the importance of a variety of other ancillary services, such as transportation and the provision of special facilities and instruction to all children with handicaps or other special needs. As more and more mothers of school-age and preschool-age children enter the labor force, it seems likely that schools will more frequently be called on to provide child care and after-school programs, although the extent of such demand is not known. Moreover, as the problems of adolescents are better understood, many parents and experts look to the schools to provide numerous noncognitive activities deemed valuable to youth development, such as extracurricular programs, vocational and work-related programs, and community projects. How effective schools are in providing these more diverse services is influenced by the training and preparation that school personnel receive.

Future research should explore the potential role of the schools in providing services other than academic instruction, examining the variety of demands on schools for services, the extent to which these services are currently being provided under

other auspices, and the kinds of problems that would
arise in relocating these services in schools. One
of the issues involved is the extent to which
teachers and other school personnel are adequately
trained to provide services beyond academic
instruction. Future studies should measure the
relative costs and benefits of expanding the role of
the schools in service provision. They should
explore the costs of providing these services in the
schools versus other social service settings and the
costs of not providing them at all. Moreover,
research should explore the effects of diverting
schools from their traditional functions. To the
extent that children's and their parents' perceptions
of the role of the schools is altered, is the
effectiveness of these institutions and their
traditional service providers in teaching cognitive
skills adversely affected?

Public Supports for Parenthood

As we have emphasized throughout this report,
publicly financed children's services mandated by
statute are predominantly addressed to children's
isolated problems and needs--for example, retarda-
tion, abuse, sickness, educational deprivation, and
delinquency. Yet children's problems may, in fact,
be a direct reflection of their parents' inability to
perform their child-rearing functions. To the extent
that parents are in need of assistance, children

frequently are, too. Some public programs are aimed at helping families.

Aid to Families with Dependent Children (AFDC) provides cash to eligible families. The Work Incentive Program (WIN) provides jobs, job training, and some related day care services for parents who are poor, unskilled, and unemployed. Medicaid provides health services to poor families. Social Security provides social insurance in cases of death or disability and survivor benefits to young people up to the age of 23 who are in school. Yet each of these programs is aimed at a particular problem or problems, and rather than complement one another they frequently conflict in important respects. To the extent that one program eases the burden of poverty, it may cause a parent or family to become ineligible for benefits provided by another program or for other public services directed to children. In many cases these programs and services inhibit the ability of parents to obtain aid and support through other systems--for example kin and community networks--by the way they define eligibility.

Future research should explore the needs of families in a variety of circumstances as well as the extent to which public programs directly aid or do not aid parents. They should also examine the extent to which public programs and other interventions support or do not support the effective functioning of informal service systems. For example, how do

factors such as television influence parents'
perceptions of their roles as parents and facilitate
or impede their functioning? A major question
concerning public supports for parenthood is what
constitutes a good or helpful intervention. If
helpful programs can be envisioned, how do we measure
their costs and benefits?

The Appropriate Role of the State in Protecting the Best Interests of the Child

In recent decades the relationship between the
state, the parent, and the child has shifted. As a
result of both legislative enactments and court
decisions, the state has assumed greater responsi-
bility and jurisdiction over minor children.
Available data indicate that the states are
increasingly intervening in families in which
parents' ability to care for their children is
unclear; two examples are cases of child abuse and
status offenders. In many situations parents no
longer have autonomy to decide what is in the best
interest of their children--for example, to refuse
medical treatment of a child who is ill, to
discipline children as they see fit, to refuse
services and counseling provided as a package of
benefits, or to maintain jurisdiction over a child
declared in need of special supervision.

The recent trend toward ever broader
interpretations of children's rights has had a

similar effect. It can be argued that most recent government decisions, such as those concerning a minor's right to obtain an abortion without parental permission, are in fact further expansions of the state's rights at the expense of parents' rights rather than expansions of children's rights. In the end, for example, it is the courts and social service agencies--not a young girl or her parents--that have authority to decide whether she can obtain an abortion if she is unable to pay for it herself.

Future studies should explore the implications of this changing relationship between the state, the parent, and the child. To what extent is in fact jurisdiction and responsibility for protecting the best interests of children shifting away from parents? How does this relationship vary across states and localities? Research should also examine the effect of this changing relationship on parents in their role as parents and in their relationship to their children. Do parents view themselves as more dependent on outside agencies in raising their children? Do children have altered perceptions of their dependency on their parents? Future studies should examine the extent to which this changing relationship, or the perception of it, has influenced children's needs and affected the ways in which they are served. Has it increased the demand for services outside the family? Has it also affected the quality of care and services children receive? For example,

in states in which public jurisdiction has brought
more children into the system than can be adequately
cared for, have public services harmed children more
than they have helped them? Where the courts, in
particular, have been unable to cope with the
overload, what other public agencies have become
involved and with what effects on the children being
served?

Levels of Government in the Provision of
Children's Services

Government at all levels--federal, state, and
local--is involved in the provision of chidren's
services. Neighborhoods also play a significant role
in service delivery. As more federal funds have been
provided and as more programs have been authorized by
statute, the federal role has expanded relative to
that of other levels of government. Yet primary
responsibility for the direct delivery of services to
children and their families has remained in the
states and localities. Federal funds are allocated
by a variety of mechanisms--among them block grants,
revenue sharing, and matching grants--each entailing
different degrees of federal jurisdiction over the
expenditure of funds. The states rely heavily on
federal monies to support their programs, although
the implications of this growing dependence for state
and local control over the content and management of
services are not clearly understood.

Future research on children's services should
examine the distribution of responsibility for
serving children among different government levels.
To what extent do federal funds and the regulations
governing their disbursement provide leverage to
state and local governments in supporting services
for children? To what extent do state and local
agencies maintain jurisdiction over services despite
the increasing infusion of federal funding? How do
neighborhood-based services fare under overlapping
jurisdictions of other levels of governance? How
does the distribution of public responsibility for
serving children affect the availability of services
and the quality of care provided?

Alternative Services for Children

In many communities a variety of alternative
services have developed to meet the special needs of
children who are not always well served through
regular organizational channels. Among the most
visible of these are communes, runaway houses and
drop-in centers, which provide shelter and counseling
for non-offender youth. Alternative schools have
also been developed in many communities to provide
educational environments that offer greater freedom
than regular schools in academic studies and the
scheduling of activities. For the most part, these
alternative services have experimented with anti-

organizational forms that emphasize a democratic relationship between caretakers and clients, teachers and students. All members of the community participate in decision making affecting roles and routines.

The scope and potential effectiveness of various alternative services for children are not clearly understood. These programs have generally been short-lived--less than two years for most alternative schools, for example. Although it is frequently recognized that these programs perform important functions not performed by formal institutional services, they have had difficulty attracting sufficient financial support to keep them going. Because typically they do not adhere to the eligibility requirements and operational guidelines that encumber public monies, they have not received federal, state, or local funding. Moreover, although committed to the mission of their alternative programs, many service providers have proven to be unsophisticated administrators and fund raisers.

Future research on children's services should include studies of alternative services. Although it is often believed that these programs provide significant benefits to the children they serve, actual treatment effects have not been adequately measured. What can these services accomplish? In what settings do they most effectively meet children's needs? Which children are best served?

How do they complement or conflict with other
publicly and privately provided services?

The Development of Standards for Children's Services

As more specialized programs have been legislated
at the federal and state levels and as more public
funds have been committed to providing services for
children, pressure has been growing to ensure that
children are well cared for and that public monies
are well spent. In many cases the result has been
the development of standards to regulate service
delivery at the local level. Standards of practice
have been established for almost all publicly
supported services, including day care, foster care,
education for the poor or handicapped, health care,
nutrition and feeding, etc. Yet the content of
standards has frequently raised numerous questions
concerning their function as mechanisms to ensure
quality control and accountability. Should
regulations require optimal levels of care even when
such standards are impractical and unenforceable? Or
should they reflect practical norms that, though not
optimal, are attainable and will ensure better care
for children than if no standards existed? The issue
is one of formulation. As in the case of the Federal
Interagency Day Care requirements, child development
researchers and many parents and taxpayers would
argue for regulations that require the "best" care
known. Service administrators and practitioners, on

the other hand, would argue for regulations that
require the "best" care that can reasonably be
provided.

Future research should aid in the formulation of
standards of service delivery. By providing
knowledge of the conditions under which children live
and their needs, it can also help to identify levels
of care that both constitute benefits for children
and are attainable. How do various standards of
practice affect the adequacy and efficiency of
service delivery? Are different levels of care
required for children under different circumstances?
How does the establishment of standards and
regulations affect the availability of sevices in
different systems and children's access to them?

Future Support for
Research on
Children's Services

Where should support for this kind of research come
from? Who should do the research?

Empirical studies reflecting broad perspectives on
children's services already represent a growing
component of the research literature. In general
these studies have been sponsored by private
foundations and a handful of federal policy-making
offices and agencies whose primary function is to

support social research and development rather than to promote specific programmatic interests. This kind of work has not, as a rule, received support from mission agencies charged with administering the numerous programs directed to children and their families.

Most research on children's services is performed by university-based researchers, private for-profit and nonprofit research corporations, public interest or advocacy organizations, and in-house government research and analysis shops. Different incentives prevail in each setting, and these differences in incentives are reflected in the styles of investigation, types of research products, and perceived audiences for the researcher's work that are characteristic of each setting.

University-based researchers, for example, place a high value on methodological rigor and sophistication and on contributions to specific disciplines. They tend to avoid general exploratory studies, broad descriptions of service processes, extensive, "low-level" data collection efforts, and broad interdisciplinary studies. Moreover, because academic researchers are cautious in drawing conclusions or making recommendations on the basis of limited evidence or in the presence of major uncertainties, they are less interested in addressing the immediate questions of policy makers.

Private for-profit or nonprofit contract research

organizations, which are structured and staffed to perform both large-scale, long-term data collection and short-term policy analysis, have the capability to respond quickly to the information needs of government officials and therefore tend to structure their studies to appeal to the interests of policy makers and program managers. These performers are more involved in data collection and analysis, evaluation research, and the design of demonstrations than they are in theoretical or methodological investigations.

Studies conducted by researchers in public interest and advocacy organizations tend to be deliberately forensic in nature. Their intent is to influence decision makers at the federal and state levels to adopt their recommendations on issues regarding children's services, and they often gather information with a particular slant.

Research conducted by government agencies tends to be of several types. First, researchers in statistical agencies, such as the Bureau of the Census or the Bureau of Labor Statistics, generally perform special analyses of official data. Their reports are intended to inform decision makers, but they are also meant to be of value to the larger research community. Researchers in policy-making offices conduct studies directed at informing the short-term policy and program choices of agency decision makers. Their studies may take the form of

synthetic reviews of existing research that bears on
a particular policy question or analyses of data
collected by others. Researchers in state and local
government agencies are often engaged primarily in
designing demonstrations intended to develop and
promote the adoption of innovative methods of service
delivery or in conducting program evaluations.

If research on children's services is to move in
the new directions we are recommending, research
support agencies and performers with the appropriate
incentives must be recruited to the effort. Thus,
achieving the new understanding we advocate presents
a significant problem of organization, for there is
no single research support agency and no single
performer community capable of responding in the
appropriate way. Several agencies and communities
must recognize the unique contributions they are
capable of making. To be sure, federal, state, and
local mission agencies, which provide the bulk of the
support for research on children's services, should
broaden their perspectives on how best to fulfill
their programmatic mandates and be less defensive and
parochial in their research orientations. Even a
small reallocation of their effort could give major
impetus to the broader research we are advocating.
But their missions will ultimately limit how far
these agencies can go in new directions. In the same
vein, performers oriented to smaller-scale
disciplinary and theoretical investigations cannot be

relied on for undertaking large-scale, long-term data collection, analysis, and management, nor are performers skilled in the latter types of activities likely to be independently capable of creating more powerful and fruitful theories and methodological approaches.

In contrast, foundations and those government organizations and offices whose primary activity is the support of research are not nearly so constrained, and it is to them that we must look for innovations in research on children's services. For example, federal program agencies that support research must recognize their comparative advantage in providing financial support for large-scale, longitudinal data collection. More nonprogrammatic organizations such as the National Science Foundation must recognize their unique role in stimulating creative conceptual and methodological studies that provide the basis for high-quality empirical investigations. Foundations can play a unique role in promoting high-quality, interdisciplinary research and in supporting promising research entrepreneurs and innovators.

For all society's efforts to identify and remedy children's special needs and for all of our efforts to identify available services, trace funds through the system, and evaluate treatments and programs, we—the community of policy makers and researchers concerned with children—are missing a major point.

The efficacy of everything we do on behalf of
children depends in a crucial way on the environments
in which children develop. Children are dependent on
all the people, institutions, and circumstances that
surround and influence them. Attempts to help them
through provision of specific, narrowly focused
services may be completely annulled by oppressive
surroundings, or they may be completely misguided
because of ignorance concerning the role that
parents, teachers, or other people, institutions, and
services play in a child's life. It would be a shame
and a waste if we could not in fact help young people
because we did not know enough about them and how
they live to be helpful. We look at children through
dozens of special lenses, yet we may never see the
child. The broader vision must come from the
community of researchers concerned with children's
services.

REFERENCES

Belsky, J., and Steinberg, L. (1978) The effects of
    day care: a critical review. Child Development
    49:929-949.
Bradshaw, J., and Piachaud, D. (1980) Child Support
    in the European Community. London: Bedford Square
    Press.
Bronfenbrenner, U. (1979) The Ecology of Human
    Development: Experiments by Nature and Design.
    Cambridge, Mass.: Harvard University Press.
Case Western Reserve University (1977) Ohio
    Children's Budget Project. Cleveland, Ohio: Case
    Western Reserve University.
Children's Defense Fund (1977) EPSDT: Does It Spell
    Care for Poor Children. Washington, D.C.:
    Washington Research Project.
Cloward, R., and Ohlin, L. (1964) Delinquency and
    Opportunity. Glencoe, Ill.: Free Press.
Cochran, M. (1977) A comparison of group day and
    family childrearing patterns in Sweden. Child
    Development 48:702-707.
Davies, R., Butler, N., and Goldstein, H. (1972) From
    Birth to Seven. London: Longmans.
Ditmore, J., Jr., and Prosser, W. R. (1973) A Study
    of Day Care's Effects on the Labor Force
    Participation of Low-Income Mothers. Washington,
    D.C.: Office of Economic Opportunity.

Doyle, A., and Somers, K. (1975) The Effects of Group and Family Day Care on Infant Attachment. Paper presented at the meeting of the Canadian Psychological Association, Quebec, June 1975.

Eliot, M. (1962) The Children's Bureau: fifty years of public responsibility for action on behalf of children. American Journal of Public Health 52(4):576-577.

Etaugh, C. (1980) Effects of nonmaternal care on children: research evidence and popular views. American Psychologist 35:309-319.

Fein, G. (1976) Infant Day Care and the Family: Regulatory Strategies to Ensure Parent Participation. Mimeographed report prepared for the Assistant Secretary for Planning and Evaluation, U.S. Department of Health, Education, and Welfare.

Fogelman, K. (1976) Research feedback: Britain's sixteen-year-olds. In Concern. Volume 21. London: National Children's Bureau.

Golden, M., Rosenbluth, L., Grossi, M., Policare, H., Freeman, H., and Brownlee, E. (1978) The New York City Infant Day Care Study. New York: Medical and Health Research Association of New York City.

Haring, B. (1976) Special Report on Funding of CWLA Voluntary Agency Members: 1960-1975. New York: Child Welfare League of America.

Hayes, C., and Davis, C. (1979) Early childhood: the content and management of social research and development in selected federal agencies. In Laurence E. Lynn, Jr., Studies in the Management of Social Research and Development: Selected Policy Areas. Study Project on Social Research and Development, National Research Council. Washington, D.C.: National Academy of Sciences.

Hill, J. (1973) Some Perspectives on Adolescence in American Society. Unpublished paper commissioned by the Office of Child Development, U.S. Department of Health, Education, and Welfare.

Joint Commission on Mental Health of Children (1970) Crisis in Child Mental Health: Challenge for the 1970's. New York: Harper and Row.

Kagan, J. (1976) The Effect of Day Care on the
   Infant. Mimeographed report prepared for the
   Assistant Secretary for Planning and Evaluation,
   U.S. Department of Health, Education, and Welfare.
Kamerman, S. (1980) Parenting in an Unresponsive
   Society: Managing Work and Family. New York: Free
   Press.
Kamerman, S., and Kahn, A. (1981) Childcare, Family
   Benefits, and Working Parents. New York: Columbia
   University Press.
Kenniston, K., and the Carnegie Council on Children
   (1978) All Our Children. New York: Harcourt,
   Brace, Jovanovich.
Kirst, M., Garms, W., and Opperman, T. (1980) State
   services for children: an exploration of who
   benefits, who governs. Public Policy
   28(2):190-191.
Lynn, L. E., Jr. (1978) Fiscal and Organizational
   Constraints on Family Policy. Harvard University
   Discussion Paper Series. #55D. April.
National Research Council (1976) Toward a National
   Policy for Children and Families. Advisory
   Committee on Child Development. Washington, D.C.:
   National Academy of Sciences.
National Research Council (1978) The Federal
   Investment in Knowledge of Social Problems. Report
   of the Study Project on Social Research and
   Development. Washington, D.C.: National Academy of
   Sciences.
New York State Association for Retarded Children v.
   Carey, U.S. District Court, New York, 1975, 393 F.
   Supp. 715 (E.D. NY 1975).
Panel on Youth of the President's Science Advisory
   Committee (1974) Youth: Transition to Adulthood.
   Chicago: University of Chicago Press.
Powell, D. (1977a) Day Care and the Family: A Study
   of Interactions and Congruency. Detroit:
   Merrill-Palmer Institute.
Powell, D. (1977b) The Interface Between Families and
   Child Care Programs: A Study of Parent-Caregiver
   Relationships. Detroit: Merrill-Palmer Institute.
Powell, D. (1978a) The interpersonal relationship
   between parents and caregivers in day care

settings. American Journal of Orthopsychiatry 48:680-689.

Powell, D. (1979) Toward a socio-ecological perspective of relations between parents and child care programs. In S. Kilmer, ed., Advances in Early Education and Day Care. Vol. I. Greenwich, Conn.: JAI Press.

Prescott, E.A. (1973) Comparison of Three Types of Day Care and Nursery School/Home Care. Paper presented at the meeting of the Society for Research in Child Development, Philadelphia, March 1973.

Rapoport, R., and Rapoport, R. (1977) Fathers, Mothers, and Society. New York: Basic Books.

Riccinti, H. (1976) Effects of Infant Day Care Experience on Behavior and Development: Research and Implications for Social Policy. Mimeographed report prepared for the Assistant Secretary for Planning and Evaluation, U.S. Department of Health, Education, and Welfare.

Rivlin, A. (1972) Child care. In C. L. Schultze et al., eds., Setting National Priorities: The 1973 Budget. Washington, D.C.: Brookings Institution.

Robinson, H., and Robinson, N., eds. (1972-1979) International Monograph Series on Early Child Care. London: Gordon and Breach.

Robinson, H., Robinson, N., Wolius, M., Bronfenbrenner, U., and Richmond, J. (1973) Early Child Care in the United States of America. New York: Gordon and Breach.

Rose, R. (1976) Government programs affecting children: the federal budget, FY 1974-1976. Part of A Study of Research and Development Needs for the Making of Social Policy Toward Young Children. Volume VII. Unpublished paper prepared for the National Science Foundation.

Ruopp, R., Travers, J., Cohen, C., and Glautz, F. (1979) Children at the Center: Final Report of the National Day Care Study. Volume I. Cambridge, Mass.: Abt Books.

Shaw, C. R., et al. (1929) Delinquency Areas: A Study of the Geographic Distribution of School Truants, Juvenile Delinquents, and Adult Offenders in

Chicago. Behavior Research Monographs. Chicago: University of Chicago Press.

Sheehan, D. (1977) The Children's Puzzle: A Study of Services to Children in Massachuetts. Boston, Mass.: Institute for Governmental Services.

Shyne, A., and Schroeder, A. (1978) National Study of Social Services to Children and Their Families. Washington, D.C.: U.S. Government Printing Office.

Sjlund, A. (1973) Day Care Institutions and Children's Development. Lexington, Mass.: D.C. Heath.

Spergel, I. (1964) Racketville, Swontown, Haulgerg: An Exploratory Study of Delinquency Subcultures. Chicago: University of Chicago Press.

Steiner, G. (1971) The State of Welfare. Washington, D.C.: Brookings Institution.

Steiner, G. (1976) The Children's Cause. Washington, D.C.: Brookings Institution.

Strasburg, P. (1978) Violent Delinquents: A Report to the Ford Foundation from the Vera Institute. New York: Monarch.

UNCO, Inc. (1975) National Day Care Consumer Study. Prepared for the Office of Child Development, U.S. Department of Health, Education, and Welfare.

U.S. Department of Labor (1980) Perspectives on Working Women: A Databook. Bureau of Labor Statistics Bulletin 2080. Washington, D.C.: U.S. Government Printing Office.

U.S. Office of Management and Budget (1977) Special Analyses, Budget of the U.S. Government. Washington, D.C.: U.S. Government Printing Office.

Werner, E. (1979) Cross Cultural Child Development. Monterey, Calif.: Brooks/Cole Publishing Company.

Wiltse, K. (1978) Current issues and new directions in foster care. In Child Welfare Strategy in the Coming Years. Washington, D.C.: Office of Human Development Services, U.S. Department of Health, Education, and Welfare.

Wyatt v. Stickney, U.S. District Court, Alabama, 1971, 325 F. Supp. 871.

.