Military Child Care Programs: Progress Made, More Needed

Military child care centers provide care for about 53,000 military dependents daily at more than 400 installations worldwide. Although the services have expressed a commitment to providing quality care and have taken action to upgrade some facilities and develop program regulations, GAO finds that many child care centers currently in use are neither safe nor suitable. The majority of centers in the Army and Navy and 20 percent in the Air Force need upgrading.

DOD-wide minimum standards are lacking for important program elements including: (1) total group size, (2) caregiver/child ratios, (3) educational activities, (4) staff training, and (5) food services.

GAO recommends that the Secretary of Defense take certain actions to insure that the services provide quality child care programs.
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The Honorable Caspar W. Weinberger  
The Secretary of Defense

Attention: Director, GAO Affairs

Dear Mr. Secretary:

This report provides background information on military child care programs in each of the services and points out some potential problems in the quality of the programs. It also identifies opportunities to reduce child care costs.

This report contains recommendations to you on pages 9, 15, and 19. As you know, section 236 of the Legislative Reorganization Act of 1970 requires the head of a Federal agency to submit a written statement on actions taken on our recommendations. This written statement must be submitted to the Senate Committee on Governmental Affairs and the House Committee on Government Operations not later than 60 days after the date of the report. A written statement must also be submitted to the House and Senate Committees on Appropriations with an agency's first request for appropriations made more than 60 days after the date of the report.

We are sending copies of this report to the Chairmen, House and Senate Committees on Armed Services; the Secretaries of the Air Force, Army, and Navy; and the Director, Office of Management and Budget.

Sincerely yours,

Clifford I. Gould  
Director
In 1978, the Department of Defense (DOD) designated child care centers as community facilities for which the Government has a responsibility. Congress approved a DOD request for appropriated funds to construct new child care facilities for the first time in the fiscal year 1982 budget. Having acquired oversight responsibility for military child care programs, the House and Senate Armed Services and Appropriations Committees expressed interest in obtaining information on the condition of child care facilities, construction requirements, program operations, and ways to control costs. In response to this interest, GAO has reviewed military child care programs.

Since the services have made the commitment to provide child care, they need to make sure that the programs they offer are provided in safe facilities, that the program's policies and procedures address the basic needs of children, and that program management is effective. GAO believes that improvements can be made in all these areas.

FACILITY CONDITIONS, CONSTRUCTION ALTERNATIVES, AND UNIFORM BUILDING DESIGN GUIDES

Many facilities currently in use are neither safe nor suitable places for child care programs. For example:

--The majority of the 318 Army child care facilities do not meet fire and safety codes. (See p. 5.)

--The majority of the 73 Navy facilities need upgrading to comply with fire, safety, and sanitation standards. (See p. 6.)
--Additional facilities are needed in the Marine Corps to accommodate demand. (See p. 6.)

--In the Air Force, 20 percent of 162 facilities need improvements. (See p. 7.)

User fees, charges, and donations are not sufficient to support renovation and construction of child care facilities. The Air Force and Marine Corps have used nonappropriated funds from sources other than those mentioned above to build and maintain child care facilities which, for the most part, are suitable. The Army and Navy, on the other hand, found they could not absorb construction costs from their nonappropriated funds and, at the same time, satisfy competing morale, welfare and recreation demands. (See p. 5.)

Some installations have renovated excess buildings rather than request new facilities. DOD procedures require that options--making better use of existing space or contracting--be evaluated and documented before requesting funds for new facility construction. (See pp. 7 and 8.)

The services have been in the process of developing a joint building design guide for child care facilities for the last year. According to service officials, using these design guides DOD-wide could reduce both the cost and time required for the construction of new facilities. (See p. 8.)

**DOD-WIDE PROGRAM STANDARDS ARE NEEDED**

Changes are needed in DOD and service policies and procedures to improve the quality of military child care programs. At the present time, the services develop their own program policies and standards, many of which do not meet the Federal Interagency Day Care Requirements, or do not adequately address important program elements to insure that basic health, safety, and developmental needs are met. GAO found that:

--Service regulations allow the caregiver/child ratios to exceed recommended limits. (See p. 11.)
--The existing service regulations do not adequately specify the educational equipment, toys, games, books, and materials that must be provided or incorporate the minimum staff training requirements of the Federal Inter-agency Day Care Requirements. (See pp. 12 and 13.)

--The Army, Navy, and Marine Corps have not provided sufficient guidance on meal standards and food program inspections to insure that adequate and nutritious meals and snacks are served. (See pp. 13 and 14.)

FURTHER MEASURES FOR IMPROVING PROGRAM AND CONTROLLING COSTS

Center administrators and caregivers need in-service training to prepare them to carry out the many diverse tasks they must perform. The services have provided inservice training for center directors; however, training for caregivers is still inadequate. Furthermore, training guides and manuals already developed have not been printed in sufficient quantity to make them available for all center staff. (See p. 16.)

With proper monitoring, family day care homes (private homes in which children receive full-time care) can be an appropriate and inexpensive way to provide additional child care options, and to alleviate center overcrowding. Although the Army and the Marine Corps have authorized family day care at installation housing units, this option has not been fully utilized. (See p. 17.)

The quality of child care programs and the ability to maintain self-sustaining operations are directly affected by the fees charged. The fees in military centers are generally lower than in civilian centers, often by as much as 25 to 50 percent. The rates have been set to enable lower-ranking enlisted personnel to fully use the child care activities; however, DOD data indicated that relatively few lower-ranking personnel have children. A variable rate structure based on rank or total family
income could increase the funds available to improve the quality of child care provided without sustaining operating losses. (See p. 18.)

RECOMMENDATIONS

To insure that the most urgent needs for child care facilities are met first and that resources are effectively allocated, GAO recommends that the Secretary of Defense require the services:

--When it is not feasible to correct unsafe or hazardous conditions, to document and develop plans to overcome the problems of facilities which should be closed.

--To determine where appropriated funds are needed to correct unsafe or hazardous conditions.

--To use uniform building design guides for child care facility construction where feasible.

To assure that military child care programs provide acceptable child care services, GAO recommends that the Secretary of Defense:

--Develop DOD-wide minimum standards for the services' child care programs. These standards should address (1) total group size, (2) caregiver/child ratios, (3) educational activities, (4) staff training, and (5) food services.

--Require the services to periodically verify compliance with DOD standards. See page 32 for further recommendations addressing the need to improve program quality and control operating costs.

AGENCY COMMENTS

In oral comments, received April 8, 1982, DOD agreed with GAO's recommendations, and plans to implement them.
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ABBREVIATIONS

AFWB    Air Force welfare board
CPR     Cardiopulmonary resuscitation
DOD     Department of Defense
FIDCR   Federal Interagency Day Care Requirements
GAO     General Accounting Office
MWR     Morale, Welfare and Recreation
USDA    U.S. Department of Agriculture
CHAPTER 1
INTRODUCTION

The Department of Defense (DOD) has long had a general policy that the Federal Government has a basic responsibility to provide community services which contribute to the quality of military life. Morale, welfare and recreation (MWR) activities, such as libraries, gymnasiums, theaters, chapels, religious education facilities, family service centers, and child care centers are provided to contribute to the mental, physical, and spiritual well-being of service personnel and to promote family cohesiveness. The services have stated that child care is a program which can contribute toward an improved quality of life for military personnel and their families and that for many service personnel, the welfare of their children is a factor in deciding whether or not to stay in the service. Consequently, child care programs, according to the services, can have an impact on retention and, to some extent, can affect job performance and readiness. The services have, therefore, increased their commitment to and involvement in child care activities over the last decade and have been upgrading their child care programs and facilities.

MILITARY CHILD CARE PROGRAMS

The services have been involved in child care for many years. In many cases, the services assumed management of child care activities, which began as parent cooperatives or projects of wives' clubs or other private organizations, because the scope and demand for child care exceeded the resources of volunteer groups. Child care, however, was not recognized as an official MWR activity until the authority for funding the program was specified in DOD Directive 1330.2, dated March 17, 1978. Under this directive, the Assistant Secretary of Defense (Manpower, Reserve Affairs and Logistics) has overall responsibility for MWR programs. The individual services, however, are responsible for developing their own program policies and standards; the installations, if they decide to provide child care services, establish their own operating procedures.

Military child care centers are currently operating at over 400 military installations worldwide, serving approximately 53,000 children daily. Child care at most military installations includes full-time daily care, drop-in care, and/or preschool. Full-time care is used primarily by enlisted personnel with working spouses. Drop-in care primarily accommodates personnel with nonworking spouses who need short-term occasional care for their children during the day. This care is also available in the evenings and on weekends at many installations. Part-day programs are also provided at many installations to give children an opportunity to have educational experiences with others of the same age for a few hours 2 or 3 times a week.
While some of the military child care centers provide only custodial care, most generally have some provision for developmental care. Custodial care is concerned with the physical safety of the children, while developmental care promotes healthy physical, emotional, and intellectual development. A brief description of the programs in each of the services follows:

**Army**

The Army has 318 child care facilities on installations worldwide with a capacity for 23,000 children daily. However, with intermittent drop-in care, the actual number of children served daily is higher. The Army Community Support Directorate provides support, guidance, and coordination for child care programs. The Directorate headquarters staff includes three full-time positions supporting child care activities. Some major commands also have child care coordinators.

**Navy**

The Navy has 73 child care programs operated by the MWR Special Services offices on installations worldwide. In addition, private organizations operate two other centers. These programs accommodate approximately 11,000 children daily. The Navy has a full-time Child Care Program Coordinator position at the Naval Military Personnel Command to provide support for its child care activities.

**Marine Corps**

The Marine Corps has 23 child care programs at 16 installations worldwide, serving 3,000 children. Fifty-three percent of these children attend the centers full-time, and 47 percent use the centers for part-time or occasional care. The Special Services Office operates 16 of these programs, while private organizations operate 7 of the Marine Corps' child care activities. The Marine Corps has a full-time position for a Recreation Specialist/Child Care Coordinator to coordinate child care activities.

**Air Force**

The Air Force has 162 child care facilities at 122 installations worldwide which serve 16,000 children daily. In addition, 111 part-day developmental programs care for an additional 9,000 children daily. The Air Force has a Family Activities Administrator to coordinate child care programs and three staff personnel to provide full-time support for Air Force child care activities. Three major commands also have child development specialists, and two additional positions are anticipated in the near future.
OBJECTIVES, SCOPE, AND METHODOLOGY

In response to congressional interest expressed during the 1982 budget hearings and subsequent discussions with staff of the House and Senate Committees on Armed Services and Appropriations, we reviewed military child care programs. Our objective was to provide to these committees information related to child care in the services. Child care facilities are a small part of the military construction program which was $8.3 billion in fiscal year 1983. The $16.6 million for child care facilities represents less than 15 percent of the $109 million requested for the construction of community facilities. The committees have indicated, however, that oversight is essential. They have expressed particular concern about facility conditions, construction requirements, program operations, and ways that the costs of construction and operations can be better controlled. They expressed an interest in information on program costs, differences in child care programs among the services, construction priorities, center designs, fees, the potential for contracting, and staff ratios.

To review these programs, we examined information which the services supplied on facilities and construction needs, program standards, and management initiatives to control program costs. We discussed the development, operations, and policies of military child care programs with officials in the Office of the Assistant Secretary of Defense (Manpower, Reserve Affairs and Logistics) and with program officials at Headquarters, U.S. Army, U.S. Navy, U.S. Marine Corps, and the U.S. Air Force.

At the invitation of the installation commands, we visited five military child care centers in San Antonio, Texas, to observe child care activities. These five centers were Brooks, Kelly, Lackland, and Randolph Air Force bases, and Ft. Sam Houston Army base.

To gain further information on child care activities, we reviewed policies and procedures used to plan, develop, and operate military child care centers in the services; DOD directives on MWR activities and construction; previous GAO reports on civilian child care and the U.S. Department of Agriculture's (USDA's) child care food program; information supplied by the Congressional Research Service on the Federal role in child care; 1977 and 1978 congressional hearings on civilian child care; information on Government and private civilian child care centers in the Washington area; and general literature on child care standards, educational activities, program quality, and training.

We did not assess whether the services should provide child care, what priority child care should have in MWR funding, or the impact of child care on recruiting and retention. Our review was conducted from March through October 1981, and was
performed in accordance with our office's current "Standards for Audit of Government Organizations, Programs, Activities, and Functions."
CHAPTER 2

UPGRADING AND CONSTRUCTING

CHILD CARE FACILITIES

As the demand for child care programs has increased, the services have expressed concern about the condition of military child care facilities and about the funds needed to renovate or construct them. User fees and other nonappropriated funds have not in the past been sufficient to support renovation and construction at most installations. In 1980 DOD directed that all new child care facilities be constructed solely with appropriated funds. Congress agreed to provide funds in the fiscal year 1982 budget for the construction of two Army and eight Navy child care facilities. This chapter discusses some of the facility deficiencies reported by service officials or noted in our review and some ways to control or reduce construction costs.

CHILD CARE FACILITIES NEED UPGRADING

While some military installations have up-to-date facilities specifically designed for child care, many installations have child care programs in facilities which are not suitable for this purpose and do not meet fire, health, and safety standards. The House Committee on Appropriations' Surveys and Investigations staff reported in 1980 that some of the centers they visited were housed in old buildings originally constructed for other purposes, such as barracks, dining halls, exchanges, and bowling alleys. The staff concluded that the poor condition of the buildings contributed to "program inadequacies."

Army and Navy program officials have acknowledged in internal documents that the child care facilities on many installations are in unsatisfactory condition. Marine Corps officials said that although no facilities presently in use are in unsatisfactory condition, many are overcrowded. Air Force officials have acknowledged that some of their child care facilities are in unsatisfactory condition.

Army cites unsafe, unhealthy conditions

According to Army officials, although many child care facilities have been renovated since 1978, a 1980 staff study indicated that over 70 percent of child care facilities in use still do not meet fire and safety codes, and the majority of the centers did not have sufficient room to meet current peak demand. Problems with substandard Army facilities are reportedly acute in Germany where there are few alternatives to military child care, particularly in remote areas. Even in urban areas, where some alternatives might be available, the language barriers limit their use.
Army officials have cited in internal reports, and in our discussions with them, numerous examples of unhealthy and unsafe conditions in their child care facilities. These conditions include

--a child care center located on the fifth floor of a building, making emergency evacuation extremely difficult;

--centers where lead-based paint is peeling from walls and ceilings; and

--centers with leaking roofs which are in such poor condition that roofing repairs are not feasible.

In an August 1, 1980, letter to a member of the Senate Committee on Armed Services, the Assistant Secretary of the Army (Manpower, Reserve Affairs and Logistics) cited unsafe, unhealthy conditions at the child care center at Fort Hood, one of the Army's most heavily populated posts. He noted that 300 children were in a World War II building that could not pass any health or safety standard. At an Army installation we visited, the child care center was housed in old barracks adjacent to stables. Pest control was a continuing problem, and the kitchen floor in this facility was sinking under the weight of a new gas stove.

Army's estimates for new facilities and renovation of existing facilities is currently $336 million. The Army indicated that nonappropriated funds could not absorb these costs and at the same time satisfy other competing MWR construction demands. The Army's need for extensive renovation and construction of child care centers exceeds the requirements of the other services partly because (1) Army operates more child care facilities than all the other services combined, (2) Army installations generally have a large number of older facilities, and (3) the other services began managing child care programs several years earlier than Army and therefore have had more time to upgrade facilities.

Navy/Marine Corps assessing conditions

Navy told us that the majority of the 73 child care facilities it operates are in need of upgrading. Most of these 73 centers were formerly barracks which are often in violation of fire, safety, and sanitation standards. Navy currently is surveying its facilities to determine deficiencies and renovation requirements.

The Marine Corps is also evaluating the condition of its child care facilities. Of the 16 service-operated child care facilities, 8 have been built since 1960, 6 are renovated masonry buildings, and 2 are wood frame buildings. The biggest facility problem reported by the Marine Corps is lack of space. The condition of the seven facilities operated by private organizations was not reported.
Majority of Air Force centers in good condition

The Air Force reported that only 32 of its 162 facilities require improvements. A variety of factors, some having a cumulative effect, dictate the need for improvements. Air Force officials said that these factors include not only fire, safety, and sanitation standards, but also the facility's overall physical condition and environmental conditions, such as air and noises, functional layout, and support utilities.

At the four installations we visited, new child care centers were either in use or under construction. From 1974 to 1979, 40 centers were approved for nonappropriated funds. In 1980, an additional 41 new centers were considered for nonappropriated funding. Of these 41, 8 centers were approved for nonappropriated funding, and the remaining 33 were authorized the use of nonappropriated funds for design. The decision to construct the remaining 33 facilities using nonappropriated funds has not been made. In addition, Air Force has requested five new child care centers and additions to three other centers in the fiscal year 1983 budget. The Air Force has more child care facilities built with nonappropriated funds than any of the other services. One reason, that Air Force has cited, for the large number of child care centers built through nonappropriated funds is that the Air Force has placed a high priority on child care; these facilities have competed successfully with other Air Force MWR projects for nonappropriated funds. Air Force officials have expressed some concern that they will not be able to meet their needs for new facilities as quickly using the appropriated funding process as they have in the past using their nonappropriated funds.

CONSTRUCTION ALTERNATIVES CONSIDERED BY INSTALLATIONS

The need to construct new facilities may be lessened, in some cases, by making better use of existing space or by contracting for child care services. DOD Instruction 7040.4 requires installations to consider alternatives before requesting funds for constructing new facilities. Where appropriate space is available from underutilized or excess buildings on base, the services can renovate the space for child care activities. Some Air Force installations, for example, are using religious education facilities, youth centers, and elementary schools to accommodate the overflow from the child care centers.

At three Army installations, Fort Richardson, Fort Myer and Fort Leonard Wood, excess school buildings have been converted in part or in whole to child care facilities. At Fort Leonard Wood the State agreed to allow the Army to convert the on-post, State-owned school to a 300-capacity child care facility if the
State could continue to use part of the facility for handicapped children. The Army plans to continue pursuing this option at installations where excess school buildings become available and can be renovated as necessary.

Contracting is another alternative which has only been tried on an experimental basis. An internal Army review of alternative means of financing the construction and operation of child care centers identified contracting as a possible alternative to construction, and in 1981 one Army command contracted for child care services in a contractor-leased and operated facility. This program is currently being monitored by the Army to determine the potential benefits and possible drawbacks of contract services.

**UNIFORM DESIGN GUIDES CAN BE ADVANTAGEOUS**

Service officials have generally agreed that the use of uniform design guides for child care centers DOD-wide could reduce both the cost and the time required for the construction of new facilities. Design guides which incorporate criteria relevant to center operations can assist the services in providing the best usable space for the needs of the children and staff.

The Army is currently funding a project to develop architectural design criteria including a technical manual, design guidelines, and concept designs for child care facilities and outdoor play areas. Some of the results of the project have been made available to the other services, and this information has been distributed to the installations. The Air Force's child care center design guide was published in June 1981, and currently 17 centers are designed or are being designed using the criteria established in the design guide.

In the 1981 report on the Supplemental Appropriations and Rescission Bill, the House Appropriations Subcommittee on Military Construction directed that DOD develop a standard design and criteria for day care centers. In July 1981, DOD recommended that the services form a group to combine their criteria for child care centers into a single document. This group, called the DOD Joint Services MWR Child Care Subcommittee, is comprised of program officials at service headquarters, as well as designated service engineer/architect representatives. The group's objective is to develop uniform design criteria which permit service flexibility to adapt to local conditions while still providing comparable facilities. This project can help the services focus more attention on standardizing center designs.

**CONCLUSIONS**

We believe the services have an obligation to provide child care in safe, healthy facilities. Our discussions with Army
officials indicate that the Army would have difficulty financing immediate improvements needed to provide safe, healthy child care facilities while providing other authorized MWR activities. The Navy faces a similar though less severe situation. The Marine Corps and the Air Force have, for the most part, provided suitable child care facilities using nonappropriated funds. Both of these services, however, want to build additional facilities to meet increasing demands. We believe that when DOD evaluates service requests for construction and renovation of child care facilities, first priority should be given to upgrading unsuitable facilities. Therefore, proper documentation of unsafe and hazardous conditions is needed.

Although DOD's MWR Child Care Subcommittee has recognized the potential benefits of a uniform design guide for child care facilities, the DOD has not yet completed development of them. We believe that using design guides can be advantageous.

RECOMMENDATIONS

To insure that the most urgent needs for child care facilities are met first, we recommend that the Secretary of Defense require the services:

--When it is not feasible to correct unsafe or hazardous conditions, to document and develop plans to overcome the problems of facilities which should be closed.

--To determine where appropriated funds are needed to correct unsafe or hazardous conditions.

--To use uniform building design guides for child care facility construction where feasible.

AGENCY COMMENTS

In oral comments, received April 8, 1982, DOD agreed with our recommendations, and plans to implement them.
CHAPTER 3

DOD-WIDE MINIMUM STANDARDS

NEEDED TO IMPROVE CHILD CARE PROGRAMS

The services are committed to providing quality child care at an affordable price for service personnel. To accomplish this, standards for acceptable child care operations must be established and enforced. Except for program funding guidance, DOD has issued no department-wide standards for military child care activities. Therefore, program officials at each of the service headquarters have independently developed program standards. We found that some of these child care standards were inadequate, particularly those pertaining to the grouping of children, educational activities, training of center staff, and the food program. These inadequate standards hinder the services' ability to evaluate the quality of their child care activities and DOD's ability to assure that all child care activities will provide at least the minimum in acceptable service. While we did not assess the effect of the inadequate standards on program operations, the absence of adequate standards for essential program areas increases the likelihood that problems will occur and not be detected and resolved.

SERVICE REGULATIONS DO NOT MEET MINIMUM STANDARDS OF FEDERAL INTERAGENCY DAY CARE REQUIREMENTS

Most private civilian center operations are State licensed and regulated, and they are subject to oversight and inspections by local authorities to assure that children receive adequate care in a safe and healthy environment. Although military child care centers are inspected by the services, they are not regulated or inspected by DOD or any other Federal, State, or local agencies. The services have complete latitude in developing, operating, inspecting, and evaluating their child care programs.

The Federal Interagency Day Care Requirements (FIDCR) were established in 1968 to provide minimum program standards and regulations for operating federally funded child care programs. Since Federal funding for child care was included in block grants to states, the FIDCR were suspended in October 1981. However, these requirements still provide acceptable operating standards. We compared the child care regulations of the services with the FIDCR. We found that service standards did not adequately address important program elements specified in the FIDCR as minimum standards, and they do not, in all cases, assure that basic health, safety, and developmental needs of the children are met. As a result, fundamental differences exist among military child care programs. These differences can affect program quality as shown in the following sections.
Service Standards for Child Care Groups Need Revision

The total size of a child care group and the number of children supervised by a caregiver (caregiver/child ratio) are among the most important factors affecting the quality of child care programs. 1/ The FIDCR have specified the maximum number of children at each age who can receive adequate care in a single group. Service regulations, on the other hand, place no limits on the total group size. A military center can have two or three times the maximum recommended number of children, thereby affecting the quality of care provided. Although the Marine Corps has no prescribed or mandatory maximum group size, their regulations do include provisions for dividing children into small groups within larger classroom settings.

Just as the absolute group size is linked to quality, so is the caregiver/child ratio. Although the FIDCR requirements for caregiver/child ratios were being revised at the time of suspension, the literature we reviewed suggests caregiver/child ratios within the range of 1:5 to 1:10 for children aged 3 to 5, and, generally, a 1:4 ratio for infants and toddlers.

The FIDCR include the following criteria for grouping children in child care programs:

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The services' caregiver/child ratios often exceed these recommended limits. In the Army and Navy, for example, ratios are 1:8 for children 18 months to 3 years of age; the Marine Corps ratio is 1:10; and the Air Force ratio is 1:15. The services' caregiver/child ratios at other ages also generally exceed recommended limits. Service officials told us that higher ratios help them avoid increasing fees.

Federal Interagency Day Care Requirements state that day care programs must provide every child with educational activities appropriate to the child's age. These activities must be provided under the supervision and direction of a staff member trained or experienced in child development. Further, each facility must have toys, games, equipment, materials, and books for educational development and creative expression appropriate to the type of facility and the age levels of the children. Finally, the FIDCR state that the daily activities for each child in the facility must be designed to promote a child's positive self-concept, cognitive abilities, and social and communication skills. The need for developmental activities is also supported by the literature on child care.

Program officials in all the services have stated their commitment to providing learning experiences in child care centers which stimulate intellectual growth and social and emotional development. Although Air Force regulations do require that centers provide each child with developmental activities appropriate to the child's age, none of the services' regulations adequately specify the equipment, materials, toys, games, and books which should be supplied to provide developmental opportunities. They also do not adequately specify the staff and supervision needed for an effective developmental program. There is also no specific prohibition against extended periods of purely custodial care, so the provision of developmental activities, while encouraged, is left up to the caregivers. Service regulations also have no provision for the continuity of care by primary caregivers to insure that developmental activities are consistently provided and to preclude the overuse of intermittent staff. Continuity of care is particularly important in military child care centers because of the high mobility of both the children and the caregivers who generally are also military dependents.

Further Staff Training Guidance Is Needed

Adequate staff training is essential if child care centers are to provide quality programs and operate efficiently. The FIDCR specify that orientation and continuous inservice training should be provided for all staff, including professionals, non-professionals, and volunteers. This training should include general program goals and specific program areas such as nutrition, health, child growth and development, educational guidance, and remedial techniques.

None of the existing service regulations cover all the minimum staff training requirements specified in the FIDCR. Army regulations state that training should be provided to meet
any special competence a particular program requires, without specifying which programs may require training. All Army center staff, however, are required to complete a first aid course. The Navy requires only that all child care center employees complete training in first aid, cardiopulmonary resuscitation (CPR) and the Heimlick Maneuver for choking victims. Although not addressing all the standards of the FIDCR, the Marine Corps gives more thorough guidance than the other services. Marine Corps regulations specify that training seminars and workshops will be provided for child care center staff, including periodic training on the latest techniques and procedures for providing for safe care and the development of children. Current Air Force regulations require all caregivers to have first aid and CPR training, and the new regulations will contain further guidance on staff training requirements.

**Guidance on Food Program Standards Needed**

Children attending DOD child care centers need nutritional meals served in a safe and sanitary manner. The food program in military child care centers is especially important because the centers are open extended hours; children may receive more meals at the centers than at home. Therefore, an adequate food program is essential for their well being. Since military child care centers are not inspected by outside agencies, service inspections, when they occur, provide the only oversight of their food programs. With the exception of the Air Force, the services have not provided adequate guidance on meal service standards and inspections to insure that adequate and nutritious meals and snacks are served.

The FIDCR state that child care centers must provide adequate and nutritious meals and snacks prepared in a safe and sanitary manner. The USDA Child Care Food Program has specified meal service requirements for minimum quantity and components for meals and snacks served to children in day care centers.

The Air Force has 160 of 162 centers participating in an externally funded food program. The USDA sponsors 124 centers while the remaining centers are overseas and therefore are not eligible to participate in the USDA Child Care Food Program. These centers receive funds through an equivalent program funded by the Air Force Welfare Board (AFWB). All centers eligible to participate in the AFWB program were visited in the spring of 1981 by an Air Force headquarters or major command specialist and are now receiving funds. The centers participating in the AFWB program must follow USDA meal and snack requirements.

The Army has about 40 centers participating in the USDA food program. Army officials have indicated that most Army
centers are not participating in this program because the facilities do not meet the basic health, safety, and sanitation requirements necessary for participation. The Army centers certify themselves as being in compliance with the USDA standards, a procedure which is not the general practice in civilian centers. Eight Marine Corps centers and one-third of the Navy centers are participating in the USDA food program, or have applied to participate.

The military child care centers that participate in the USDA Child Care Food Program must meet the USDA meal service standards. The majority of military child care centers in the Army, Navy, and Marine Corps do not participate, however, and do not have meal standards to insure that minimum quantity and basic food group components are served for meals and snacks.

CONCLUSIONS

We believe that the child care standards developed by the services do not, in all cases, adequately regulate critical program areas. Service guidance on group size, caregiver/child ratios, educational activities, staff training, and food service do not meet FIDCR's minimum standards for federally approved civilian centers.

We believe that service standards which allow child care centers to keep fees low, to place no limits on the number of children in a group, and to hire too few caregivers for the group adversely affect program quality.

It is standard practice for civilian centers to provide resources for planned developmental activities. We believe that the services' lack of adequate guidance for conducting developmental activities and providing educational materials for these activities weakens their programs.

The child care staff should know about such things as nutrition, health, child growth and development, educational guidance, and remedial techniques; however, service standards do not require training in all these areas. We believe that the lack of adequate guidance on training can adversely affect program quality.

We believe that the lack of adequate standards and inspections for food service in the Army, Navy, and Marine Corps can result in substandard meals and unsanitary conditions which may adversely affect the health of the children in the centers. Without regular program inspections, critical operating deficiencies can go unnoticed and uncorrected.

We recognize that child care is a fairly new program area and that it takes time to develop adequate programs. Many DOD centers may now be providing excellent care; however, DOD can
not assure that all its centers provide acceptable care for the children of service personnel. If the services are going to provide child care, as they presently do, then the necessary steps to insure quality care must be taken. As a first step, minimum department-wide standards must be developed and enforced for healthy, safe, and educationally sound care.

RECOMMENDATIONS

To insure that military child care programs provide acceptable child care services, we recommend that the Secretary of Defense:

--Develop DOD-wide minimum standards for the services' child care programs. These standards should address (1) total group size, (2) caregiver/child ratios, (3) educational activities, (4) staff training, and (5) food services.

--Require the services to periodically verify compliance with DOD standards.

AGENCY COMMENTS

In oral comments, received April 8, 1982, DOD agreed with our recommendations, and plans to implement them.
CHAPTER 4
FURTHER MEASURES FOR IMPROVING THE
PROGRAM AND CONTROLLING COSTS

Various service initiatives can improve program operations and control costs. Our review indicates that providing continuous inservice training for all child care staff, increasing use of family day care, and revising center fee schedules can assure more successful, cost effective child care.

IMPROVING STAFF TRAINING

A 1979 Health, Education and Welfare child care study 1/ found that child-related education and training shows a moderately strong and consistent relationship to measures of quality care but little relationship to cost. The study recommended that child-related education and training be required for staff providing direct care to children.

Continuous training opportunities are particularly important in military centers because staff turnover is generally high. All the services have recognized the need for training center administrators on all aspects of effective center management. Center managers have to make trade-offs among desirable program elements to maintain high quality child care that is affordable to military personnel and that stays within limited budget resources. To do all these tasks competently requires considerable skill and training. All services have provided numerous training opportunities for center managers; however, to date, the services have not provided adequate inservice training for caregivers and other center staff. This training is essential if the services are to provide quality care.

In 1977, the Army received Health and Human Services funding to develop program and staff training materials and administrative guides, and by September 1980, had developed 16 training manuals and guides (Ft. Lewis Project). These materials cover child development from infancy through school age and provide assistance in planning appropriate educational activities and in managing all major aspects of military child care centers.

Prior to the project's completion, the Air Force had used some of the materials in training workshops. Project staff also worked with a small number of center directors and caregivers in the use of these materials at Army, Navy, Air Force,

and Marine Corps sites. Although the project materials were initially distributed to each installation, since the completion of the project in September 1980, no further distribution has been made. Consequently, with high staff turnover, the services cannot assure that their center managers and caregivers have access to the successful management techniques and experiences of the Ft. Lewis Project.

FAMILY DAY CARE

Family day care refers to full-time child care provided in private homes. It is especially suitable for infants, toddlers, sibling groups, and for those children needing before or after-school care. Although not replacing the need for adequate center care, family day care homes, if properly monitored, can be an appropriate and inexpensive way to provide additional alternatives for child care and to relieve facility overcrowding. A project of the MWR Child Care Subcommittee recognized the benefits and savings which could result from a coordinated family day care effort. The Army and the Marine Corps have developed guidance on family day care and have authorized family housing units for family day care. The Air Force expects to authorize family day care at installation housing units, and guidance will be provided. The Navy has not as yet published specific guidelines on family day care.

In the Army, family housing may be authorized to provide day care activities only with the approval of the installation commander. Army regulations specify that not more than six children will be cared for at one time including the provider's own children. Also, no more than 2 of the children in a family day care center can be under 2 years of age. The regulations also state that the primary caregiver in each family day care home should arrange for another responsible adult to provide backup support in emergencies. The regulations require that where installations authorize family day care centers, local policy must be developed to insure that each home is evaluated by the medical authority. Each home must be approved to operate as a day care home, and the approval will depend on whether local needs could otherwise be met, and on health and safety considerations.

The Marine Corps regulations authorize family day care services in housing areas controlled by the military installation with command approval. If family day care services are authorized, local policy will be developed to insure that each home meets health and safety standards as established in National Fire Prevention Association 101, Life Safety Code. Family day care services are not authorized when other suitable child care facilities and services are available on the installation. The Marine Corps regulations also specify that these activities
will be self-sustaining and that appropriated or nonappropriated funds cannot be expended in support of these activities.

**CENTER FEES CAN BE INCREASED**

Installation commanders are authorized to establish reasonable fees to help pay for the costs of operating child care centers. The fees charged in military centers are generally lower than in civilian centers, often by as much as 25 to 50 percent. According to service officials, this lower fee structure is necessary to enable lower-ranking enlisted personnel to fully use the child care activities.

However, as of October 1981, DOD data indicates that relatively few lower-ranking personnel have children. Fewer than 2 percent of E-1 personnel have children, fewer than 3 percent of the E-2s, and only 6.5 percent of E-3 personnel have children. It is not cost effective or necessary to base the fee structure for all center users on the financial status of this small group. For example, the average married E-4 service member with over 4 years of service in 1980 made more than $15,000. If the spouse works at minimum wage, the combined family income would be about $22,000. Full-time child care in civilian centers for families at this income level would cost substantially more than the weekly average of $26 to $32 paid in military centers.

While installation commanders do not, in all cases, set variable charges for recreation or entertainment activities such as bowling or theaters, they do have the authority to set variable rate structures for child care. Many commanders have exercised this authority by reducing rates for the second and third child. However, installations have not generally adjusted fees on a variable scale according to rank or family income.

According to our survey of Government agencies in the Washington Metropolitan area, civilian center fees often do vary with family income. Many private centers have reduced rates for families whose income is not sufficient to cover the full cost of child care.

Service officials informed us that having more children per caregiver helps them avoid increasing fees and operating costs. However, according to the previously cited child care study (Children at the Center), these higher ratios adversely

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1/ Source: October 1981 DOD Selected Military Compensation Tables. This figure assumes that the service member receives allowances in cash. This does not include additional compensation such as variable housing allowances, or special and incentive pays.
affect the quality of care provided. If the services maintained or reduced their fees for personnel at ranks E-1 through E-3 and for hardship cases among higher-ranking personnel, the fees for all other users could be increased. The additional income generated could help the centers to upgrade the quality of care by reducing caregiver/child ratios and could help the centers be self-sustaining. The increased revenue could also reduce the need to subsidize child care by nonappropriated fund support from other MWR activities.

CONCLUSIONS

We believe the services need to provide adequate inservice training to all center staff. The Ft. Lewis Project guides and manuals are an excellent training resource and should be made available for this purpose.

Because child care centers on many installations do not have the space and resources to meet the demand for all types of child care, the services need to try other on-base child care options. With proper monitoring, family day care homes can be an inexpensive and appropriate way to expand alternatives for meeting service members' child care needs, and alleviate center overcrowding.

The fees charged at many centers could be increased to enable the centers to operate quality child care programs on a self-sustaining basis. While a variable rate structure based on rank or total family income could accommodate the need for subsidized care for lower-ranking personnel and hardship cases, increasing the fees for others could increase the operating funds available to improve the quality of the child care program and could help the centers maintain self-sustaining operations.

RECOMMENDATIONS

To improve program quality and control operating costs, we recommend that the Secretary of Defense require the services to:

--Provide, individually or on a joint basis, training programs for all child care staff. The training programs should make full use of the Ft. Lewis Project manuals and guides.

--Use family day care homes, with proper monitoring, as an adjunct to child care centers where feasible.

--Use a variable fee structure, based on rank or total family income, which accommodates the financial needs of lower-ranking personnel and hardship cases.
AGENCY COMMENTS

In oral comments, received April 8, 1982, DOD agreed with our recommendations, and plans to implement them.