

THE PLACE OF CHILD-DEVELOPMENT CENTERS IN ADVENTIST EDUCATION

No one knows how many child-development centers are operated by Seventh-day Adventist churches and schools in North America. The Adventist Child Care Network lists 135 in its 1996 directory, of which 51 are in the Pacific Union Conference. The Southern Union recently identified an additional 47 in its territory, for a total of 52. Most unions have not yet conducted a census.

Adventists have been slow to establish child-development centers because of their long-held belief that the best place for young children is at home with Mommy. However, Mommy isn't home and hasn't been for some time. We have cherished the statement that "parents should be the only teachers of their children until they have reached eight or ten years of age"¹ and have been reticent to admit that our children are spending their days in any other setting.

In the Sanitarium, California, church school board minutes of January 14, 1904, Ellen White is recorded as encouraging the school to add a kindergarten. When challenged about earlier statements she had made regarding ideal school entrance age, she replied that at that time there had not been a single church school in existence. She added that "[c]ircumstances alter conditions. Circumstances change the relation of things."² She added that if parents could not or would not care for their young children, it was the church's responsibility to do so.

Some people still stoutly proclaim that starting a child-care center will encourage mothers to leave home for the marketplace. Such thinking denies the fact that the majority of

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Adventist preschoolers with working parents spend their days in non-Adventist environments.

In most cases, Adventist child-care centers have not been set up by design, but rather by default. The first centers were established to raise money for other church projects and served mainly non-Adventist children. Child-development specialists agree that, all else being equal, the best environment for the young child is at home with *both* parents; but the increasing need for non-parental care for Adventist children suggests that congregations must explore ways of providing that care, be it nanny, family day care, or center care.

Adventist parents have been reluctant to put their children in child-care centers

because they often provide a mediocre-to-poor environment. A group of studies conducted between 1988 and 1994 show that 12 to 21 percent of the children in typical child-care programs are in environments that are unsafe and harmful to their development, while only 12 to 14 percent are in situations that promote their growth and learning. For infants and toddlers, the proportion in unsafe settings is even higher: 35 to 40 percent.³

The previous statistics were for all child-care arrangements. When model programs were examined by themselves, a different picture emerges. Preliminary studies of Head Start programs show that low-income children make improvements in intellectual performance as well as in language and math achievements. Unfortunately, however, these gains tend to fade away in the early elementary years.⁴

Longitudinal studies of some of these same model programs present encour-

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aging information. These studies have followed children from Head Start programs through 27 years of age.⁵ Participants in these programs have:

- fewer placements in special education
- higher rates of graduation from high school
- fewer juvenile delinquency offenses
- lower teen pregnancy rates
- higher employment rates
- less reliance on welfare
- more commitment to marriage
- higher rates of property ownership.⁶

It is estimated that for every dollar spent on high-quality programs for very young children, the U.S. government saves four dollars in remedial programs: welfare, incarceration, and special education, for example.⁷

The National Association for the Education of Young Children states that high-quality programs should have a “safe and nurturing environment that promotes the physical, social, emotional, aesthetic, intellectual, and language development of each child while being sensitive to the needs and preferences of families.”⁸ The Adventist child-development center will also seek to promote the spiritual growth of its children.

The curriculum and methods recommended by early childhood specialists to promote healthy global development remarkably parallel those described by Ellen White in *Child Guidance*.⁹ Widely accepted criteria for an early childhood education and care (educare) program that are consistent with Adventist educational philosophy can be found in *Developmentally Appropriate Practice in Early Childhood Programs*,¹⁰ produced by the National Association for the Education of Young Children.

The term “child-development center” (CDC), is preferred to “day-care center” because it indicates that both education and physical care are integral components of a program for young children. A quality program will follow Adventist educational philosophy and that of early childhood specialists, providing for the development of the whole child.

Several factors are found in better quality Adventist CDCs. The centers tend to:

- Be sponsored by schools or churches

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- Small group sizes,
- Low staff turnover,
- Administrative stability,
- Professional growth requirements for teachers,
- Dedicated Adventist teachers.

National accreditation standards require staff-to-child ratios that range from 1:3 or 4 for infants to 1:10 for preschoolers. Standards for group size vary according to age and staff to child ratio.¹¹

Young children need the security of relating to the same caregiver over long periods of time. The most effective way to retain staff is to pay them a living wage. A competent director who stays with a program for a number of years can provide a program with direction and consistency.

The strongest factor in the quality of a center is the education and specialized training of its teachers. National standards

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that provide moral and financial support,

- Be located in conferences that provide supervision and training,
- Have their own board, or, if affiliated with a school, have the director answer directly to the board,
- Employ highly educated teachers with specialty training and use money generated by the center to pay them accordingly, and
- Be accredited with a national organization.

In addition to the criteria above, quality Adventist CDC programs should have:

- High staff-to-child ratio,

require a minimum of a two-year child development or early childhood education degree for the head teacher for each group of children. In addition, a center must have a curriculum coordinator with a baccalaureate degree in child development or early childhood education. Currently, there is a severe shortage of qualified early childhood educators in the church. In the North American Division, only Pacific Union College, Southwestern Adventist University, and Columbia Union College continue to offer a major or emphasis in the field. Most Adventist CDC teachers are receiving their education at

community colleges, whose programs lack a Christian component. To supply this lack, both PUC and La Sierra University extend to CDC teachers the same professional growth benefits they give to elementary teachers.

CDC teachers need these opportunities for professional growth. When teachers stagnate, programs stagnate. The Southeastern California Conference is starting to require yearly classwork and/or in-services for CDC teachers and has instituted CDC teaching certificates with pay incentives.

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A number of specially trained elementary teachers would teach at the preschool level if it paid better. A primary teacher with a baccalaureate degree in child development and a master's degree in special education who is representative of this group says, "When CDCs pay the same as elementary, I will leave immediately to teach three- and four-year-olds. This is what I prefer and where my greater talents lie."

The National Academy of Early Childhood Programs, a branch of the National Association for the Education of Young Children, accredits centers that meet its criteria. Such accreditation shows that a center has met quality criteria. However, few centers nationwide have chosen to meet the standards. In some parts of the

U.S., Adventist centers have been the first to be accredited and continue to be well-represented among those accredited.

Finances

Special attention needs to be given to the financial health of a CDC. Few CDCs in the United States can satisfy national quality standards and make a profit; many need to be subsidized. Good centers are more likely to cost money than to make money. In fact, making money is a poor—and usually unattainable—reason for operating a CDC. Valid reasons for having a center include providing Christian care for children of the church family, serving as an outreach to the community, and acting as a feeder for a church school. Rarely does a center operated to produce income for another church program provide a good environment for children. To ensure high quality, it is often necessary to subsidize CDC programs.

Churches and schools need to have realistic expectations of CDCs. Most centers need not only a start-up budget of \$10,000 to \$30,000, but also financial support to make up for shortfalls during the first two to three years. In fact, to achieve national standards of excellence, the center will probably need continuing financial support.

The myth that child-care centers are baby-sitting enterprises should be laid to rest. A high-quality child-development center with qualified teachers nurtures the development of the whole child—body, mind, and spirit. It is time to admit that as Adventist Christians, we have a moral imperative to provide the best possible environments for the most vulnerable and impressionable members of God's family—the very young. If we choose that environment to be a child-care center, it had better be the very best we can operate. ☞

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REFERENCES

1. Ellen G. White, *Testimonies for the Church* (Mountain View, Calif.: Pacific Press Publ. Assn., 1948), vol. 3, p. 137.
2. _____, *Selected Messages* (Washington, D.C.: Review and Herald Publ. Assn., 1980), book 3, p. 217.
3. M. Whitebook, C. Howes, and D. A. Phillips, *Who Cares: Child Care Teachers and the Quality of Care in America*. Final report of the National Child Care Staffing Study (Oakland, Calif. Child Care Employee Project, 1990); Ellen Galinsky, Carollee Howes, Susan Kontos, and Marybeth Shinn, *The Study of Children in Family Child Care and Relative Care: Highlights of Findings* (Families and Work Institute, 1994).
4. Ruth H. McKey, Larry Condelli, Harriet Ganson, Barbara J. Barret, Catherine McKonkey, and Margaret C. Plantz, *The Impact of Head Start on Children, Families, and Communities* (Washington, D.C.: U.S. Department of Health and Human Services, Head Start Bureau, 1985), Publication (OHDS) 90-31193; Ron Haskins, "Beyond Metaphor: The Efficacy of Early Childhood Education," *American Psychologist* 44:2 (February 1989), pp. 274-282.
5. D. P. Weikart, Testimony at the U.S. Congressional Subcommittee on Education and Health, Joint Economic Committee, Feb. 26, 1990, p. 4; L. J. Schweinhart, H. V. Barnes, and D. P. Weikart, "Significant Benefits: The High/Scope Perry Preschool Study Through Age 27," *Monographs of the High/Scope Educational Research Foundation* 10 (Ypsilanti, Mich.: High/Scope Press, 1993).
6. K. Lazar and R. Darlington, "Lasting Effects of Early Education: A Report of the Consortium for Longitudinal Studies," *Monographs of the Society for Research in Child Development* 47 (1982), p. 195; Consortium for Longitudinal Studies, *As the Twig Is Bent: Lasting Effects of Preschool Programs* (Hillsdale, N.J.: Lawrence Erlbaum, 1983); McKey, et al.; J. R. Lally, P. Mangione, A. Honig, and D. Wittmer, "More Pride, Less Delinquency: Findings From the Ten-Year Follow-up Study of the Syracuse University Family Development Research Program," *Zero to Three* (1988), pp. 13-17; Haskins; Weikart; F. A. Campbell and C. T. Ramey, *Long-Term Outcomes for High Risk Students: The Continuing Effects of Early Intervention* (Chapel Hill, N.C.: University of North Carolina, Frank Porter Child Development Center, 1993); Schweinhart, et al.
7. Schweinhart, et al.
8. Sue Bredekamp and Carol Copple, eds., *Developmentally Appropriate Practice in Early Childhood Programs* rev. ed. (Washington, D.C.: National Association for the Education of Young Children, 1997).
9. Ellen G. White, *Child Guidance* (Nashville, Tenn. Southern Publ. Assn., 1954), pp. 23-54; Bredekamp and Copple.
10. Bredekamp and Copple.
11. *Accreditation Criteria and Procedures of the National Academy of Early Childhood Programs*, (1984), available from The National Association for the Education of Young Children, 1509 16th St. NW, Washington, DC 20036-1426. Telephone: (800) 424-2460.