

Purdue, [Political Science 222](#)

WOMEN, POLITICS, AND PUBLIC POLICY

March 27, 2008

Caretakers Advancement and Opportunity Act of 2008

Bipartisan legislation written by a
Conservative, Liberal, Progressive, and a Woman:

Addressing the growing concern for child and elderly care.

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“I have read and understood the syllabus and paper guidelines and declare that this paper
has not been plagiarized in any way.”

Signatures and Date:

Barbara Foss was a single mother who raised four children in the 1950s and 1960s. Working as a nurse at night and a mother by day she continually sacrificed to keep her family together and thriving. As a mother, time was a scarce commodity and a close, financially feasible child care center would have been beneficial not only for her, but also her growing children. Many years have passed and she is currently retired. She lives alone. While her grown children live nearby, they continually must see to her needs- both financial and social. Barbara could benefit from a daily dose of social interaction that an Intergenerational Day Care could offer to her. Sharing her experiences as a nurse, a mother, and grandmother at an Intergenerational Day Care facility would be a wonderful opportunity for the children. The facility would also benefit Barbara by providing her with an outlet for social activity with children as well as her contemporaries (Rees)

The aforementioned example is not an uncommon one. As America's families change from the "idealistic" or traditional Mother, Father and children, to the realistic single parent or mixed family home, day care offerings must be reevaluated and updated. The current policies/standards in the United States are such that there is no regulation amongst the states that the youngest and oldest generations are cared for in an interactive setting. As the numbers increase greatly for the elderly, their physical and social well being must be addressed by the federal government. Studies have been done to show the overlapping needs of the elderly and pre-school age children are similar in nature. Therefore, intergenerational day care facilities would be a wise investment for communities throughout the United States (Care Guide).

Inflations of the elderly, around 80 million by the year 2050 (Economics and Statistics Administration), show there is an impetus to look at developing programming for a rapidly growing market. As will be explained later, the relationship between aging parents and small

children in the families is another important factor to offering Intergenerational Day Care facilities. Many states have already addressed this issue of the “sandwich generation” needing a facility for dual purposes so that they may go to work (Brink). It is especially helpful to have an Adult Day Care for elderly parent(s) to be at if they are incapable of caring for themselves. Drop off Day Care enables people to still work while knowing that their elderly parent is in a facility with trained, caring professionals.

Another point to the Intergenerational Facility is that one does not have to have both elderly parents and small children to appreciate what it accomplishes for these two age groups. Sharing a facility offers senior citizens and the young children interactions they would not have in a more traditional separate setting. It is possible for the more mobile seniors help design activities for the preschool children. In this way, the elderly can be mentors to the children. “Seniors enjoyed programs that were voluntary and that put them in the role of teacher (Brink).” Reading, songs, and other activities can incorporate learning for the children and positive psychosocial activities for the elderly adults. In these shared settings, “seniors teach kids about respect, understanding other cultures and politeness (Linden).”

The history of the debate is such that only a few states in the United States offer an Intergenerational Day Care setting. Day Care facilities exist for both the elderly and children, but typically they are apart from each other. Another important factor to these Day Care facilities is that the person being dropped off for the day must be well. This creates work-related problems for whoever would have to stay at home with their sick elderly parent or sick child. In the not so distant past, families lived together in a multi-generational setting. As the United States (and much of the rest of the world) has gone to single family homes, the elderly are somewhat on the “fringe” when it comes to daily interaction or care (Brink).

When attempting to research the topic, it is apparent that the numbers of U.S. Intergenerational Day Care facilities have risen - almost 500 facilities in 2005 compared to half that in 1995. Studies have shown that in the shared day care facilities, it is of utmost importance to not treat the elders and children as “status equals”, as it does mental harm, or infantilization, to the elderly (Brink). As facilities keep this in mind, they offer the chance for elders to share from their life experiences and be leaders in the time spent with children. For those elderly with dementia or Alzheimer’s, interaction may be as simple as rocking a baby. Not only is the baby comforted, but “this rocking is also therapeutic to the senior citizens, especially those suffering from dementia (Linden).” So, the question at hand is: Why are there not more of these facilities in every state, and available to citizens of every socio-economical background? Many factors keep these Intergenerational Day Care facilities from becoming a reality for all of the United States.

In 1996, President Clinton signed the Personal Responsibility and Work Opportunity Reconciliation Act (Administration for Children & Families). This act ushered in a new welfare structure; one designed to provide people with assistance while out of the job and looking for work, rather than creating welfare dependent and unemployed households. PRWORA requires persons drawing benefits to “work after two years on assistance, with few exceptions [and] families who have received assistance for five cumulative years (or less at state option) will be ineligible for cash aid under the new welfare law (Administration for Children & Families).” While this policy was acclaimed for its promises to stop long term welfare dependency, it has had major shortcomings in its assistance for those of the lowest socioeconomic classes. PRWORA, which uses welfare as a transition to work program does offer some childcare to its beneficiaries. However, the way in which these childcare benefits are dispersed has largely fallen

short of the goals of PRWORA and is not allowing women, especially low-income single mothers, to increase their standard of living (Michel). The current childcare policy allows persons drawing on the welfare benefits to also draw on childcare benefits. Yet being a welfare to work program, PRWORA poses to be little help as “when short-term provisions for childcare...run out, few of these women will be in jobs that offer decent benefits or pay enough so that they can afford to purchase needed services on their own (Michel).” For example, a family of two, most often a mother and child, can hardly afford to support itself given the “goals” of PRWORA. It is stated that after receiving welfare benefits, single parents whom were drawing on PRWOA are expected to be working 30 hours out of the week. At the current federal minimum wage of \$5.85 this family is expected to have an income of \$9,126 a year before taxes (US Department of Labor). According to the 2008 poverty guidelines the poverty level for a family of two is \$14,000 (US Department of Health and Human Services). Sadly, since the beneficiary is now working they will receive no PRWORA assistance despite being under the poverty level, and it is likely they will have an even lower standard of living now that child care costs now must be paid out of the mother's sub-poverty level annual income. More often than not these children are left at poor quality child care centers, or with relatives whom do not offer the structure and educational environment of a well staffed and maintained child care center. The policy that is needed is one that not only addresses PRWORA's goals of getting people employed and financially independent, but one that also furnishes these people with the resources to make this commendable jump.

Another downfall of PRWORA is that it is designed to benefit either single or married males, as they typically do not have the same level of child care responsibility as their female counterparts. This lack of child care responsibility gives males more freedom and overall greater

success when pursuing a career. PRWORA sees this success as integral to society, as the “initial title of PRWORA, which asserts: (1) Marriage is the foundation of a successful society. (2) Marriage is an essential institution of a successful society which promotes the interests of children. (3) Promotion of responsible fatherhood and motherhood is integral to successful child rearing and the well-being of children (Michel).” This is a disturbing assertion considering that marriage is no longer the status quo for family structures and divorce rates are on the rise. While PRWORA assumes that the married, two-parent household is the best, “solo mothers have good reason for refusing to name fathers or seeking to avoid contact with them...some fear domestic violence, and others simply prefer to remain independent (Michel).”

The increasing divorce rate combined with increasing demands of child and elder care are thus of primary concern for women. This is because women are often left to unpaid housework averaging 14 hrs a week while enabling the men to pursue their careers (Foster).

“Why [is] there so much variance in the distribution of housework between the sexes after controlling for hours spent in paid work and earnings? Building on recent economic bargaining models of the family, the argument is that this division of labor puzzle can only be understood by treating marriage as an incomplete contract that is potentially subject to termination. When this is the case, both men and women have an incentive to cultivate their outside options by entering into paid work, and the distribution of unpaid work is determined by bargaining where bargaining power is dependent on political-economic factors outside the family (Iversen and Rosenbluth).”

So even though women today have the same incentive as men to develop careers, especially since many women are expecting divorce and will need to be economically independent; women

are still often forced into a supportive role within the marriage because the job options are still not there for women. As a result of this many divorced women are forced into a difficult situation where they have no developed career, are not economically independent, and are still the primary caregivers of their children. Without proper child care offered, these women will not have the chance to become successful, and they are left to struggle in marginal jobs, even if they were once members of an economically successful household.

Another issue that is not even addressed in PRWORA is that of elder care. Nearly one out of every four U.S. households (23 percent, or 22.4 million) provides care to a relative or friend aged 50 or older and seventy-two percent of caregivers are female, mostly wives and adult daughters (National Adult Day Services Association). Childcare has historically been a women's issue and now elder-care is quickly becoming a women's concern as well. The issue of elder-care will only be a growing concern because by 2030, there will be about 70 million older persons, more than twice the number in 2000 (National Adult Day Services Association). In 2006, there were 73.7 million children under age 18 in the United States (Child Trends). The number of elderly to care for combined with women's usual child rearing roles will create a new burden of responsibility for American women. This will especially impact those mothers whom are the heads of the single parent homes. As the demands of child care, elder care, and needed income pile up all are likely to degrade. This leaves children in care centers of marginal quality, elder persons in Medicare funded nursing homes or at home with little social interaction. All the while a single woman's career is likely to suffer since the demands on her decrease her marketability and availability.

Clear predictions are that in the twenty-first century the demands placed on family and other informal caregivers are likely to escalate, affecting nearly every American family (National

Adult Day Services Association). Individuals 65+ represented 12.4 percent of the population in the year 2000 but are expected to grow to be 20 percent of the population by 2030, according to The U.S. Department of Health and Human Services (National Adult Day Services Association). Since the early 1960s, however, children have formed an ever-smaller proportion of our total national population, declining from 36 percent in 1960 to 26 percent in 1990 and remaining stable through 2000. Since 2001, children have made up 25 percent of the total population. This percentage is expected to decline slightly to 24 percent by 2030 (Child Trends). It would thus be a natural extension of current US governmental policies of supporting families and childcare through tax abatements and aid programs to also include adult-care for the elderly in this transition from younger to older American demographics.

“Who is responsible for helping dependent older adults? This is an increasingly important question for policy makers, communities, families, and individuals in aging societies such as those in North America and Europe. In the United States, the responsibility for older adults historically has fallen mostly on family members, particularly women. However, changing demographics and lifestyle changes have made this 'solution' to meeting the needs of dependent older persons less acceptable and less workable for many (Killian and Ganong).” The development of daycare and elder-care programs are of primary concern for women because of their traditional positions as caretakers for both demographics, along with the increasing divorce rates which disadvantage women who have played a supporting role within a partnership by providing unpaid, yet highly important supportive work.

Intergenerational day care not only can provide many benefits for the caretakers, but also has many advantages for those being cared for. A good international example is from Den Buettner's search for the populations with the healthiest demographics: “Okinawans are among

the world's longest lived people. More important, elders living in this lush subtropical archipelago tend to enjoy years free from disabilities. Okinawans have a fifth the heart disease, a fourth the breast and prostate cancer, and a third less dementia than Americans”, says Craig Willcox of the Okinawa Centenarian Study. What's the key to their success? “Ikigai certainly helps,” Willcox offers. The word translates roughly to "that which makes one's life worth living." “Older Okinawans”, he says, “possess a strong sense of purpose that may act as a buffer against stress and diseases such as hypertension. Many also belong to an Okinawan-style moai, a mutual support network that provides financial, emotional, and social help throughout life. Elder Okinawan women are respected spiritual leaders in many villages, a role that gives them a greater sense of purpose (Buettner).” A sense of purpose and responsibility has great impact on elder persons' lives when provided a social output and vested interest in younger people's lives and upbringing. By creating an environment in which young and old people interact regularly, the psychological and physiological problems that occur from inactivity and social deprivation are negated. This will allow our eldest citizens not only to help raise and pass on wisdom to new generations, but also allow them more comfortable living and better health in their twilight years.

“Children and elderly people increasingly live in age-segregated worlds. Developmental experts say that the growing number of facilities offering intergenerational day care, where seniors and young children spend time together, is a partial answer to some undeniable demographics (Brink).” The development of intergenerational care is a win-win-win situation for children, the elderly, and especially the primary caregivers: women.

While these problems with current policy and the marginalization of women are large, they can be overcome with rational and sustainable policy decisions. Developing a policy recommendation that works in conjunction with PRWORA, rather than replacing it, would allow

the current welfare system to stay in place, while giving equal opportunity to those most disadvantaged by the lack of proper child and elder care. It is the goal to:

“Increase the span of childcare and eldercare in the United States in order to make those person’s caretakers equally marketable in today’s job market; also, to give the opportunity of cost-free child care to single parent homes and in homes of those in the lowest socioeconomic classes in order to decrease the cost of living and stimulate the wealth of the poorest citizens in the United States.”

By following this plan PRWORA's system can still be implemented and to even more successful ends. The first and most overwhelming of short coming of PRWORA needing to be addresses is that of child care. Free child care and elder care needs to be provided to those single parents and guardians whom are most disadvantaged in the current system. By doing this we assure that single parent homes will at the very least have the chance to make themselves as successful as two-parent households. Keeping with the spirit of PRWORA, the recommendation for free child care is available only to those whom are unemployed and looking for work; however it is also available for those single parents whom are employed. By extending child care benefits to those single parents whom are employed PRWORA is bolstered, since the degradation caused by juggling a career and child care is minimized. To once again bolster PRWORA those two parent households earning a yearly wage below the annual poverty level will also receive free child care, since these households are also at high risk of unemployment, needing to draw welfare benefits, and are greatly taxed by the cost of child care. The heightened amount of elder care is also addressed. For those single parents that also have the added responsibility of providing care

to their elder parents and relatives the service is also free, however there are more stringent guidelines on who qualifies. Only those elder persons who have been deemed by a physician or psychologist as needing special assistance in their daily functions, or in need of a highly social environment are allowed to participate in the program. Those single parent households claiming responsibility for the elder person must also be able to show that they are disadvantaged and economically inconvenienced by the demanded amount of care. By providing this care for our elder citizens not only are we alleviating the demands upon the “sandwich generation,” but we are also increasing their quality of life by avoiding the physiological and psychological damage of idleness and isolation.

Not all persons are allowed to draw upon free child and elder care; however this policy recommendation widens the scope of PRWORA's beneficiaries by offering subsidy for those persons in two parent homes depending on their annual income. As stated before, those persons living in a two-guardian household will receive free care; however it is important to recognize the high cost of care and its impact on other classes. Those living at a wages above the annual poverty level will receive a 20 to 80 percent subsidy for their child and elder care costs. Those households earning a wage \$80,000 above the poverty level will not receive subsidy for care. By offering a tiered system the government can offer a comprehensive service to families by alleviating the burden of paying for care, while promoting economic growth since parents will now have the chance to have to income households and improve their quality of life. By gradually reducing the amount of subsidy we hope that some of the shortcoming of PRWORA can be avoided since a person is never left completely without assistance until they reach a point where they should have enough disposable income to pay for the necessary child and elder care themselves.

Another important issue is to make sustained policy appealing to businesses that would help establish facility sites for their workers and communities. Incentives for these businesses would be in the form of tax credits. This would encourage businesses to help their workers be more productive, while offering a much needed service to the local community. Financial goals are also set up to start new or redesign a facility (such as an old school). Schools, colleges, and universities that are close to Intergenerational Day Care facilities could utilize the students in an internship for those in nursing, social work, etc. These opportunities provide an internship that helps the student's education while serving the needs of the community. Internships also save the facilities the monies they would have needed to use for healthcare, insurance, and other items for paid employees.

Next, the policy sets clear guidelines for the proper care, ratio, and programming minimums for a facility. Infant and pre-school day care will have specific rooms that are age-appropriate. After-school considerations will ease the burden on parents, while increasing the children's exposure to healthy foods, assistance with homework, and downtime. Keeping in mind the need for optional separate space, the policy ensures that the elderly will have their own area for their own usage (a "no-kid zone"). Nursing onsite alleviates the problem of having to miss work when a child or parent falls ill, allows for better daily evaluation of health, and ensures that any medical needs are seen to in a proper manner.

Lastly, the policy sets guidelines for free and subsidized care. Free care optimizes the caretaker's worth by allowing them to use their income for the other necessities of life. The sliding scale on which the fees are based is a scale that is helpful to incomes of the bulk of the American brackets. Both of these guidelines address the fact that, although a person may be earning an income, it may not be a living wage. It is important to address that fact because it

holds true for so many Americans. They should not have to have an increased financial burden because they are caretakers of the youngest of eldest of our society.

Our Policy

Increase the span of childcare and eldercare in the United States in order to make those person's caretakers equally marketable in today's job market; also, to give the opportunity of cost-free child care to single parent homes and in homes of those in the lowest socioeconomic classes in order to decrease the cost of living and stimulate the wealth of the poorest citizens in the United States.

We Plan on Doing This By:

1) Free Child/Eldercare

A) Free childcare will be provided to all those persons whom:

- i) are the head of a single guardian household, regardless of earned wage, given they are employed
- ii) are in the process of finding work and are claiming Federal unemployment benefits. The provided childcare is to lapse or be reevaluated when said person exceeds the time limit for drawing unemployment benefits, the children reach an age of 13 years, or the children are no longer in a single-guardian household.

B) Free eldercare will be provided in the following cases:

- i) Eldercare costs will be covered for those persons in a single guardian household

whom can show responsibility and financial detriment pertaining to the care of the elder person.

ii) Eldercare costs will be covered for either the elder person, or responsible single-guardian party given that:

a) a physician certifies that the elder person can no longer adequately care for themselves as pertaining to things such as running errands, cooking, eating, and normal hygienic functions and poses a potential time inconvenience to the responsible family member(s)

b) pending a psychological evaluation, it is found necessary for the elder person to be in a more social environment as to better their mental and physical health.

iii) Eldercare costs will no longer be completely provided for through this program when:

a) the care required for the person exceeds the Federally mandated care level (below) and the person requires either full-time assisted living or full-time nursing care.

b) the wage earned by a multiple guardian household claiming responsibility for the elder individual exceeds the Federal Poverty Level.

These families will be subsidized according to the scale below.

2) Subsidy for Child and Eldercare

A) Subsidy for childcare and eldercare will be provided to those whom:

i) Have 1 or more dependents under the age of 13 years, have claimed

responsibility for the care of 1 or more elder persons that have been evaluated and had it deemed necessary they participate in elder care.

ii) These dependents under 13 years of age or elder persons are in a multiple caretaker home that earns an annual wage higher than the Federal Poverty Level as weighted by the number of dependents. The amount of subsidy these families receive will change based on the sliding scale below.

3) Federal Child and Eldercare Incentive

A) In order for there to be adequate facilities to accommodate the demands of an increased childcare system the Federal government maintains that:

i) All businesses providing child and eldercare to their employees and the surrounding communities on the site of their place of business, and according to the Federal Child and Eldercare Guidelines listed below shall receive a tax credit based on the cost of providing the care unit, as well as an additional credit based on the number of employees whom utilize the facility on a regular basis, meaning at least 3 business days a week for 38 weeks out of the year.

ii) Those persons wishing to begin a federally approved Child and Eldercare Facility at either an existing or new facility may receive a Federal grant of no less than \$50,000 to be used for the hiring of the appropriate staff and providing the necessary amenities to patrons.

iii) Those studying to receive a degree in Social Work, Nursing, Early-Childhood Education, or Geriatric Care may fulfill college internship requirements by working at a Federal Child and Eldercare Center.

4) Federal Child and Eldercare Guidelines

A) To be a federally approved child and eldercare center the facility must achieve a minimum of the following criteria.

- i) In an intergenerational setting there must be a minimum of 1 caretaker to every 10 children 3 years of age or older.
- ii) In an intergenerational setting there must be a minimum of 1 caretaker to every 5 children under 3 years of age.

In an Individual Setting:

- iii) Infants (under 1 years of age) must be attended by a ratio of no less than 1 caretaker to every 4 children.
- iv) Toddlers (from 1-2 years of age) must be attended by a ratio of no less than 1 caretaker to every 6 children.
- v) Preschoolers (from 3-5 years of age) must be attended by a ratio of no less than 1 caretaker to every 12 children.
- vi) Children from 6-12 years of age must be attended by a ratio of no less than 1 caretaker to every 20 children
- vii) There must be a minimum of 1 nurse in the facility to address the needs of both the children and elder persons should injury or illness arise.
- viii) The Child and Eldercare center may determine the amount of care givers necessary for those elder persons depending on the amount of care necessary for their individual population.

B) Programming

- i) The facility must provide an educationally and socially enriching environment for both children and elders per the guidelines set forth by individual State Boards of Education.
- ii) The facility must offer adequate after-school programs including recreation, homework help, and a small meal or snack for the children.
- iii) The facility must provide a sufficient area for elder-only socialization.
- iv) The facility must have a nurse's office to accommodate the staff nurses with a professional space in which to treat basic injuries and illnesses.
- v) The facility must provide an area for the youngest age groups (under 3 years old) such that it is a safe, and quiet area and be used as necessary.
- vi) Facilities may choose to offer immunizations and flu shots to assure the health and well-being of the children and elder persons using the facility.

5) Guidelines for free and subsidized care.

A) Free care

- i) Free care will be provided for children and elder persons that are dependent of those persons whom are single parents or guardians and are either employed, or seeking employment and drawing unemployment benefits.
- ii) Free care will be provided to those multiple parent or guardian homes with one or more dependents (either child or elder persons) when the annual wage earned by the family is at or less than the Federal Poverty Level (FPL).

2008 Federal Poverty Levels

Persons in Household	Income
3	\$17,000
4	\$21,200
5	\$24,800
6	\$28,400
7	\$32,000
8	\$35,600
For Each Additional Person Add	\$3,600

B) Subsidized Care

i) Subsidized care will be provided to families with multiple parents or guardians and with one or more dependents (either elder or child) per the following guidelines. Given that both parents or guardians are either employed, are students, or actively searching for employment.

a) Level I – Federal Poverty Level (FPL) to FPL + \$15,000 will receive an 80% cost subsidy.

b) Level II – FPL + \$15,001 to FPL + \$30,000 will receive a 60% cost subsidy.

c) Level III – FPL + \$30,001 to FPL + \$60,000 will receive a 40% cost subsidy.

d) Level IV – FPL + \$60,001 to FPL + \$80,000 will receive a 20% cost subsidy.

e) Level V – FPL + 80,001 and above will not receive subsidy.

ii) The subsidized and free care annual wage levels are to be adjusted yearly according to the annual Federal Poverty Level.

iii) The wage scales above are to be adjusted to the annual rise in inflation and are

to be increased and widened by this percent.

This woman's issue not only inhibits women from rising out of the traditional role, but also harms families that have low to middle incomes. The policy as stated above is both convenient and beneficial to all the effected parties. The policy allows for all types of people to benefit from affordable, quality care, but this policy will not be immediately effective and is not without minor flaw. It can be argued that it is impractical to form these Intergenerational Care Centers. While we realize that this policy has high expectations we feel that the benefits for corporate companies will be too significant to keep companies from acting on it. Between federal funding and increased work time from employees, building an Intergenerational Care center will strongly improve a company's worth and productivity. Therefore we believe that the ability for this policy to help children receive a better education, adults to have the ability to work full time and receive higher salaries, and seniors to benefit from the mental stimulation and social interaction outweighs any arguments that can be made against this program.

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