Chapter 2
Child Poverty, Child Care, and Children’s Rights

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In this chapter, child poverty and the lack of fundamental rights accorded to young children in the United States are framed within a broader, international, human rights context. Persistent poverty and the lack of access to high-quality child care is a pervasive threat to young children’s well-being and healthy development. In the following sections, brief narratives of homeless children and of mothers desperate for affordable, accessible, child care shadow the cold, statistical realities of poverty and inequality—in order to illuminate what it means for vulnerable children and their families when policy hits the ground. An instrumentalist cost-benefit discourse is juxtaposed against a rights discourse with a specific emphasis on child care as a human right—anchored in international human rights conventions; specifically the Convention on the Rights of the Child (CRC).

Michael’s Story

When Michael was eight years old, the school janitor discovered him in the basement of his elementary school, trying to climb into the furnace. A homeless child, Michael had attended several schools across two states as his destitute mother, fleeing from a violent partner, was unable to find safe, affordable housing and the family suffered chronic periods of homelessness. In the years that followed, Michael’s troubled childhood was pierced by constant poverty, instability, violence, and recurring dislocations from school and community—culminating in expulsion from middle school followed by life on the streets. Twelve years later in March 2008, Michael was shot dead by a police officer, searching for a robbery suspect.1

Michael’s tragic story is not unusual—poverty, daily dangers, chronic homelessness, lack of health care and child care, and the savage inequalities of education

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1 I interviewed Michael and his family during the late 1990s when they became homeless, and reported on their earlier experiences in Polakow (2003).
continue to eviscerate young lives. Michael’s youth is iconic of corrosive public policies and their consequences; consequences that lead to invisible daily tragedies that stamp the lives of children who matter little, and whose lives are cheap. What chance did Michael, a young African-American boy, have for a different life trajectory? He might have had one in another country perhaps—but certainly not here, not now, in the United States.

As foreclosures rise and unemployment spirals, the fundamental necessities that undergird social safety nets in other societies are simply not available to American families. How do children fare when their possibilities for healthy development are diminished and young capabilities are eroded by shameful living conditions that violate their human rights? Prior to the economic crisis of September 2008, families in poverty had already experienced dire threats to their family viability. With homelessness on the rise in both urban and rural America, families now comprise 30% of the homeless population and the number of children and youth experiencing episodic and chronic homelessness has risen to 1.35 million (National Coalition for the Homeless 2008).

Despite the provisions of the McKinney–Vento Act of 1986 that require states to remove barriers and to protect their educational rights, homeless children experience multiple problems related to school access; and 23% of homeless children and youth do not attend school on a regular basis. Homelessness is a trauma and terror for children, disrupting their worlds, their friendship networks, their schooling, and their families. As significant numbers of single-mother families with young children enter shelters fleeing domestic violence, many homeless children also suffer from post-traumatic stress disorders (National Coalition for the Homeless 2008; National Law Center on Homelessness and Poverty 2008). Michael endured the terrors of both homelessness and domestic violence; yet he received no educational interventions to cope with his rapidly unraveling world until his attempted suicide in school. Such desperation illustrates how an accumulation of destabilizing life events coalesces to launch a young, impoverished child on a tragic life trajectory.

**Poverty and Social Toxicity**

Children living in impoverished communities are vulnerable not only to physical toxins in the environment such as lead paint, dilapidated and roach-infested living environments, toxic waste dumps that produce contaminated air and water—but also to the social toxins that infect their daily lives. Social toxicity (Garbarino 1995) is present in the daily dangers of street and family violence, the chronic threats of eviction and homelessness, the racial and ethnic discrimination, the isolation and the unremitting insecurity, and fear that characterize the early lives of millions of America’s children. Toxic experiences are most potent in early childhood, when intense stress in the developing infant and toddler affects the wiring of the brain, radically reshapes the nervous system, impairs the immune system, and produces long-lasting damage to social, emotional, cognitive, and physiological health.
Paul Krugman, writing in the New York Times under a headline “Poverty is Poison,” reports these and similar findings from a recent meeting of the American Association for the Advancement of Science, highlighting the damaging impact of acute early stress on the young child, particularly in relation to language and memory causing Krugman (2008) to comment:

…Now we have another, even more compelling reason to be ashamed about America’s record of failing to fight poverty… To be poor in America today, even more than in the past, is to be an outcast in your own country. And that, the neuroscientists tell us, is what poisons a child’s brain.

When the capacity for language and memory, the core of the developing child’s human identity, is harmed at the very genesis of being, this constitutes a form of state-sanctioned public violence. In a wealthy, industrialized nation such as the United States, poverty is neither inevitable nor irresolvable, and should not be normalized as a “natural” phenomenon. Poverty is constructed and sustained by deep systemic inequalities, by political, social, racial, and gender injustices, by public policies that obstruct and damage children’s human capabilities. Such policies can, and should be, undone. Yet, in the twenty-first century, the United States has still failed to implement public policies that address the elimination of child poverty.

Child Poverty in the United States

The United States has the highest child poverty rates among 19 wealthy industrialized countries (Innocenti Research Centre 2007)—13.3 million children live in poverty and 28 million live in low-income families. The poorest of our children live in single-parent families that are predominantly female headed—57.1% of single parents with three children, and 33.8% of single parents with two children—live below the FPL. However, if more realistic family budget measures are used, the percentage of single-parent households in poverty is closer to 92% and 74.7%, respectively (Lin and Bernstein 2008). While children account for 26% of the US population, they represent 38% of all poor people. Between 2000 and 2006, child poverty increased dramatically by 1.2 million and almost a million of the newly poor children are under threes living in extreme poverty.

Children of color (African American, Latino, and American Indian) are also disproportionately poor, with 36% of African-American children living in poor fami-

2 Families with incomes less than 50% of the federal poverty line (FPL). In 2008, the FPL is calculated to be US $21,200 for a family of four according to the Department of Health and Human Services. The US FPL is considered outdated, inaccurate, and out of step with the widely accepted international measure of relative poverty (less than 50% of the national median income). A low-income household is categorized as below 200% of the poverty line—about US $42,000 for a family of four. This measure is generally accepted as a more accurate indicator of actual child poverty in the United States.
lies, in contrast to 10% of white children. Employment in low-wage work is also no buffer against poverty; for 56% of children live in low-income families where a parent actually works full time (Douglas-Hall and Chau 2007; Fass and Cauthen 2008). As the public space shrinks, poor children receive less and less. With 9.4 million children lacking any form of health insurance (National Center for Children in Poverty 2008a) and 12.6 million estimated to be hungry or living on the edge of hunger (Food Research and Action Center 2007), children have become the most vulnerable subgroup in the United States, and persistent, deep poverty is a toxic threat to their well-being and healthy development.

The current economic crisis, which has led to a massive federal bailout of the financial industries, points to the vast inequality gulf in this country where gains are readily privatized, while losses are broadly socialized. During the past 8 years, there has been a dramatic increase in wealth inequality and in the most recent international report on inequality, the United States ranks near last (after Mexico and Turkey), with the poorest 10% of the US population subsisting on incomes of less than US $5,800 a year (OECD 2008). Despite the public outcry against the golden parachutes and the billions of dollars to bailout the banks and investment houses in what Greider describes as “Goldman Sachs Socialism” (Greider 2008, p. 5), there has been minimal redirection of government funds to help working poor families who have encountered years of losses in wages, health care benefits, and pensions (Lee 2008).

The grim economic conditions, following on the heels of “welfare reform” in 1996, have further shredded the already residual safety net, and exacerbated the acute need for child care for low-income parents, particularly single mothers.

In my recent study documenting the child care crisis of low-income single mothers (Polakow 2007), women tell their stories of loss and desperation as well as the diminished early lives of their children. As these women struggled alone to make it as parents and providers, they were affected not only by harmful public policies but by a gaping lack of available child care. The absence of appropriate levels of support violates both the rights of struggling parents and their children. Threaded through the women’s narratives of struggle and determination to beat the odds stacked against them is the acute need for high-quality and affordable child care—frequently the tipping point between family viability and family disintegration.

**Child Care: The Tipping Point**

Annette is a nineteen-year-old, white, single mother in Michigan with an eight-month-old baby, Nicholas, and a bleak future. Living in a homeless shelter with her baby son, Annette is working full-time at minimum wage; yet is unable to find affordable housing or quality, stable child care. In his short life, Nicholas has experienced four different placements—due to his mother’s erratic work schedule and her decision to pull him out of dangerous and poor-quality child care settings. Annette has been unable to access state child care subsidies, and with nowhere to turn, she is on the verge of losing her baby to foster care.3

3 I interviewed Annette in 2006. Part of her story is included in Polakow (2007).
As with most low-income mothers across the nation—good jobs with benefits and regular hours are hard to come by (Presser and Cox 1997; Cauthen and Dinan, 2008) and even more so in Michigan, with high unemployment, daily home foreclosures, and close to 420,000 children living below the poverty line (National Center for Children in Poverty 2008b). As a poor young woman who has not completed high school, working a minimum wage job with no benefits; desperate in her struggle to access child care subsidies, health care, and affordable housing, Annette’s life and that of her young child is emblematic of what Martha Nussbaum terms “an acute failure of human capabilities” (Nussbaum 2000, p. 3). And Baby Nicholas is but one of almost half a million Michigan children whose lives are imperiled by poverty. His infancy has been disrupted by family homelessness and multiple placements in child care, and with no access to early intervention he is already suffering the consequences of poverty and the isolation from supportive networks that could protect and enrich his development. With denied fundamental human rights to housing, health care, and child care, Annette and her baby son constitute another discarded young family amid the rubble of American democracy gone awry. There are no exits without substantial public investment in their lives.

In contrast to the countries of Scandinavia and Western Europe, as well as Canada, Australia, and other industrialized wealthy democracies, the United States stands as an outlier nation, with no infrastructure of family support policies such as universal child care and paid parental leave. Such a care deficit takes a distinctively heavy toll on low-income families.

The Child Care Deficit

Child care is a huge problem… What do you do? I mean you cannot leave your children at home, and you can’t take a day off and you don’t have child care… (Clara, a New York City immigrant mother, quoted in Polakow 2007, p. 2)

It’s the most frustrating thing in the world for me—I could yell and yell all day about daycare… You know, where people who have a lot of money—people like us get this ratty little building. (Hannah, a San Diego mother, quoted in Polakow 2007, p. 72)

Although a gaping care deficit exists for the children of working mothers, there are, nevertheless, large numbers of women with children in the labor force: 74.3% of mothers with children 6–17 years, 59.6% with children under 6 years, and 55.4% with children under 3 years (US Department of Labor 2008a, b). With 12 million children in some form of public or private child care, the crisis of affordable and good quality child care becomes particularly acute for single mothers with very young children. Children enter child care facilities as young as 6 weeks old and may be in care for 40 hours a week until they enter school. Only 14% of income-eligible families receive child care subsidies (Children’s Defense Fund 2005) and even then subsidies do not pay the full cost of quality care, and there are thousands of children on waiting lists in the states—from 38,000 in New York City to 280,000 in the state of California (Carlson and Sharf 2004; Schulman and Blank 2005). Child care costs
are so high that they often exceed the cost of college tuition at most public universities, ranging from US $4,542 to US $14,591 for full-time infant care, and from US $3,380 up to US $10,787 a year for a preschooler (National Association of Child Care Resources & Referral Agencies 2008). While costs are considerably cheaper in family daycare homes, many are unlicensed and lack of regulation and monitoring substantially increases the risks for young children.

Because there is no federal regulation of private child care, it is up to the states to set minimum standards for child care centers: but minimum translates to less than minimal in terms of regulating the quality of care. The National Association for the Education of Young Children (NAEYC) has developed accreditation standards for promoting program quality and best practices; yet with 12 million children under five in child care, there are less than 7,000 programs serving approximately 586,000 children, that have been accredited (NAEYC 2008). Low-income parents encounter greater hurdles obtaining licensed care as lack of resources diminishes choices, there is less access in poor neighborhoods to higher quality care, and unstable odd-hour work schedules make child care arrangements very difficult (Boushey and Wright 2004; Chaudry 2004; Presser and Cox 1997; Vandell and Wolfe 2000). Consequently, mothers must rely on makeshift and multiple care arrangements that create further instability in a young child’s life. The fact that large numbers of poor children end up not just in bad licensed care but in the largely invisible underworld of unregulated care is alarming. Helburn and Bergmann (2002) estimate that about one third of children in child care from birth to five are in the unregulated sector.

The high numbers of infants and toddlers in child care are of particular concern because they are most susceptible to the harmful effects of bad care. Seventy-three percent of the infants and toddlers of employed mothers (about 6 million children under 3 years) spend much of their waking hours in child care. Under the 1996 Personal Responsibility and Work Opportunity Act, poor, single mothers were required to meet mandatory work requirements as a condition of receiving benefits. While federal law exempts mothers with infants under 12 months, several states (Massachusetts, Michigan, New York, Ohio, and Wisconsin) have increased the work requirements to include mothers with infants over 12 weeks. The escalating demand for child care has created desperate choices for single mothers, coerced into the low-wage workplace in order to avoid destitution (Kahn and Polakow 2000).

The developmentally damaging conditions that exist nationwide for millions of vulnerable young children in their most formative stages of development are a national disgrace. The severe child care crisis that exists has been documented for more than a decade: lack of regulation, lack of access, lack of affordability, poor quality, bad working conditions with low pay, high turnover, high ratios of children to staff, and substandard care that disproportionately impacts low-income children of color (Ebb 1994; Galinsky et al. 1994; Helburn 1995; Helburn and Bergmann 2002; Polakow 2007; Schulman 2000). While high-quality child care results in long-lasting social and educational impacts that are particularly significant for low-income children, they are also far more sensitive to the negative effects of bad child care (Klein and Knitzer 2007; Peisner-Feinberg et al. 1999).
Yet, despite the accumulating body of research that clearly points to what supports and enriches young children’s lives and what harms, poor children have no entitlement to good-quality early care. In the absence of rights, their lives, like those of their parents, are largely expendable; and when poverty, low-wage work, and lack of child care coalesce to create an acute crisis of care, poor and often desperate parents must settle for less, much less.

Hobson and Lister (2002) argue that the lack of social and economic rights—the absence of any universal social citizenship rights that guarantee “a positive state” for women and their children—create fecund conditions for child poverty to flourish. Esping-Andersen (1990) characterizes social citizenship rights in advanced capitalist societies by their degrees of decommodification, the extent to which citizens are not dependent on the vicissitudes of the market—but rather are protected by stable and universal entitlements within their own societies. Such rights, argued British sociologist Marshall over half a century ago, are central to democracy, and the role of social policy is to ensure that all have “a claim to be admitted to a share in the social heritage” (Marshall 1963, p. 72). Yet, a young, poor, child in the United States has no such rights and no such claims. In contrast to the 27 countries that make up the European Union, the United States has no platform of social and economic rights for children or their working parents such as paid maternity and parental leave, a national child care system with targeted provisions for working parents, a national health care system, and a living wage that enables family sustainability. The dearth of such family policies and the crumbling public infrastructures that harm so many of our youngest and poorest have pushed vulnerable children and youth to the liminal edges of school and civic society. Lacking fundamental rights, children’s lives in a “de-welfared” nation in the United States are no longer granted even the minimal protections associated with childhood in a modern democracy.

**The Discourse of Cost-Benefits versus Rights**

The dominant discourse in the United States about early childhood education is instrumentalist, constructing poor young children as “at-risk”—for educational failure, for later teen pregnancy, and/or criminality and violence, with ultimate costs to the nation. The prevailing arguments for early intervention are embedded in deficit, racialized assumptions about poor families and premised on a cost-benefit analysis of why investing now pays dividends in the future. Heckman and the Committee for Economic Development argue for a redirection of educational investments from public schools (which are already underfunded) to early childhood to redress the assumed “constellation of pathologies” in poor children’s homes, calculating that early intervention provides better long-term returns (Heckman and Masterov 2004, p. 17).

However, this instrumentalist, “invest-now-or-pay-later” discourse obscures a language of rights, and constructs children as the sometime “deserving poor” focusing on the family as the dominant risk-inducing system; whereas poverty, itself,
should be seen as a systemic pathology that corrodes family viability. Means-tested and segregated early childhood intervention programs construct poor, young children and their parents as post-modern beggars; such programs are also the first to be cut or eliminated when deficits loom large and when there is competition for scarce resources. Reframing persistent child poverty and the absence of child care in terms of human rights violations, and anchoring social policy in the frameworks of international conventions, creates another plane for the discourse about children’s lives and their rights. If we view children as possessing fundamental rights to care and education that are grounded in international conventions, then it becomes an affirmative obligation of government to address child poverty alleviation and the provision of universal child care (Davis and Powell 2003; Polakow 2007).

**Child Care as a Human Right**

The International Convention on the Rights of the Child (CRC 1989) was adopted in 1989 and has been ratified by 194 countries; yet the United States has not joined the community of nations in affirming children’s human rights. In the CRC children, for the first time, are recognized as “rights bearers,” as citizens and as social actors (Kilbourne 1999). The CRC addresses children’s rights to receive care and protection, and the promotion of their best interests for “full and harmonious development.” Article 18 emphasizes that State Parties must provide “appropriate assistance to parents…” and take “all appropriate measures to ensure that children of working parents have the right to benefit from child-care services.” Other key articles of the CRC affirm children’s economic, social, and cultural rights (Article 4), the establishment of institutions, facilities, and social programs for support of children (Articles 18 and 19), rights and access to services for disabled children (Article 23), access to and quality of health care (Article 24), and rights to social insurance and social security (Article 26). The CRC in affirming children’s inherent rights to social citizenship, and emphasizing the special interests and needs of children and their working parents closely aligns with Article 25 of the Universal Declaration of Human Rights which emphasizes that “Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.” (Universal Declaration of Human Rights 1948, Article 2). While Eleanor Roosevelt was a key figure in promoting the establishment of the Universal Declaration of Human Rights, we, in the United States, now routinely violate its key precepts in relation to the health, welfare, and child care of young children. Other international conventions such as the Convention on the Elimination of all Forms of Discriminations against Women (CEDAW), which has been ratified by 169 countries excluding the United States, affirm the rights of women to work, to maternity leave, and to child care.

The 27 countries of the European Union have not only committed to combating child poverty and social exclusion by expanding child care and paid maternity and parental provisions, but have also promoted wage guarantees and flexible working
patterns (European Commission 2004). Child care is viewed as a human right and poverty and social exclusion are viewed as clear violations of children’s human rights. European Commissioner Franco Frattini, speaking at the Second European Forum on the Rights of the Child, urged member countries to commit further resources to poverty alleviation and the care of children, stating “It is a violation of fundamental rights when children are denied food, or housing, or education” (Frattini 2008). Yet children’s rights are not even part of the growing conversation about early childhood education in the United States, and, as Kamerman points out, the absence of paid parental leave and universal child care “exists in dramatic contrast to the policies that exist around the world and especially in our peer countries” (Kamerman 2000, p. 13). In Europe, the CRC forms the basis for social policy formation about children’s welfare, well-being, education, and child care. Such rights are embedded in a notion of public care and public responsibility that supports children’s human capabilities and makes possible the fundamental prerequisites for early growth and development and participation in child life in a modern democracy.

**Recommendations for the Future—What Would It Take?**

In a rich, advanced economy like the United States, poverty should be viewed as an aberration. (Bernstein 2007, p. 1)

Ending child poverty and creating universal systems of child care and health care are national imperatives for children. The Center for American Progress (CAP) Task Force on Poverty (2007) proposes a national strategy to cut poverty by half in the next decade. Their recommendations are closely aligned with Britain’s pledge, under Former Prime Minister Tony Blair to end child poverty by 2020 and to reduce child poverty by 50% by 2010. While that goal has not yet been met in Britain at the present time, some gains have occurred and it remains a national priority. Britain’s 2003 Green Paper, *Every Child Matters* and the *Children’s Act* of 2004, at the very least, created an explicit recognition and commitment to a policy agenda that calls for accountability in meeting those goals (HM Government 2003, 2004).

The CAP Task Force recommendations point to poverty as a critical social policy agenda for the incoming Obama administration. Their comprehensive recommendations include, but are not limited to, raising the minimum wage, expanding the Earned Income Tax Credit for low-income working parents, expanding child tax credits, guaranteeing child care subsidies to low-income families with incomes below US $40,000 a year, and developing a high-quality education system from early childhood to postsecondary that is universally available and accessible. If implemented, the key poverty reduction strategies are estimated to cost approximately US $90 billion a year. In contrast, the Bush tax cuts of 2001 and 2003 cost US $400 billion a year and in 2008, tax cuts to those with incomes above US $200,000 are estimated to be US $100 billion (CAP 2007, p. 5). Greenberg, the Task Force executive director, argues that a more equitable tax system with a partial redistribution of resources could dramatically cut poverty by half within a decade,
with drops in child poverty of about 41%. The Task Force recommendations assume an even greater urgency in the current dire economic crisis which has pushed millions more families over the edge. The costs of such policy recommendations pale in comparison to the squandered resources, the Blackwater war profiteering, and the ongoing costs of the Iraq war, which are projected to reach US $3 trillion (Bilmes and Stiglitz 2008) and the US $700 billion federal bailout to financial institutions at the time of writing. The election of President Obama and the Democratic takeover of the Congress have created a window of possibility to begin the work necessary to transform such sordid inequalities; an opportunity to reframe the meaning of “public” to encompass social and economic justice for the common good.

The CAP task force recommendations address the acute child care needs of low-income parents by proposing that the current federal child care block grants be replaced by guaranteed subsidies to all working families with incomes below 200% of the FPL; and by creating a federal early care and education strategy fund. Such a fund would promote a comprehensive birth to school-age policy, double the current level of funding to states in order to coordinate and merge all public preschool programs such as Head Start and prekindergarten, thereby promoting quality upgrades and initiatives (CAP 2007, p. 33), and ensuring access to preschool for all three-year olds. While the child care proposals embody an ambitious agenda pointing to a dramatic and significant policy shift, they lack an in-depth understanding of the existential realities of child care on the ground—the all-pervasiveness of shoddy, inferior care meted out to poor children across the country.

Current child care subsidies are pegged at the 75th percentile of market rates in order to ensure “equal access” (US Department of Health and Human Services 2005), but actually fail to ensure this. In the unregulated free market of private child care, skyrocketing costs determine which toddlers play and which toddlers are confined to cribs in dirty basements; which preschool children attend centers that are NAEYC accredited with professional teachers, and which children attend “ratty little buildings” with untrained caregivers. The CAP proposals also significantly underestimate the problems in transforming both regulated and unregulated child care: Improving quality most certainly would require far more funding, extensive investment in staff training and education, comprehensive regulation and monitoring (including the tangled network of family daycare homes), and substantial wage increases for teachers and caregivers.

Helburn and Bergmann (2002) estimated in early 2000 that it would cost US $56 billion a year to create affordable quality care for every child, arguing that the federal government would need to finance such a system, building on existing public programs such as Head Start and preK. Their plan proposed creating affordable child care that would require parents to pay up to 20% of the portion of their income that exceeded the poverty line for child care costs. Families below the FPL would receive free child care. They, too, proposed investing in quality improvements using an incentive-based system of child care subsidies to licensed care settings, where centers that met and exceeded quality care standards would be rewarded by increased subsidies. But, as with the CAP proposal, there is a significant
problem in building on a substandard foundation. More needs to be undone in terms of the pervasive segregation by class and race that currently exists for low-income children; and educational and training incentives are more likely to improve quality for those who already have, rather than for those who have not. Embedding child care in the free market, with its lack of regulation and corrosive profiteering, is not in the best interests of children.

Poor quality and lack of access exist in the public preschool sector as well. While the National Institute for Early Education Research (NIEER) reports that in 2006–2007 there were improvements in both spending and enrollment of children in 30 of the 38 states that offered public prekindergarten programs, quality and access issues remain severe. In those states that enroll the highest percentages of 4 year olds—Oklahoma, 68.4%, Florida, 56.7%, and Georgia, 53.3%—there are no programs for 3 year olds. Nationwide more than a million children now attend preK programs but, overall, that only accounts for 22% of 4 year olds and 3% of 3 year olds with 12 states providing no programs at all. Less than half of the 38 states require teachers to possess bachelor’s degrees; and only 10 states actually meet 90% or more of NIEER benchmarks for quality standards (NIEER 2007). In addition, most programs are part-day, creating care gaps for working parents who must still juggle full-time child care needs.

Hence, the existing patchwork of stratified private and public early childhood programs and services provides neither a stable infrastructure nor a solid foundation on which to erect a comprehensive child care system. Unless child care is a right, it is subject to the exigencies of the free market and imperiled by federal and state social spending cuts during economic downturns. Universal child care does not come cheap. But once established as a right, the discourse about who deserves care and who does not, and the income and racial stratification embedded in current policies, can be transformed. Universal child care has a very successful history in Sweden, Denmark, and France and those countries have invested wisely in the well-being of children, integrating early care and pedagogy into national systems that are consistently rated as high quality, with Denmark and Sweden receiving international praise for “woman-friendly” work-family policies that promote social equality.

For those of us who advocate on behalf of families and young children in the interests of social and economic justice here at home, the election of President Obama introduces a new optimism and sense of possibility of what could be—perhaps the inception of “progressive universalism” (CAP 2007, p. 14) that may yet see the dawning of universal child care within the next decade? And there is much more to be said—about educational inequality, racial discrimination, juvenile injustice, lack of access to affordable housing and healthcare. It is certainly time to end an era of shame and appalling indifference to the lives of poor children and their parents. Violations of children’s human rights should never be normalized. The urgent work that confronts progressives now is building a grassroots campaign to ratify the CRC, embed a language and consciousness of children’s human rights in policy discourse, and mobilize to end child poverty and create universal child care. If not now, when?
References


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