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Initial Findings from Michigan

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# Faith-Based Child Care *Policy Brief*

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Research Summary  
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# Introduction

The majority of American households with young children require a regular child care arrangement from someone other than a parent or guardian.<sup>1</sup> Child care arrangements of this kind play two essential roles in American family life. Child care can enable parents and guardians of young children to join the labor force or to finish their education. Additionally, the child care arrangements selected by families can have a significant impact on a child's long-term cognitive, social, and behavioral development. Child care providers can promote young children's flourishing by introducing them to positive experiences, activities, routines, and relationships — assuring children of a safe, nurturing, and predictable environment.

Recent surveys suggest that faith-based child care is a preferred option for some American families. A 2020 survey found that, nationally, half of all families who relied on center-based child care used a child care center they described as “faith-based.”<sup>2</sup>

**14% of parents in a 2020 survey named a faith-based child care center as their ideal child care arrangement, second only to being able to provide care for one's own child.<sup>3</sup>**

The connection between faith and child care in the United States is not new. Many early proponents of infant schools and kindergartens and, later, religious schools for older children, were motivated by a combination of religious and philosophical ideals. Some saw themselves as working in concert with the Divine in the formation of the human person.<sup>4</sup>

In the 20th Century, as women entered the paid workforce, religious congregations around the country quietly became sites of care for children whose parents and guardians were at work.<sup>5</sup> By the early 1980s, one out of every three churches in America hosted a child care program. Studies conducted between the 1980s and the early 2000s suggested that between 20% and 33% of all child care in the United States was provided by congregations and other religiously affiliated organizations.<sup>6</sup>

Child care in contemporary America is provided in a wide variety of settings. Child care centers, licensed home-based child care providers, Head Start programs, and prekindergarten programs make up the “formal” portion of America’s child care system. Meanwhile, a great deal of child care occurs in informal settings as well. Extended family, neighbors, or unlicensed caregivers are often the ones responsible for caring for children on a regular basis. Given the diversity of child care types in the United States, child care could best be described as an ecosystem that has grown in tandem with changing household needs and preferences and in response to diverse financial pressures, funding opportunities, regulatory standards, and incentives.

The COVID-19 pandemic drew new attention to the state of the American child care ecosystem, revealing the extent to which some families rely on child care arrangements as well as the fragility of child care economics on the provider-side. Many providers struggled to weather revenue volatility brought on by the pandemic. When child care arrangements became unavailable for a variety of reasons - temporary public health measures, families’ heightened health precautions, and child care closures - many working parents chose to reduce work hours or leave the workforce.<sup>7</sup> A 2021 federal stimulus bill, the American Rescue Plan Act (ARP), sent funding to states to help support families and stabilize the child care industry as did the 2020 Coronavirus Aid, Relief, and Economic Security (CARES) and the Coronavirus Response and Supplemental Appropriations (CRRSA) Acts.<sup>8</sup>

Public policy makers and leaders in the child care sector are now weighing post-pandemic, longer-term interventions intended to improve affordability, equity, and sustainability in the child care sector.

Given their historic role and persistent interest in faith-based child care, faith-based child care models should be contemplated by these interventions. This task raises several questions:

- How should faith-based child care be assessed relative to the quality standards that guide licensing decisions, parent choice and, in some cases, provider reimbursement rates
- If faith-based child care is not well measured within existing quality systems, should these standards be revised or relaxed in order to accommodate faith-based models
- Should restrictions on religious use accompany any direct public funding that flows to faith-based providers?
- Should policy makers prioritize parent-centered funding mechanisms that typically avoid claims of either religious establishment or anti-religious discrimination?

The research record that would help inform these questions is scant. As child care experts Suzann Morris and Linda Smith recently observed, “[n]o official national survey of faith-based child care has been conducted since a 1983 study conducted by the National Council of Churches.”<sup>9</sup>

In 2021, the Center for Public Justice, together with DataWise Consulting (formerly Calvin University Center for Social Research, hereinafter referred to as “CPJ/DataWise”) examined faith-based child care in a single state: Michigan. Using a combination of methods – database analysis, qualitative interviews with providers, and stakeholder interviews – researchers estimated the number of faith-based providers in the state of Michigan and sought a qualitative account of faith-based child care in providers’ own terms. The study sought to identify common faith-based practices in child care settings as well as attitudes held by faith-based child care providers about their work. The study results are by no means a comprehensive account of faith-based child care, nor do they definitely answer the many long-standing questions regarding faith-based child care and child care policy. However, the results help identify priorities for the child care sector as identified by faith-based child care providers. The results also point to areas of areas of future inquiry related to faith-based child care.

## Methodology

CPJ/DataWise researchers analyzed data provided by the state of Michigan in order to estimate the number of Michigan faith-based child care providers.<sup>10</sup> State law defines and sets standards for several different types of child care: child care centers (facilities other than private residences where children receive care), family-based child care (private residences where six or fewer children receive care), and group child care (private residences where seven to 12 children receive care). Each type of provider must maintain a license through the state’s Department of Licensing and Regulatory Affairs (LARA).<sup>11</sup>

Certain child care settings are considered license-exempt, and therefore not tracked in the LARA’s database of providers or involved in the state’s quality rating system, which is housed in a separate public agency, the Early Childhood Investment Corporation (ECIC). Adults who are related by blood, marriage, or adoption to a child in their care as well as those who provide care in the child’s home (rather than their own) are license exempt.

CPJ/DataWise analyzed provider lists from LARA and ECIC to identify faith-based providers among all licensed providers, including child care centers, family-based providers, and group child care. The analysis focused only on those providing care to children ages 0 through 5. After school and other out-of-school time programs for children ages 6 and up were not included nor were any license-exempt child care providers. Faith-based providers were identified on the basis of several indicators present in the LARA and ECIC databases. Specifically, the ECIC database – which listed all LARA-licensed providers as well as 14 providers affiliated with Native American tribes – contained two indicators relevant to faith. Providers can voluntarily identify themselves in the ECIC database as “faith-based” and list a religious affiliation and can update this information at any time. Additionally, some providers were licensed by a church or other religious organization or had a business name that conveyed a faith connection (e.g. Immanuel Lutheran Preschool, Pooh’s Playhouse Christian Childcare).

To further validate the estimate, researchers cross-checked those deemed faith-based from the ECIC lists with a list of nonpublic schools maintained by the Michigan Department of Education (MDE). Of the state’s 533 nonpublic schools, 281 are both religious and offer early education. All 281 of the faith-based early education providers identified via MDE analysis had already been identified as being faith-based by one or more of the other indicators.

In order to develop a descriptive account of faith-based childcare in Michigan, the research team conducted individual qualitative interviews with a purposive sample of providers. The sample was constructed to include providers with diverse characteristics, specifically:

**Provider type:** center, family-based, group

**Religious affiliation:** Jewish, Muslim, Catholic, Protestant  
(including Historically/Predominantly Black, Evangelical, Mainline)

**Geographic region:** Eastern, Southeastern, Western

Finally, researchers recruited interviewees located in Michigan ZIP codes with average incomes in the lowest quartile in the state ensuring that at least one quarter of the sample was made up of providers serving low income families.

# Findings

## Faith-based child care plays a meaningful part in Michigan's child care ecosystem, occurring in family, group, and center-based child care settings.

According to state databases (LARA and ECIC), there were 8063 licensed child care providers, serving children ages 0 through 5, as of June 2021. Approximately 15% (1,254) of the licensed child care providers listed in LARA and ECIC were identified as faith-based on the basis of one or more of the following indicators: self-identified as faith-based in ECIC, provided a religious affiliation to ECIC, religious keywords in the providers' business name or licensee name.

The faith-based provider estimate includes child care provided in a variety of settings. Child care centers were the most common form of faith-based child care. The analysis identified 857 faith-based child care centers, a figure that includes 281 nonpublic religious schools that host early education programs for children ages 5 and younger. The analysis also identified more than 300 faith-based family and group child care providers.

## Faith-based child care providers widely see faith as a source of and enhancement to child care quality.

From the perspective of faith-based providers, faith-identity is fully consistent with the core goals of the childcare field: healthy child development. Faith-based providers widely see themselves as quality providers, and they see their faith as contributing to the high quality in several different ways:

- **Attention to the whole child.** Many faith-based providers interviewed expressed a view that all children are “deserving of respect and dignity.” For some, a belief that young children have spiritual lives - as well as emotional and material ones - infused their child care practices. As one provider noted, “[O]ur role is to keep them safe. Second to that, their spiritual needs are just as important of a priority for us, so we really enjoy faith-based practices in every part of our day.”

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- Faith-Based Child Care Provider

- **Leadership and staff motivated by mission.** “It’s not just a job. ...” was a sentiment expressed by several child care providers. Direct care providers and childcare center directors alike noted that faith motivations and a sense of mission were behind the launch of some child care programs and infused daily work with children.
- **Connections to religious institutions.** Providers frequently mentioned the fostering of community and institutional connection as part of the value that faith brings to child care. One provider felt a “responsibility to build community, a covenantal relationship,” and to build “a sense of belonging.” A Jewish child care center though not formally connected to the local synagogue, had good relationships with local rabbis who spent time with the program. A Christian child care center offered parents virtual sessions with a pastor to talk about practicing faith in their homes.
- **Connections to material resources.** In some instances, the religious institutions connected to providers to material as well as spiritual resources. One provider regularly referred food insecure families to a church-affiliated food pantry. Another church offered a “baby pantry and counseling that helps moms when they first find out they are pregnant.” Another home-based provider described how her local church serves as the tornado shelter for her in-home daycare.
- **Cultural competence.** The relationship between faith and culture in early education surfaced particularly in interviews with providers associated with Islam. An Islamic educator and the leader of an Islamic community emphasized that teaching children the Arabic language is important to some Muslim families. Similarly, child care providers who practice religiously guided food practices, such as the exclusion of pork from a diet, and who observe religious clothing norms, may be able to offer families a child care setting that is uniquely congruent with the families’ practices in a way that helps establish trust. In the words of a child care consultant, these providers should be “recognized for what is valuable, culturally competent work.”

## Faith is expressed in a variety of ways in the child care setting.

Providers differed widely with respect to the ways faith manifested in their child care services. Holiday observance, the saying of meal time prayers, the following of faith-based food preparation practices, the sharing of religious stories, and the use of religious spaces for gathering or instruction were among the many faith practices integrated into child care. Some of these practices help shape the daily routines and rituals that are so essential to early learning and development.<sup>12</sup> Other practices help children mark time, such as through holidays and sacred seasons.

### FAITH PRACTICES IN PROVIDERS' OWN WORDS:

"[W]e respond to situations [in ways that] show God's love. We talk to each other in a loving way. We think of [instances of] forgiveness as new starts, whether we deserve [them] or not."

"Children learn to pray to start their day and pray before they eat."

"We start each of our mornings with worship songs and start circle time with prayer. We pray before all our meals and before naptime."

Providers also varied in the ways they communicated and presented faith to children and families. In some instances, providers understood their role to be conveying and enacting a faith shared by providers and families. This could be called a sectarian approach, and it assumes a unity in belief between providers and families. Others expressed a more pluralistic orientation to families and children, acknowledging the faith-based nature of the programming but not expecting all families or staff to share the same faith.

Some providers incorporated faith into the childcare setting without establishing specific faith-based credentials for staff whereas others formally or informally sought out like-minded staff. In some cases, shared religious background between a center and its staff was a preference but not a non-negotiable requirement in hiring decisions. Sometimes, shared values, familiarity with faith, and/or a willingness to participate in

faith practices (such as saying prayers with children) were sufficient. In center-based care, for example, religious leaders (rabbis, pastors, imams) affiliated with the center may guide the center's faith practices, alongside religiously trained center directors.

"I just want [the children] to understand that the space they're in [a church] is a worship space; it's a space in which we come to think about God and God's presence in our lives. It's a space where we come to pray. ... We celebrate Advent and things are blue; then we celebrate Christmas and it's much more festive; we celebrate Lent and it's a little more stark."



## Common concerns among faith-based providers were related to the human resource side of child care: recruiting and maintaining staff and securing decent wages and respect for child care work.

Every provider – from center directors to home-based providers – named staffing and/or job quality as their biggest challenge. As one provider said, “If you talk to any daycare, staffing is a challenge, and that’s not just COVID-related. You have to maintain ratios. Keeping staff in daycare can be hard. It is a revolving door.” Some child care workers expressed regret at the lack of respect afforded to their work. They wanted to be considered “partners” of families in raising children, as embedded elements within the social fabric, rather than someone who merely provided a service to families.

Staffing was routinely cited as the primary factor limiting expansion in child care services. As one child care center director emphatically stated, the “biggest barrier to expansion is the lack of workforce within early childhood in Michigan and nationwide. We cannot think about expansion until we can take care of our current needs.” Some noted that they were already short-staffed and had waitlists. As one provider said, “We want to add more classrooms. There is a need for it. But it’s more of a long-term goal, considering the pandemic.” Even those institutions that were open to expanding care services mentioned staffing challenges as the most significant barrier. There needs to be a way to “subsidize personnel,” remarked one pastor.

### IN PROVIDERS' OWN WORDS:

Child care is “not your typical office workplace; it’s a daily grind kind of environment.”

There is “not always the mental space” to think creatively, nor “opportunity for brainstorming with coworkers.”

“You have to love your job to work in daycare. It is very strenuous, physically demanding, and emotionally exhausting. It is well worth it, but it is tiring.”

“Expectations are so high, and the pay is so low. You’re expected to have almost the same qualifications as a regular teacher, a certified teacher, and get paid barely over minimum wage.”

## Faith-specific concerns expressed by providers included limits on the use of faith-based curriculum and uncertainty about appropriate expressions of faith in the child care setting.

Among the faith-specific concerns were challenges related to curriculum. Several interviewees noted that the use of faith-based curriculum led to the provider receiving a lower rating in the state's rating system. Another switched to a secular curriculum and away from a faith-based curriculum to secure federal funding for a preschool program. These challenges were most salient to providers who cared for children ages 4 and 5, particularly those who offered preschool and prekindergarten programs in addition to care for younger children ages 0 to 3. Nevertheless, they affected some faith-based providers' senses of inclusion and respect.

Several providers indicated that they felt some underlying fear about how others would respond to their faith practices. For instance, one in-home provider stated that she is very clear about the faith-based nature of the daycare and wants it to be obvious to families, yet that she "always has a tiny tinge of fear" and "can't be as open and honest about it on the state's webpage," referring to a publicly-funded and privately-operated childcare information.<sup>13</sup> Similarly, a consultant to home-based providers notes that some providers "fear that families not of the faith [could] question or complain about a [faith-related] practice [of theirs]."

# Discussion

## **Better tools for identifying different child care types, including faith-based child care, are needed.**

The CPJ/DataWise pilot resulted in an approximate number of faith-based child care providers in Michigan but also highlights certain limits to achieving a comprehensive account of faith-based child care nationwide. The study's methodology relied on several different indicators, none of which are comprehensive. In the state of Michigan, providers may identify themselves in the state's quality rating database as "faith-based" and may list a religious affiliation. Although one can be confident that providers who select these identifiers are faith-based, the method is under-inclusive. Some faith-based providers may choose not to identify themselves as such, potentially fearing certain types of discrimination or oversight. Some providers may simply overlook these fields when submitting their information. Further, access to this type of data varies from state to state. Not all states offer a "faith-based" or religious affiliation whereby providers can volunteer their faith identity.

Religious keywords in child care providers' business name or license also served as indicators in this study's methodology. The accuracy of this method depends upon the existence of faith-related keywords in providers' names and the keywords known to the data analysis team. The method likely undercounts the number of faith-based providers using family and group home models. Many of whom are licensed or doing business under the personal name of the principal child care provider rather than a separate business name. Finally, a key word indicator may inaccurately label as faith-based certain providers who are not: those whose name conveys a historic but currently inactive faith affiliation or geographic names that are also religious indicators.

Better tools for identifying and quantifying faith-based child care are needed. A more accurate count of faith-based child care providers or an estimate of the percentage of child care slots that are faith-based would help policy makers weigh the role of faith-based child care within the nation's child care ecosystem. Further, systems for identifying and tracking faith-based child care should anticipate faith-based family and group-based providers. Faith-based child care is often associated with care provided in church buildings, religious schools, and other institutional faith settings. But our findings suggest that it is important to pay attention to faith-based child care as it occurs throughout America's mixed delivery child care system.

### **Interventions that improve compensation and job quality for child care providers would address key challenges identified by faith-based child care providers.**

Staffing and job quality concerns appeared throughout this study's qualitative interviews. Low wages and inadequate benefits for front-line child care workers were raised by multiple respondents across different care settings (center, family, group). Interviewees who served in management and administrative roles relative to child care – such as child care center directors and denominational officials overseeing multiple congregations' early education programs – worried about losing front-line caregiving workers to other, better-paying sectors of the economy. Many wanted to raise pay for staff but also hesitated to implement the kind of tuition hikes needed to finance more staffing pay. Providers were acutely aware of the cost burden of out-of-home childcare on households with young children and felt they were caught in a bind between the financial well-being of their staff (or their own finances) and the needs of the families they served.

Staff retention and pay are critical concerns for the entire child care sector. Child care is a human-focused activity. Quality care depends on the relationships between providers and children and providers' capacity to offer individualized attention to the children in their care. Writing for the Federal Reserve Bank of Minneapolis, Rob Grunewald and Lisa Stepick observed that personnel is the largest expense for child care providers - 60% at center-based programs even though wages for staff are low. The median child care worker earns \$12.24 per hour, less than what's considered a living wage in 40 states. Faith-based and non-faith-based providers alike would benefit from policies that boost wages and benefits in the sector while also managing costs for families. In the wake of the COVID-19 pandemic and passage of the American Rescue Plan (ARP), approximately half of all states have utilized COVID-related federal funds to improve child care workforce compensation.<sup>14</sup>

Sustained workforce investments, and attention to the applicability of these investments in faith-based settings, are crucial to stabilizing the child care sector: faith-based and non-faith-based providers alike.

Alongside compensation, there is another component to job quality in child care settings: recognition and respect. Our interviews suggest that both matter a great deal to faith-based child care providers; providers mark the absence of respect with disappointment. One way to convey respect is to acknowledge work on terms that providers, themselves, assign to it. Many of the faith-based providers we interviewed understood their work as a calling or “vocation.” A calling, in many traditions, is understood to emanate from outside oneself, infusing one’s daily work with meaning and helping orient work toward others as well as one’s own flourishing. Other interviewees highlighted the unique worth of caregivers who offer culturally sensitive child care to ethnically and religiously marginalized families.

Public policies and administrative measures that explicitly or implicitly communicate that faith is peripheral to quality care conflict with many caregivers’ own understanding of their faith as a source of care quality, whereas policies that acknowledge the presence and value of faith-based child care could communicate respect for providers’ vocations. Conveying recognition and respect for faith-based child care could take a variety of forms – from the design of public funding opportunities to the structure of professional development and training activities. Professional development and training programs might incorporate, for example, certain options for childcare providers that are hospitable to discussions of personal faith in relation to child care care. Finally, state administrators and quality rating systems might incorporate mechanisms whereby faith-based providers can demonstrate the quality of care they provide.

### **The link between faith practice and care quality should be more closely examined.**

Monitoring and holding providers accountable for providing high quality child care is a crucial issue in the child care sector. A commonly-used approach to assessing child care quality, the Quality Rating and Improvement Systems (QRIS), focuses on a variety of objective measurements: child care worker training, child to staff ratios, cleanliness as well as observations about child-teacher interaction in the classroom.<sup>15</sup> These systems are not necessarily structured with faith-based child care in mind. In Michigan, for example, the quality rating system awards the highest ratings to providers (serving preschool age children) who use pre-approved curricula.

Faith-based providers expressed concern that no faith-based curricula warranted the highest rating. But beyond remedying this type of oversight, a faith-inclusive approach to quality might consider the perspective that many faith-based providers hold: that faith is not incidental to child care quality but rather a vital component of and enhancement to quality care.

Specific channels of connection between faith and child care quality deserve further examination and, potentially, inclusion in quality assessment systems. Future research should explore the impact of the features of faith-based child care named by us: attention to the whole child, mission-motivated staff, and connections to religious institutions and communities. The latter of these features can entail exposure to religious teaching, connections to material resources, and a less tangible but still important sense of community belonging that faith-based care may provide.

Future research should also examine the potential connection between faith practices and child developmental goals. For example, one provider deployed their faith identity to help students understand historical events: “We connect what’s going on in the world around us to our history and values. ... Most of our activities have a connection to a Jewish holiday. We use our faith as a way to bring greater meaning to the things we do.” Several other interviewees described faith practices that were connected to time: daily prayer, weekly chapel days, or seasonal religious observance. It is worth considering the function of these varied time-attentive practices in promoting child development – from helping children ground themselves in history to fostering a sense of security and predictability that aids learning.

# Conclusion

American families who need care for a child by someone other than a parent or guardian must navigate a mixed-delivery child care system that includes a variety of faith-based child care options. Policy makers and child care sector organizations should take seriously the role of faith-based child care within the nation's diverse child care ecosystem. This study suggests some starting points and areas of further study. First, better tools for identifying and accounting for faith-based child care are needed. Second, the pressing concerns of faith-based child care providers should factor into policy designs. One of the most pressing challenges for faith-based providers is the lack of fit between what families can pay in tuition and what providers need to cover costs, particularly staff costs. Interventions that boost compensation for child care work would help faith-based child care providers as it would the entire sector. At the same time, the less tangible but deeply important ingredient of recognition and respect should attend child care work. For many faith-based child care providers, respect may entail acknowledging the faith motivations and practices that show up in their work. Finally, a more careful examination of whether and how faith-based child care practices contribute to quality child care is needed. Families and faith-based providers' own accounts of quality care can inform this examination.

# Acknowledgments

The detailed findings summarized in this brief appear in the following research report, on file and available upon request from the Center for Public Justice.

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## About the Center for Public Justice

The Center for Public Justice is an independent, nonpartisan organization devoted to policy research and civic education. Working outside the familiar categories of right and left, conservative and liberal, we seek to help citizens and public officeholders respond to God's call to do justice. Our mission is to equip citizens, develop leaders, and shape policy in pursuit of our purpose to serve God, advance justice, and transform public life. Families Valued is a program of the Center for Public Justice that advances workplace and public policies honoring God's call to both work and family life.

## DataWise Consulting

DataWise is a social-science data collection, management, and analysis firm based in Grand Rapids, Michigan. DataWise previously operated as the Center for Social Research (CSR) at Calvin University. Laura Luchies, Ph.D. and Rachel Venema, Ph.D., MSW served as principal researchers on this project through CSR. Dr. Luchies, formerly the Associate Director of CSR is the Founder and Principal Consultant for DataWise. Dr. Venema is currently the Director of Surveys and Research for the Frost Center for Data and Research at Hope College.

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# Endnotes

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8. The American Rescue Plan Act (ARP) (2021) (Public Law 117-2) designated \$24 billion for childcare stabilization grants to providers and \$15 billion in additional Child Care and Development Fund Discretionary Funds (CCDF). The Coronavirus Aid, Relief, and Economic Security Act (CARES) (2020) (Public Law 116-136) designated \$3.5 billion in aid to states for child care. The Coronavirus Response and Supplemental Appropriations Act (CRRSA)(2020)(Public Law 116-260) provided \$10 billion in relief for child care.
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