

BABY BLUE

Parents and their families in the Yale Graduate School

Written by the Accessibility and Diversity Committee
of GESO (the Graduate Employees and Students Organization)-
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Summary

A recent survey of Yale's programs in the arts and sciences indicates that at least 5% of its 2,400 graduate students are parents. Given their relatively small numbers and the prevailing stereotypes of graduate life—especially the ideal of the solitary scholar, entirely absorbed in academic study—graduate parents rarely figure prominently in the general life of the graduate school.

The first aim of this report is to document some of the unique challenges facing graduate students with children. Considering the primary age range of this population (roughly 22 to 35), the circumstances faced by Yale's graduate parents may go far toward explaining why more graduate students do not elect to have children while pursuing their Ph.D.s. This is an increasingly important question, because if graduate school is inhospitable to parents, the years immediately following graduate school are often more so. Many commentators, especially from the ranks of the faculty, are suggesting that graduate school may be the best time for academics with a parental intention to act upon it.¹

Without meaningful reforms, universities like Yale run the risk of forcing scholars to choose between parenthood and a life of teaching and research. This is an urgent and real threat, not just to Yale's current population of graduate parents, but to everyone who values an open and accessible university. The second aim of this report is to offer some potential solutions to the dilemmas facing graduate parents.

Interviews with a cross-section of Yale's graduate parents point to several conclusions:

- Every year, some portion of the dependents of Yale graduate students goes uninsured for health care.
- Every year, another portion of Yale graduate parents turn to Connecticut's HUSKY program, a state-funded safety net for parents too poor to purchase their children's health care.
- For those graduate students who insure their children through the Yale Health Plan, the cost of this insurance, as a percentage of their income, is often crippling.
- Graduate parents routinely struggle to secure affordable day care for their children and often fail to find any solution. Stay-at-home childcare duties often take a direct toll their on teaching, research, and productivity.
- The absence of a standard or sufficient parental leave policy often pits the demands of having a child against the possibility of completing a Ph.D. program within formal or informal time requirements.
- Considering the relative gender parity of Yale's overall graduate population, women make up a disproportionately small share of the graduate parents.

The Challenges

Graduate teachers and researchers tell their stories.

“I simply can't afford health insurance for my family...”

When graduate students enroll at Yale, they don't expect that they will find themselves depending on a state-funded program intended for Connecticut's poorest children. Most assume that they will take care of their health insurance through the university-run healthcare system, the Yale Health Plan. For all or part of their graduate careers, Yale graduate parents often find that they cannot afford to pay the fees charged by the health plan for their dependents.

Instead, some parents in this situation have turned to the HUSKY program (see inset).

This is especially true for graduate parents on single incomes. International teachers and researchers—whose spouses often carry visas that prohibit them from working—frequently find themselves in this category. Osvaldo Driollet, who came to Yale’s Computer Science program in 1997, supports his family of four on \$20,000 a year, as his wife does not have a work visa. For that money, he works 50-60 hours a week in his advisor’s lab and teaches when he can.

I was nervous about coming to graduate school as a parent since not many of us are here. If you’re married to an American person, then things are easier. If you are a foreigner, you can only work within the university, and you have to have your advisor’s approval to work for him, but the situation sometimes doesn’t work out. Second of all, your wife, or spouse, can’t work as a foreign person. And if you have family, you’re faced with many issues like, when I first came here, there wasn’t even health insurance provided for me, so I didn’t have any.

In some years, I couldn’t afford to pay the half of the insurance that Yale doesn’t subsidize for my family. Even with the university’s help, I have to pay almost \$3,000 a year for health insurance. Obviously I’m below the poverty line. Sometimes I can get a teaching job, get my advisor’s approval to teach, and I have to use that money to pay for the health insurance. Sometimes, though, the course is cancelled or my advisor is not going to teach that course, or I don’t have a job, and then I simply can’t afford health insurance for my family. I enrolled my son in the insurance plan for two and a half years, but we had to take the risk of not having my wife have full health insurance.

There was one semester when I couldn’t get coverage for any of them, my son or my wife. I went to the Health Plan once to ask whether I could transfer my coverage to my wife because I’d feel much more comfortable knowing she had coverage. But they said no. I had the feeling that I work all the time, but that if something happens to my child, I cannot afford the medical treatment for him. Finally, I applied for HUSKY. The first year I was rejected. Last semester, I finally got it just for my children. During the last year of my Ph.D., my wife got pregnant. That year, I had to pay the health insurance because, obviously, she had to see the doctor here. Right now the situation is, I finished the program, she’s not covered, my two children are covered by the HUSKY plan for the first time.

“I don’t know how we’d do it...”

Qilong Shen is a second-year graduate student at Yale who is also on Husky. He and his wife have a young daughter who was born here in New Haven. Though they are currently insured by the state, they live with the fear that they may be dropped from the state’s coverage in the current financial crisis that Connecticut is facing.

What is HUSKY?

Husky—Healthcare for Uninsured Kids and Youth, is Connecticut’s public insurance program for citizen children or teenagers under 19 (non-citizen children may be eligible depending upon their visa and immigration status). Administered by the CT Department of Social Services, the program provides free or low cost health care through either HUSKY A, the traditional full Medicaid program with no co-payments or premiums, or HUSKY B, which provides health insurance to families with incomes above the federal poverty level as part of the national SCHIP, State Children’s Health Insurance Program, passed by Congress in 1997.

Because of the current state budget crisis, the HUSKY program is facing reduction in services. The Governor’s budget originally proposed over \$14 million in cuts to HUSKY. The CT General Assembly recently passed an outline for a 2004/2005 budget. Discussions concerning changes to HUSKY have focused on creating and increasing premiums and co-payments; eliminating presumptive eligibility (which expedites the application process for children with medical needs); eliminating funding to the Children’s Health Council, the watchdog of HUSKY HMO’s; and reducing coverage of caretaker parents from incomes at 150% of poverty level to 100%.

I decided to get a Ph.D. in the United States, in the chemistry department. So I applied to a lot of schools and was accepted by Yale. Actually, I was accepted by other schools, but I liked the professors in the Chemistry department, so I joined the department here.

Not too many graduate students are married. And graduate students work so hard, especially in the chemistry dept. We work for more than ten hours a day—for me, more than 12 hours a day. And graduate students contribute to research.

My daughter Lucia was born at Yale New Haven Hospital just before Christmas. She was accepted into the HUSKY program. But I was worried that the HUSKY insurance would stop after a period of time, and so I wanted to ask about insurance from Yale. Soon after she was born, I went to the Yale Health Plan and asked how much I would have to pay if

I wanted to buy insurance for my family. It was roughly \$1,600 for the year for my wife. But for the full family, it's like \$3,000. We've been on HUSKY for nine months now. I asked the HUSKY program how long her coverage would continue, and they don't know.

If we lost insurance I'd have to pay by myself. That's expensive. I hope I don't have to pay, because we don't have a lot of money. My wife cannot earn any money, because she has an F-2 visa. Right now I only have a fellowship from the department. It's like \$21,000. And housing is so expensive. If I had to pay a lot of money for health insurance at Yale, I don't know how we'd do it.

“The action of applying has a meaning...”

Some graduate parents have found difficulty in securing even those resources set out by the state for the uninsured. Though technically available to all children in Connecticut, HUSKY gives preference to children who are U.S. citizens. As a result, some international graduate parents have had their non-citizen children rejected by HUSKY.

Jaechon Cho left Korea for the Yale Divinity School in 1999. He earns \$22,000 per year between his salary for teaching Korean and his fellowship. His wife's F-2 visa prevents her from working, so she stays home with their two children, with a third on the way. Yale would charge \$6000 a year for health insurance for him and his family, if they could afford it. They cannot. Neither Jaechon's wife nor children have any health insurance they can rely on.



One night I was playing with my nine-month-old baby. She dislocated her shoulder. It was an emergency situation, and we had to go to the emergency room and we had no insurance at all. When the doctor came, he put the shoulder back in the right place. We had no medicine, we had no x-rays at all, just the doctor's treatment. Then we got the bill. It was more than \$300.

We applied for a federal program and the Medicaid program, called HUSKY in Connecticut. Our first child was naturally rejected because she is not a U.S. citizen. My second child, born in the U.S., was accepted. Still, the HUSKY program is for people who are poor. The action of applying has a meaning. You cannot support your family—that's the meaning. For me as head of a family, that does not feel very good. I am worried about my children's health. Even when you have proper health insurance you're not happy to bring your children to the hospital.

When you have no health coverage it's a very unhappy feeling. If your kid has a slight cold, then you put up with it. Sometimes it feels tragic. Kids are sick very often, at least more often than adults, so I feel unsafe, insecure.

“The ones who have families are men...”

Many women in graduate school are at the age when they would choose to start a family. Some feel it isn't a good option to wait until they achieve junior faculty positions, where they will encounter a new host of time pressures. Women who continue with their studies while raising children often face tough choices between spending time with their families and making scholarly progress to remain in good academic standing.

Helena Hansen is entering her seventh year in the doctoral program in Anthropology. She is also pursuing a medical degree simultaneously, which means that she treats patients every Wednesday evening in a New Haven clinic. Because her husband is self-employed, she and her family bought their health insurance through Yale University. She pays over \$2400 per year to insure them. She also pays for fulltime daycare for her two children, at a price of close to \$1,900 per month.

I didn't officially take time off from school to have my children. My daughter was born during a semester that I dedicated to writing grants. In the next semester I taught. That was a really tough semester-going to classes, dealing with the students, grading papers. I got really physically run down from trying to do it all.

Shortly thereafter, I took my daughter and my husband to Puerto Rico to do my fieldwork. My grant for fieldwork did not cover any family-related expenses. Research fellowships are for single people. Chances for getting money for my family weren't very high, so I didn't even apply for it. We went into a lot of debt.

Three years after my daughter was born I had my son. I didn't have any formal obligations then, but I wrote my dissertation that year.

I decided to have my children now because I learned that I had a medical condition that I thought might leave me infertile later in life. Since I'm going to be almost 40 when I'm done with my training, it might have been impossible to have a child had I waited.

There is a lot of pressure on us as graduate students to finish in six years or less at Yale. Now that I'm going into my seventh year, I'm getting letters from the graduate school administration implying that I am making slower progress than expected, even though I will finish in the average time for my department: 7 years.

In our department, the faculty who have families are men. Since the primary responsibility for children still falls on women, those who are really serious about their work, sacrifice that. For the men, I don't think that's at all the expectation—they are not going to be primary caretakers. There are no female faculty members that I know of in our department who have children.

Graduate students in their twenties and thirties are in the prime of their adult reproductive lives, yet are in some ways infantilized. It's expected that we will not do things like have families, but devote ourselves to an apprenticeship with our advisors. Male grad students aren't as affected by that because usually their wives are hiding at home with the children. Families don't get in the way of that image as much, whereas female graduate students have to sometimes call up and say, I can't make it because of the children.

The university should recognize parenting as legitimate by having a more official flexibility for graduate parents in the timeline they're given—for example, how long they're eligible for grants, for stipends, for teaching jobs, for healthcare. Subsidized daycare would be a big help; I understand even faculty do not get that. These things would make Yale substantially more supportive of women and their families.

“It was like hell without her..”

International students, who can often ill-afford to pay for daycare in addition to healthcare, may end up relying on their extended families to help when all else fails them. The following testimonial is from one such student-whose inability to find care for her child led them to be separated for an extended period.

MoonHee Lee came to Yale in the fall of 2001. She is entering her third year in Anthropology. She arrived alone because her husband had had a terrible car accident back in Korea and was unable to walk for six months. Because there is no affordable daycare on campus, MoonHee had to leave her eighteen-month-old daughter behind in Korea until her husband was well enough to travel. MoonHee's family lives on her \$18,000 stipend from the Graduate School.

The university provides only me with healthcare. I have to pay almost \$3000 per year for my husband and my daughter if I buy Yale's health care. That's a lot of money, so I bought insurance back in Korea. It doesn't include regular check-ups, though, and the deductible is \$200, which we can't afford either. I pray that my daughter and husband don't get sick.

When my family first arrived, it was too late to get my daughter into childcare. I finally had to break down and ask my mother to come from Korea and help me. She lived with us for four months. I knew that Yale didn't have free childcare but I thought that there would be some place that I could let her go with cheaper prices for students. At the places I found, there was a waiting list and usually they are all competitive so you can't easily get in them. I finally found a place where I paid only \$278 a month. But we each had to work 5 hours a week and we performed other duties for the daycare. It was a great place for my daughter, but it was too much work for a fulltime graduate student. That's one of the reasons why I quit the program.

If there had been affordable daycare here at Yale back in 2001, I could have brought my daughter here my first semester. It was like hell without her. I heard things like Berkeley gives free childcare to the children of graduate students. Yale could do it too.



“I don't see how women will make it through...”

At times, the absence of adequate resources proves too burdensome for parents to continue in graduate school. Maureen Ibanez came from San Diego to Yale's School of Public Health in the fall of 2001. She came to start her doctoral program with her six-month old son, Timmy. She was joined a year later by her husband Ian after he finished his schooling in California. Maureen had asked if she could defer her entrance into her program by two years so that her husband would be done with school and able to join her. The University said no.

Before my arrival, I began to look into finding affordable health care for my son. Yale pays hospitalization for me, but I was going to have to pay \$1770 to insure my son. I couldn't afford that, given that I made less than \$15,000 a year. I applied for the HUSKY program and was lucky enough to be accepted. I don't know what we would have done otherwise.

Originally, I was going to get help with childcare from a Filipino woman, but after 9/11 she couldn't get a visa to come into the country. The places that I found at Yale had waiting lists of two years, and to even sign onto a list cost \$50. I was also told that even though I work down at the Medical School, I wasn't eligible to take a slot in a daycare center at the Hospital. I finally found a neighbor who was willing to take care of my son for close to \$1000 a month.

Oftentimes I had to bring my son into lab with me in the evenings because I still had my schoolwork to complete. Some advisors were more understanding than others, but I never felt that I was giving my all to either my work or raising my son.

My son got an ear infection around the time Ian came out East. Timmy was between insurance plans, and we had no money to see a doctor. All we knew is that he had a fever and he couldn't sleep. Eventually, we broke down and took Timmy to the doctor. The bill came to almost \$400. Luckily, our doctor helped us with the bill.

Now I am taking a leave from school. I don't see how women will make it through to becoming tenured faculty with all the obstacles I've had to contend with. Yale could do a lot better by its grad families. There should be daycare where graduate students have priority since we can't sign up for wait-lists years in advance. Mentors should also ask parents, not just about their academic progress, but also about the difficulties that parents may face while juggling budding academic careers with the pressures of family life.

The solutions

What can be done? The union difference...

Graduate teachers and researchers have been talking and organizing about these issues for years. Thus far, Yale graduate students have seen piecemeal responses from the university administration, but options for parents remain far from adequate. For example, graduate students at Yale won 50% coverage of dependent healthcare in 1998, but costs have also risen over time, cutting nearly in half the original dollar value of this benefit.

The average graduate teacher earns about \$16,000 a year. Professional degree candidates (e.g., Forestry, Divinity) frequently scramble for teaching from semester to semester, with little guarantee of a secure job. Those with good teaching jobs earn approximately \$10,000 a year. These salaries do not leave enough over for families to be able to afford these costs.

What's needed is a comprehensive response to the challenges facing parents. One means to this end would be collective bargaining with the University. Other graduate unions have been highly successful in winning concessions from their respective administrations, particularly in forging a graduate parent "safety net."

UMASS-AMHERST

Health Care: Health coverage for students free during academic semesters with a fee for summer coverage. GEO's contract with the University currently waives 85% of health fees for the family members of graduate employees. That means that although the university charges \$2,831.00, graduate families pay only \$425.50. GEO recently won subsidized dental coverage. Family dental insurance is available at \$180 per year. Anyone who teaches 10 hours a week or more on average is eligible for these benefits. Spouse or same-sex domestic partner and up to 6 dependents can be enrolled in the family plan at the rates listed above.

Daycare: Childcare vouchers that total \$30,000 per year. ²

UNIVERSITY OF MICHIGAN

Health Care: Graduate instructors and staff assistants teaching at ten hours per week enjoy the option of several health insurance plans. Coverage is free for the student, and free or affordable for the student's spouse, domestic partner, and/or children. (Costs for dependents vary with each plan.)

Daycare: Amount of Childcare Subsidy awarded is based on financial need, the number of children they have enrolled in licensed care facilities; their childcare expenses, and available funding: one child, the award maximum is \$1,700 per term; for two children, the award maximum is \$2,550 per term; for three or more children, the award maximum is \$3,400 per term.³

UNIVERSITY OF WISCONSIN-MADISON

Health Care: Graduate employees and project assistants (those who are employed 13.3 hours per week) have the option of a variety of plans. There has always existed at least one plan at no cost, even for families. Dental insurance has also been included.

Daycare: The University contributes \$135,000 over two years, to a need-based childcare tuition assistance program available to all affiliated with the university, not just to graduate students.⁴

HERE AT YALE...

Another point of comparison is the Yale community itself. Measured against two other constituencies at the University, the graduate community enjoys starkly fewer benefits:

Faculty Healthcare: Faculty with appointments at half time or more can choose a plan to buy into. If the faculty member earns less than \$65,700 a year, he and his dependents are eligible for full coverage for free at the Yale Health Plan. Same-sex domestic partners are also included. Dental plans are covered for families at monthly premiums of \$125 per month.

Faculty Daycare: There are no fellowships available through Yale for daycare for the faculty. ⁵

Locals 34 and 35 Healthcare: Members of Locals 34 and 35 who work at least 20 hours a week enjoy the same medical benefits as the faculty. After 18 months of service, dental coverage is available to families for as little as \$16.31 a month.

Locals 34 and 35 Daycare: They also do not get subsidies to offset the cost of childcare.

Graduate teachers and researchers Healthcare: Doctoral students have their basic coverage and hospitalization covered. Families are subsidized 50%, which means to insure an entire family costs \$2796 per year. Professional students pay up to \$5592 per year for an entire family.

Graduate teachers and researchers Daycare: No subsidies exist for graduate families.

Proposed solutions

It is well within Yale's capacity to further help graduate parents succeed while they fulfill their degrees and perform essential service to the university. Yale's administration can extend the same benefits enjoyed by other workers on this campus to the relatively small number of graduate families here. This contribution would also lift the burden on the state of insuring those families who can't afford to insure themselves. Yale is in a position to pay its fair share rather than passing those costs onto Connecticut taxpayers.

Moreover, a family-friendly environment is essential to retaining the best and brightest academics. Women especially confront excruciating choices between raising a family and becoming competitive academics. By taking an active role in providing healthcare and daycare, university administrations would make the academic life a more realistic option for every talented, motivated scholar.

Here are some concrete suggestions for change:

- The University should further subsidize the cost of healthcare. Students attending a university with an \$11 billion endowment should not have their families go uninsured or become dependent on a cash-strapped state government.
- International families should have access to housing subsidies as a way of offsetting some of the financial burden that is incurred by living on one income.⁶
- Daycare is one of the most nagging issues that graduate parents have to resolve. Availability is currently limited and the expenses are prohibitively high. In GESO's survey of graduate parents, many noted that drop-in daycare on campus would make a significant difference towards parents' abilities to participate in campus events.
- The Graduate School has announced, after years of graduate organizing, that graduate teachers and researchers will now retain their health benefits for one semester while on a medical leave. This is only the beginning, though, to addressing the issue of parental leave. There should be funds available to families while the graduate parent is on leave. Otherwise, this leave is still an unrealistic option for parents to exercise.
- Such a leave should not count toward a parent's time-to-degree requirement. Parents past their seventh year should still be eligible for teaching jobs, library privileges, healthcare, eligibility for graduate housing, and all the other privileges associated with being a registered student, recognizing that parenting takes time.
- Departmental and university-wide administrators should be sensitive to the reality that their students are at the age and point of career development when child rearing may make the most sense. Parents should be made to feel welcome all over the university.

In its Statement of Principles on Family Responsibilities and Academic Work, the American Association of University Professors declares, "it is essential that the priorities, workloads, rewards structure, and values of the academy permit and support an integration of family and work."⁷ Yale has it in its power right now to enact these recommendations and improve the lives of scores of talented scholars on this campus. Until it does so, the University will continue to fall short in its mission as a leader in the academy and society alike.

Notes

1 See, for example, Kathryn Lynch, “An Immodest Proposal: Have Children in Graduate School.” *Chronicle of Higher Education* (7 June 2002), p. 5. On the difficulties of juggling family life with faculty responsibilities, see also Robin Wilson, “For Women With Tenure and Families, Moving Up the Ranks Is Challenging.” *Chronicle of Higher Education* (9 November 2001), p. 11.

2 Taken from the website of the union at University of Massachusetts, Amherst, known as GEO-UAW Local 2322. (www-unix.oit.umass.edu/~geo)

3 Taken from the website of the University of Michigan’s union, known as GEO-Local 3550 AFT. (www.umgeo.org)

4 Taken from the website of the TAA at the University of Wisconsin at Madison and from a conversation with representatives of the union. (www.taa-madison.org). This contract has been extended until November 1, 2003. Negotiations for a new contract are ongoing.

5 Information taken from <http://www.yale.edu/hronline/benefits>.

6 Currently, Yale maintains several graduate housing complexes, including The Esplanade, Whitehall Apartments, and Mansfield Apartments. Apartments in these complexes are available only to graduate students but carry rents that are pegged to market rates. Given that Yale pays no property taxes on these facilities, there seems to be no reason why significant housing discounts should not be available.

7 American Association of University Professors, Statement of Principles on Family Responsibilities and Academic Work (approved in May 2001 by the Association’s Committee on the Status of Women in the Academic Profession and its Subcommittee on Academic Work and Family).