

**2015 CCPRC Annual Meeting
Session Summary: Plenary 2**

Plenary 2– Understanding Access to High-Quality ECE 12.2.15

1. Descriptive Information

<p>Plenary 2 (Independence Ballroom A)</p> <p><i>Understanding Access to High-Quality ECE</i></p> <p>Description: What does “access to high-quality ECE” mean? This discussion will focus on current efforts to define and measure “access” and to identify data sources and analytic strategies for states attempting to assess and track access.</p>	<p>Facilitator</p> <ul style="list-style-type: none"> • Teresa Derrick-Mills, Urban Institute <p>Presenters</p> <ul style="list-style-type: none"> • Carlise King, Child Trends • Ira Goldstein, The Reinvestment Fund • Wladimir Zanoni, Chapin Hall at the University of Chicago <p>Discussant</p> <ul style="list-style-type: none"> • Rachel Schumacher, Director, OCC, ACF <p>Scribe</p> <ul style="list-style-type: none"> • Van-Kim Lin, Child Trends
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- **Documents in Session Folder** (Please list any electronic documents or web links used during the session.)
CCPRC- Access Plenary 2015_FINAL

- **Brief Summary of Presentations**

- **Summary of Presentation #1: Carlise King**

- ECE access is a multi-dimensional concept
 - The traditional way to measure access was to track one or two dimensions over a period of time (e.g., availability, affordability, accessibility) broken down by program type or age groups served
 - CCDBG Reauthorization emphasizes the measurement of access either by:
 - Conducting a market rate survey or an alternative method to provide high-quality ECE
 - Increasing the supply of high-quality programs serving special populations
 - Child Trends convened an expert panel to develop a definition of access, data sources, and technical approaches
 - **Definition:** Access to ECE means that parents, with **reasonable effort** and **affordability**, can enroll their child in an arrangement that **supports the child’s development** and **meets the parents’ needs**.
 - **Reasonable effort:** Involves both the availability of care and parents’ ability to search for care with minimal burden. This dimension puts the burden on states to make available as well as on parents to find care.
 - Indicators: estimation of vacancy, enrollment, capacity, geographic access, information about ECE is readily available to parents, and program supply
 - **Affordability:** Encompasses factors related to the cost of providing care and payment for full and true cost of high-quality care. Sometimes low-income parents don’t pay the full price, or the advertised price doesn’t reflect true cost of care.
 - Indicators: parent contribution, subsidized contribution, program revenue (e.g., donations and grants), advertised price
 - **Supports the child’s development:** Interactions between child and ECE provider are supportive of physical, emotional, and academic development
 - Indicators: coordinated with other services or programs, meet the unique needs of children served, stability of care, **designation of quality**
 - **Meets the parents’ needs:** Family priorities in selecting the care that best meets their needs involves making individual determinations on the varying importance of factors

like quality, cost, and convenience. Family characteristics make unique contributes to their decision-making when seeking care and education for their young children

- Indicators: scheduling options, program type, age group served, aligns with parent preferences, transportation, language/cultural needs
- Action steps that researchers or state policymakers can take
 - Assess which indicators of ECE access are most relevant to the state
 - Survey ECE access data sources to identify data elements to measure ECE access
 - Choose questions of interest and develop an analytic plan to measure ECE access
- **Summary of Presentation #2: Wladimir Zanoni**
 - Households' geographic access to center-based early care and education
 - The National Survey of Early Care and Education (NSECE) surveys a nationally representative sample to examine both household access and availability of ECE in a unique way
 - The design "anchors" the household as the primary unit of analysis and defines their ECE choice sets based on geography
 - The NSECE studies how households with specific attributes have geographic access to ECE with particular characteristics that are located in their choice sets
 - Quality indicators that exist in the data can be linked with households through geography
 - In addition, there are indicators to determine how they can make these choices, so researchers can study quality in light of household choices
 - All of this is done through the provider cluster
 - Provider cluster
 - There is a synthetic market that can be created by the provider cluster. A **provider cluster** is created by drawing a 2-mile radius around a household. Every census tract that touches that 2-mile radius is included into the provider cluster.
 - Sample
 - Examined households' geographic access to center-based care with specific attributes to offer a description of households' choice sets, in terms of geographical access, but does not examine exactly what the household chose as their provider. The provider cluster shows how the availability of center-based programs with at least one child funded with either child care subsidies, Head Start, or Pre-K dollars relates to household characteristics in their choice sets. In other words, the provider cluster allows researchers to see what care is available, and not what care the family ultimately chose.
 - He linked centers that are around a geographic area with households that are around a geographic area to determine what household attributes are in the same geographic area as what center-based attributes.
 - Methods
 - Created weights for both the household and the provider cluster of centers to determine their characteristics.
 - Conducted basic statistical tests for differences across categories (F-tests) and pairwise differences
 - Conducted statistical tests of global significance for associations (regressions)
 - Analysis
 - Examined various households' attributes (e.g., income levels, community poverty, race) by funding source (e.g., Head Start, subsidies, or Pre-K) and provided the percentage of nearby centers with at least one child with each funding source with the household characteristic.
 - Findings
 - Income level
 - Household's geographic access to CB programs in which at least one child is funded by HS is higher for low-income HHs and lower for higher-income HHs
 - Household's geographic access to CB programs with at least one child funded by pre-K or CCDF does not vary by HH income

- They are replicating in New Jersey (Newark and Patterson), and they decided that in the absence of QRIS, they would use NAEYC accreditation for this study
- No measure of **capacity**
 - Predicted capacity using information available and then applied it back to sites where there isn't overlap (regression-based estimates of capacity for those sites in both databases using NETS characteristic data as predictor)
- No direct measure of **demand**
 - Where people are coming and going places a new demand on the child care system. Families may want care near home or near work instead of their home.
 - Used methodology using the Longitudinal Employer Household Dynamics to show how people move around the city based on residence/work locations
- Findings
 - Demand: Commuter parents created a high demand in areas with low resident demand.
 - Supply: While the total supply of care is high, there is a deficit of high-quality care for the amount of demand
 - Gap between supply and demand: Utilized a relative measure of the gap between supply and demand because not all families may want care and showed that some areas had larger gaps than others, usually in areas with low-quality care.

- **Brief Summary of Discussion**

- Rachel Schumacher Comments

- This is a big puzzle that we need to fix. There is a big stake in the law and the reauthorization related to equal access. How do we start to help states with practical solutions and data? How can we help states target resources to build supply for infants/toddlers, non-traditional hours, special needs, and underserved areas?
 - Quality money has provisions that states need to report annually on their impact to improve quality (how states are using their money and building supply).
 - Reflections on Carlise's presentation
 - **Reasonable effort:** We also need to think about the timeliness of information to help parents exert only a reasonable effort. Sometimes people come into the system, and the intake person asks them about their child care and gives them a voucher. There's no discussion about what would be helpful or whether they are satisfied with their child care.
 - **Affordability:** Should we look at the way affordability and structures that are involved in helping parents afford care incentivize quality of care?
 - **Support the child's development:** Research already looks at this, and we are seeing great things coming out of QRIS states. But how do we help states who don't have QRIS or with only a few programs in QRIS? How do we help states to educate parents?
 - **Meets the parents' needs:** Linda's story that parents and child's needs intersect pertains to this. Think about the information parents have and choices they can get with affordability and the relationship between providers and parents to see if parents are getting ongoing information.
 - Reflections on Wladimir's presentations
 - States need to collect information about needs and think about supply issues. Some state advisory councils are looking at supply and demand.
 - Another issue is finding a partner in the state. Schools and communities may be interested because it can relate to their kindergarten entry assessments (KEAs) or their low-performing schools. Principals be able to work with a foundation to get money to explore these issues.
 - There may also be linkages to other early childhood systems, workforce development, or businesses, but they don't have our data sources. We have an opportunity to marry the two
 - Reflections on Ira's presentation
 - Why are we finding child care deserts? We have all the data, and some areas are higher than predicted, so let's unpack why that might be. What is keeping child care from coming to those areas? The data showed that wide reach for CCDGB, but child care is voucher-driven system. Child care is diffuse; We can create a higher payment rate for one child with one voucher, but

it's not going to change what the program is going to offer. We need to think about the levers available in the system and across opportunities in the law. What can we do to change the market? Let's talk about data we can find to target resources and help families we are trying to help access the quality that will make a difference.

- **Presenter responses**
 - Carlise: The one thing that stuck out to me from your comments is the word "intersection." These things are all connected, and we need to think about how everything fits together (e.g., costs, supply, geographic access, what parents really need, and what local communities look like). We can see how programs can provide stability.
 - Ira: Why do we have deserts? Markets aren't perfect. The business of providing child care is complicated and expensive. People tend to focus on children and not the business side. At The Reinvestment Fund, they are investors trying to take capital to bring business into these deserts. They help providers understand how to run a child care business: How do I get insurance? How do I keep financial records? How do I do code enforcement? When we look at the data by quarter, we see huge turnover, which shows that child care is a frail business.
 - Wladimir: There are challenges to the research. Understanding access requires getting a hold of preferences for parents when they are making choice care choices. It is a multi-dimensional problem.

- **Summary of Key issues raised** (facilitators are encouraged to spend the last 3-5 minutes of workshops summarizing the key issues raised during the session; bullets below are prompts for capturing the kinds of issues we're looking for)
 - *Emerging findings that may be of particular interest to policy-makers and ACF?*
 - There are child care deserts, especially in regards to high-quality child care.
 - There are differences in child care supply based on various household characteristics.
 - *Methodological issues including innovative methodologies that may help maximize resources available for research and evaluation?*
 - Using the NSECE to characterize the attributes of households and child care supply within a geographic area
 - Layering traditional and non-traditional sources to create a universe of child care supply
 - *Follow-up activities suggested to address questions and gaps (e.g., secondary analyses of data, consensus meetings of experts, research synthesis or brief, webinar, etc.)?*
 - Utilizing a multi-dimensional definition of access to measure access in future research
 - Using the NSECE to further examine the supply and demand of child care in innovative ways.
 - *Recommendations about future ACF child care research directions and priorities?*
 - Looking at how the cost to provide high-quality care affects payment rates.