

# **Child Care in the Lives of Low-Income Families: Findings from the Child Care Policy Research Partnership Grants**



## **KEY FINDINGS AND LESSONS LEARNED**

Funding for these studies was provided through a grant from the Office of Planning, Research and Evaluation in the Administration for Children and Families, U.S. Department of Health and Human Services. The contents of this presentation are solely the responsibility of the authors and do not necessarily represent the official views of the Office of Planning, Research and Evaluation, the Administration for Children and Families, or the U.S. Department of Health and Human Services.

# Structure of the Session



- **Project Overviews and Key Findings**
  - Determinants of Subsidy Stability and Continuity of Child Care in Illinois and New York
  - Early Care and Education Choices, Quality and Continuity, for Low-Income Families A Maryland-Minnesota Research Partnership
- **“Lessons Learned” Discussion**
  - Developing partnerships with state leaders
  - Obtaining permissions for studies
  - Recruiting low-income families
  - Developing survey and qualitative instruments
  - Collecting qualitative data
  - Linking administrative and survey data

# **Determinants of Subsidy Stability and Continuity of Child Care in Illinois and New York**



**Julia Henly, University of Chicago**  
**Amy Claessens, University of Chicago**  
**Heather Sandstrom, Urban Institute**  
**Alejandra Ros, University of Chicago**

## **State Partners:**

**Linda Saterfield, Illinois Department of Human Services**  
**Janice Molnar, New York State Office of Children and Family  
Services**

# Purpose and Background



The partnership aims to develop an empirically-informed and practically-relevant knowledgebase regarding the determinants of subsidy stability and child care continuity and the linkages between the two.

- Stability and continuity are critical components of high quality care for children and family economic self-sufficiency
- Low-income children move in and out of different child care arrangements, and participation in child care subsidy programs is often short-lived

# Research Questions



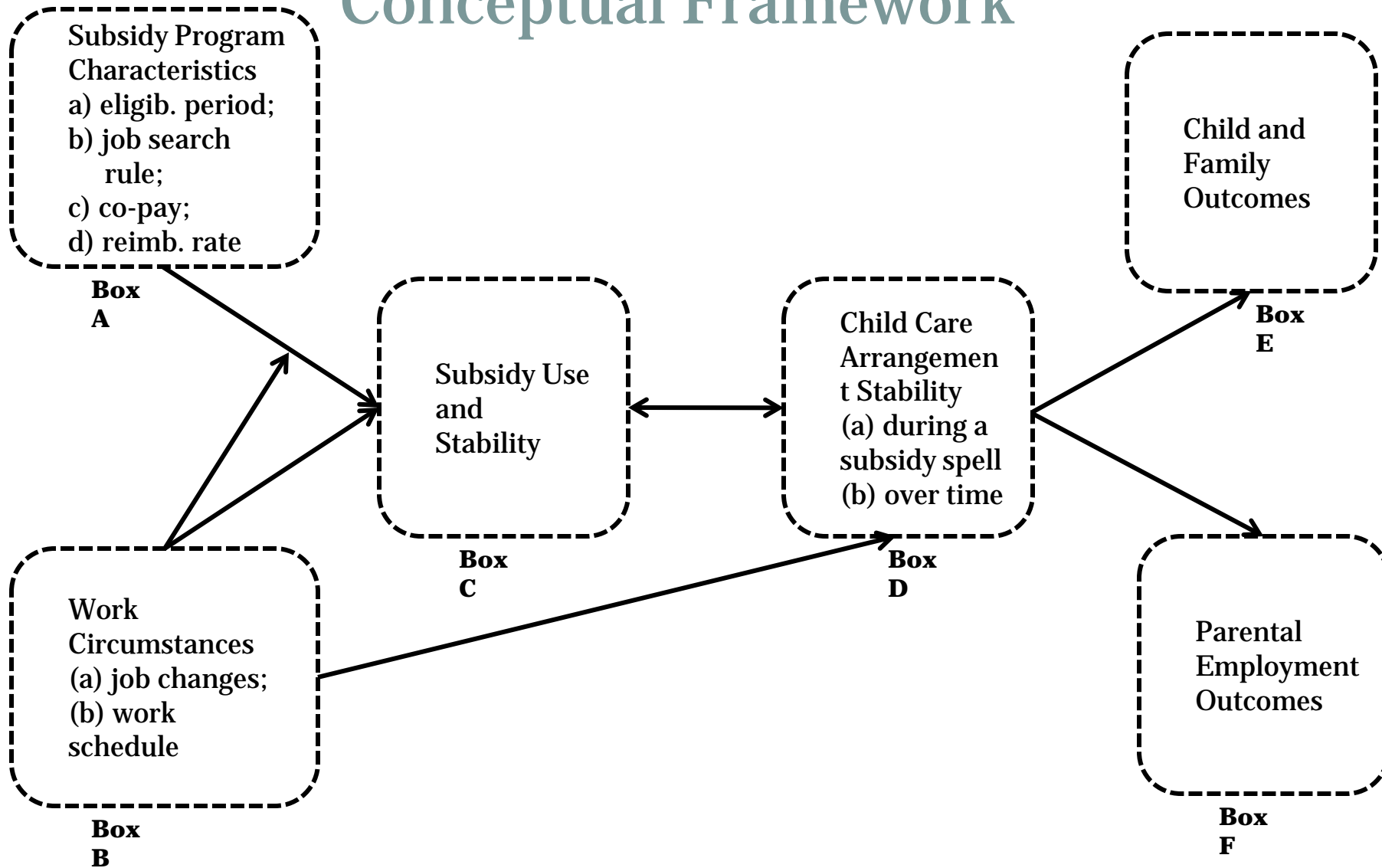
1. What are the patterns of subsidy use and stability over time?
2. To what extent do subsidy program characteristics and parental work circumstances influence subsidy use and stability?
3. To what extent do subsidy program characteristics and parental work circumstances directly influence the stability of child care arrangements?
4. How stable are child care arrangements for subsidy-receiving families both during a subsidy spell and over time?

# Research Questions (continued)



5. What challenges to subsidy stability and child care stability do parents perceive to be most difficult?
6. What challenges to subsidy stability and child care stability are particularly salient for:
  1. Parents with non-traditional jobs and/or nonstandard work schedules
  2. TANF families
  3. Immigrant and non-English speaking parents
  4. Families with multiple children and school aged children needing care

# Conceptual Framework



Note. Simple diagram explaining one possible set of pathways to child care arrangement stability that we hypothesize have implications for child outcomes and employment outcomes. The diagram does not attempt to explain all possible influences on any of the separate boxes in the model, nor does it imply that there are not additional relationships between the boxes.

# Study Design



- Survey of child care subsidy participants in four regions (2 in NY, 2 in IL, n=800)
- In-depth interviews with subset of survey respondents (n=72)
- Longitudinal linked public program records of survey respondents in both states



# (In)stability of Child Care Subsidies and Child Care Provider Use: A Preliminary Analysis of Illinois Administrative Records



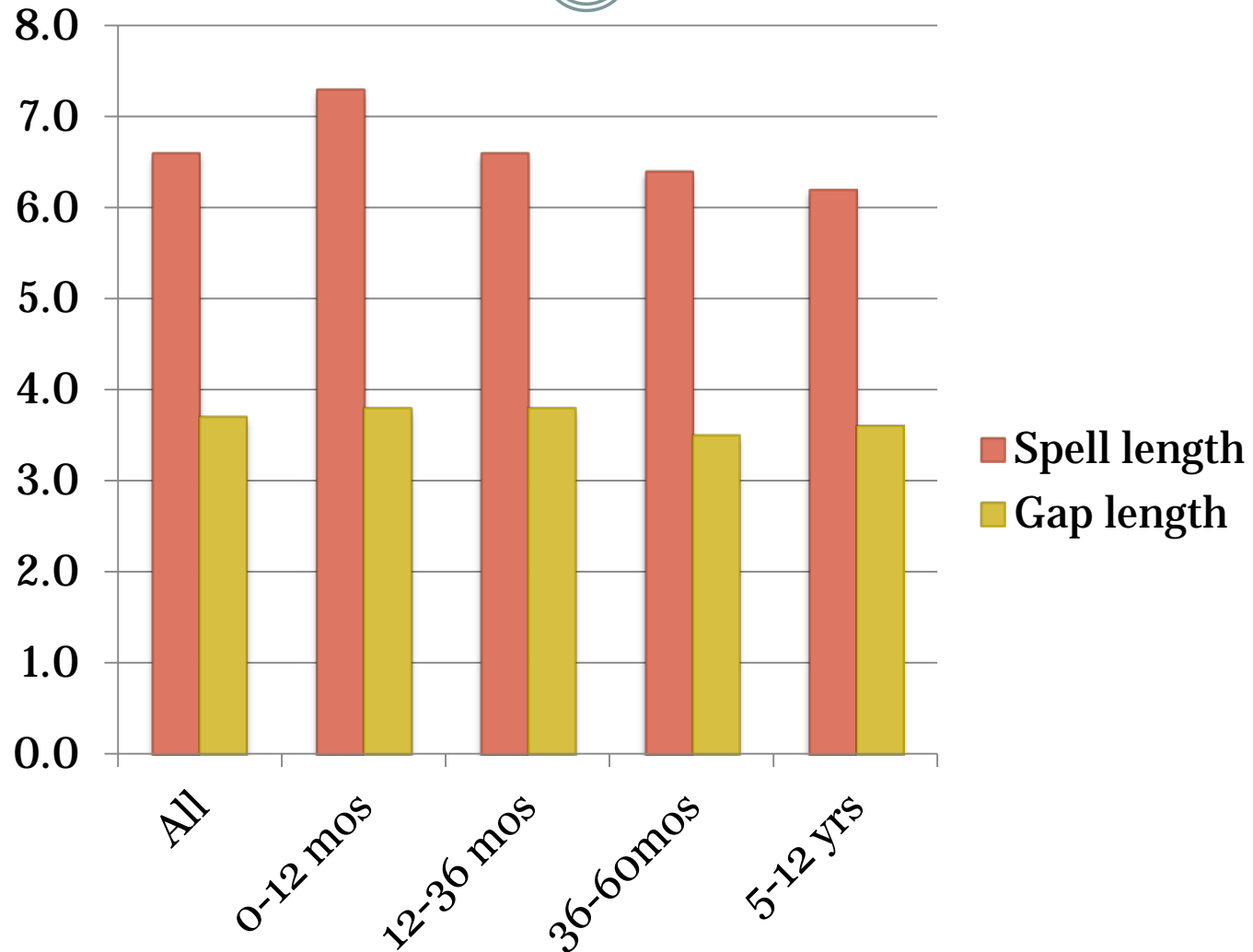
- **Sample of ~72,000 children, new entrants to the program in 2005**
- **Examined within and between spell changes in child care providers**

# Sample Characteristics (%)



<i>Race/Ethnicity</i>	
White	25.82
Black	53.52
Other	19.61
<i>Age at entry</i>	
Infants (0-11 mos.)	26.54
Toddlers (12-35 mos.)	22.85
Preschoolers (36-59 mos.)	16.86
School-age (5-12 yrs.)	32.57
<i>Type of provider</i>	
Center	30.96
FCC	20.33
Child's home	18.37
Relative's home	17.55

# Average length of first subsidy spell and gap by children's age (months)



# Within spell changes in provider



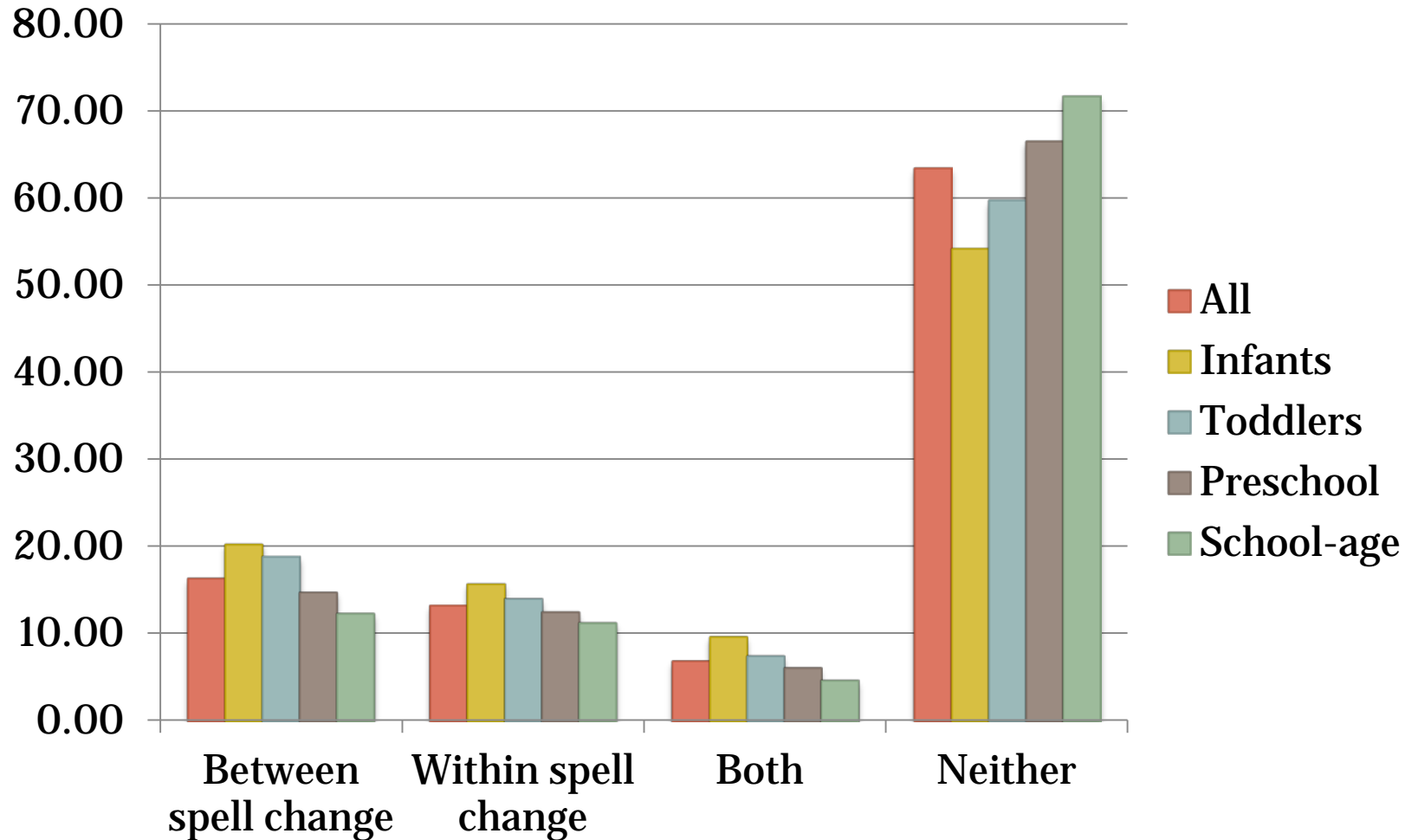
	<i>All (%)</i>	<i>Infants</i>	<i>Toddlers</i>	<i>Preschool</i>	<i>School-age</i>
Zero	79.81	74.53	78.55	81.32	84.03
One	15.27	18.24	16.55	14.57	12.50
Two	3.71	5.32	3.71	3.27	2.62
Three or more	1.21	1.9	1.2	0.85	0.85

# Between spell changes



	<i>%</i>	<i>Infants</i>	<i>Toddlers</i>	<i>Preschool</i>	<i>School-age</i>
Zero	61.68	56.19	59.11	64.85	67.93
One	32.49	36.12	34.63	30.20	28.15
Two or more	5.83	7.69	6.26	4.96	3.93

# Type of Change by Child's Age



# Summary



- **Most children do not experience changes within or between spells (64%)**
- **Among those who do change providers**
  - 16% experience only a between-spell provider change
  - 13% experience a within-spell provider change
  - 7% experience both types of changes

# Summary



- **Age appears to be most correlated with changes in provider**
  - Infants are most likely to experience a between-spell change or a within-spell change or both types of changes
  - Infants are most likely to change from informal care to a center or FCC provider, or from a FCC provider to a center
  - Toddlers are most likely to move from informal care or FCC to a center
  - School-age children are most likely to move between informal care and license-exempt care.



# Summary



- **Of the approximately 38% of cyclers with one or more between spell provider changes**
  - 46% experience a child care type transition during the first between-spell provider change
  - 59% change to a different type of child care during any between-spell provider change
  - By comparison, 51% of all children change to a different type of child care during their first within-spell provider change and 56% change to a different type of child care during any one of their within-spell provider changes

# **Early Care and Education Choices, Quality and Continuity, for Low- Income Families A Maryland- Minnesota Research Partnership**



**Kathryn Tout, Nicole Forry & Tamara Halle, Child Trends  
Caroline Carlin, Liz Davis & Amy Susman-Stillman,  
University of Minnesota  
RESI of Towson University  
Wilder Research**

## **State Partners:**

**Rolf Grafwallner and Liz Kelley, Department of Early  
Childhood Development, Maryland State Department of  
Education**

**Deb Swenson-Klatt and Elizabeth Roe, Minnesota  
Department of Human Services**

# Our Partnership



- **Interdisciplinary research team:**
  - Child Trends
  - University of Minnesota Department of Applied Economics and the Center for Early Education and Development
  - Wilder Research
  - RESI at Towson University
- **State partners**
  - Minnesota Department of Human Services and the Office of Early Learning
  - Maryland Department of Education
- **State and national expert consultants**

# Partnership Activities



- **Build on previous research studies in each state**
- **Conduct three sub-studies focusing on early care and education**
  1. Choices and decision-making
  2. Perspectives on quality
  3. Stability and continuity
- **Use multiple data sources and methods**
- **Collaborate with state partners on key questions and application of findings**

# Data Sources



- Longitudinal parent telephone surveys
- Provider telephone survey
- Qualitative and cognitive interviews
- Administrative data

# Overview of Recruiting and Fielding



- Target counties in each state were selected for participation
- Families are recruited at the time of application for Maryland Temporary Cash Assistance (TCA) or Minnesota Family Investment Program (MFIP)/Diversionary Work Program (DWP).
- Recruited over 400 families in each state.
- Tracking approximately 300 families in each state
  - Five waves of data collection completed in MN
  - Second wave of data collection in process in MD

# Parent Telephone Surveys - Topics



- Families' child care preferences and choices
- The factors that affect child care choices
- The process used to make child care decisions
- Awareness and use of Parent Aware in selecting child care arrangements (MN only)
- Families' perceptions of the quality of the child care they use
- Child care-related work disruptions
- Parents' employment
- Families' household structure
- Use of public assistance programs
- Parenting stress
- Parents' and children's health status
- Parents' emotional well-being

# Cognitive Interviews



- Concepts that we ask parents and providers about are complex (quality, types of care, perceptions of features of care)
- Cognitive interviews are a strategy used to gauge how well potential survey respondents understand what we are asking
- Small samples are used and interviewers ask respondents probes to ascertain how they interpret questions
- Answers can inform new survey item development and hypothesis generation



# In-depth Interviews



- In-depth interviews are used with small samples of parents to understand patterns that are seen in the survey data
- Parents can provide more details in open-ended questions that can help us understand the context and nuances of answers

# Administrative Data



Administrative data are used to supplement the longitudinal parent survey:

- Minnesota: Parent Aware data (QRIS participation and provider ratings) and Minnesota Electronic Child Care (MEC<sup>2</sup>)
- Maryland: School-readiness scores (MMSR) and Child Care Automated Tracking System (CCATS)

*Data from these sources are being linked with the parent survey data.*



# **Substudy 1: Child Care Choices and Decision-Making**

# Question # 1: Do distinct patterns exist in the child care decision-making processes of low-income parents?



Few child care options considered

Only one source of information consulted

Quick decision

Pattern # 1

Lots of child care options considered

Multiple sources of child care information consulted

Takes a long time to make a decision

Pattern # 2

## Question # 2: Are there differences in the demographic characteristics of families that use a different process when making child care decisions?

### **Characteristics of the Focal Child**

- Focal child age, gender, health

### **Characteristics of the Parents**

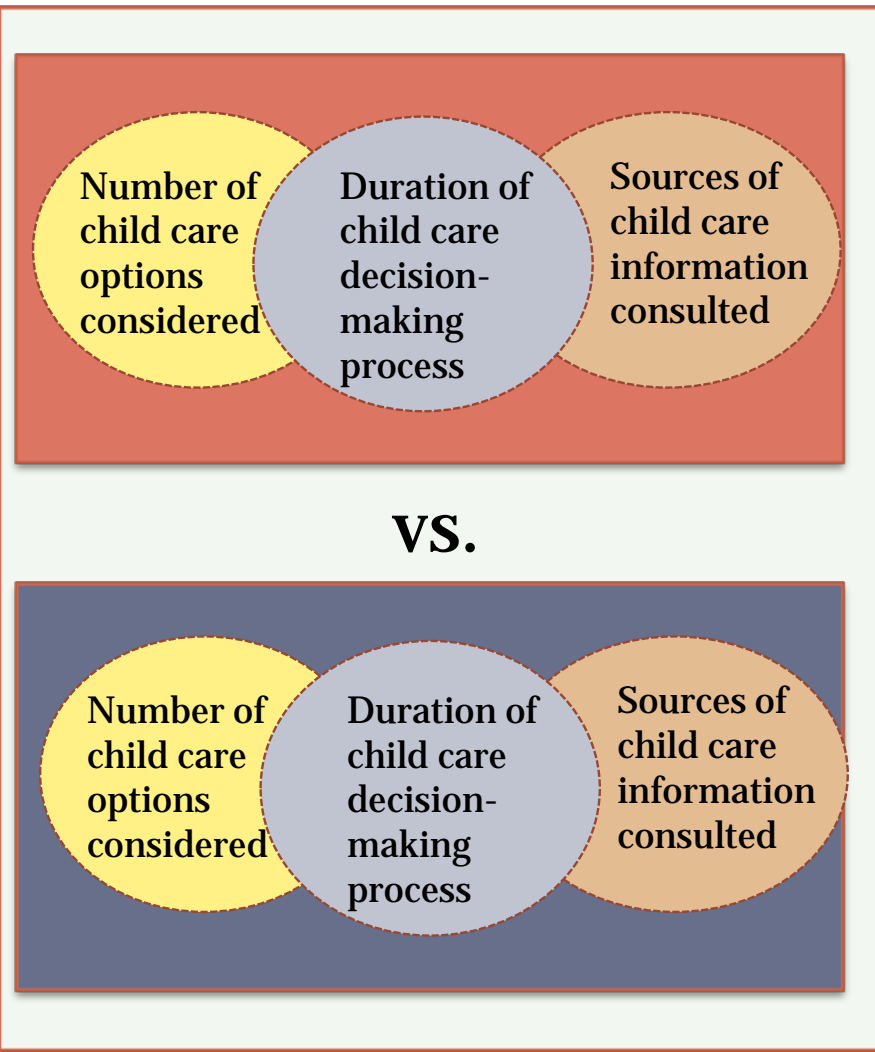
- Parent age, race, education, employment status, health/mental health

### **Characteristics of the Household**

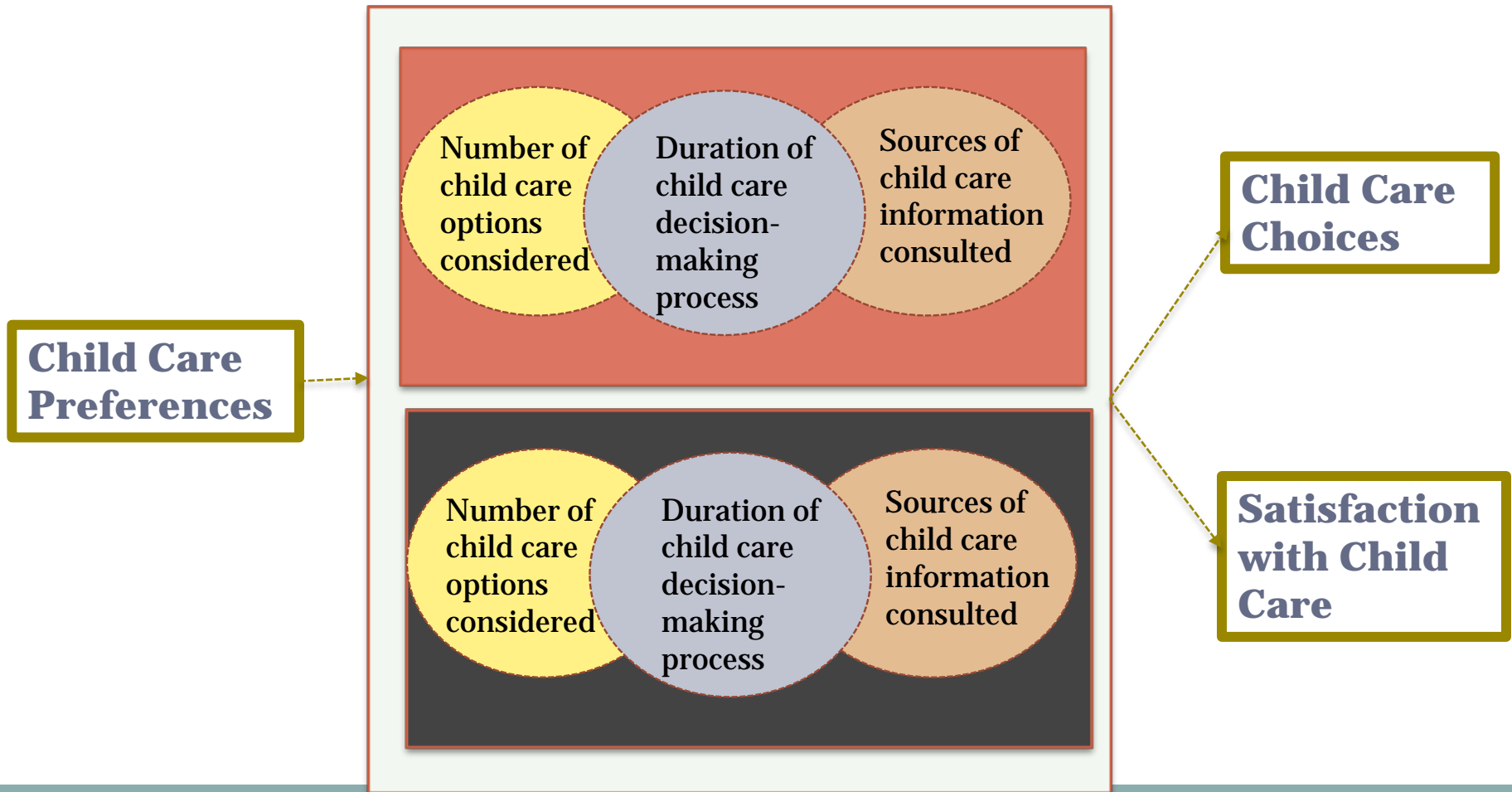
- Household income, family structure, immigration status, number of children in the household, welfare receipt

### **Characteristics of the Community**

- Urban vs. rural, availability of QRIS, zip-code level economic indicators (median rent, median household income)



Question # 3: Does the child care decision-making process also vary in child care preferences, the choices of care they choose, or their satisfaction with chosen arrangements?



# Identified Patterns of Child Care Decision-Making

	<b>Quick Deciders 82% of sample</b>	<b>Time Takers 18% of sample</b>
<b>Number of options considered</b>	1.3	1.8
<b>Duration of child care decision-making process</b>	1.7 weeks	10.7 weeks
<b>Sources of information considered</b>	48%- child care experts 46%- child care list 42%- friends and family	67%- child care experts 45%- child care list 55%- friends and family

# Differences in Select Demographic Characteristics by Child Care Decision-Making Process



- On average, ***quick deciders*** were less educated than ***time takers***
  - 30% of ***quick deciders*** had less than a high school diploma (compared to 17% of ***time takers***)
  - 53% of ***time takers*** had some college education (compared to 33% of ***quick deciders***)
- Additionally, some age differences were found across the groups, with ***quick deciders*** being younger than ***time takers***.





# Differences in the Priorities, Choices, and Satisfaction by Child Care Decision-Making Process



- ***Quick deciders*** were more likely than ***time takers*** to cite convenience as their primary concern in selecting a child care arrangement (29% vs. 13%).
- No statistically significant differences were found in the child care choices or satisfaction with child care among ***quick deciders*** and ***time takers***.





# Substudy 2: Perspectives on Quality

# Research Questions & Methodology



- How do low-income parents describe ideal early care and education?
- How do low-income parents perceive emerging aspects of quality?
  - Developmentally appropriate practices
  - Practices that support social-emotional development
  - Family-sensitive caregiving
  - Cultural sensitivity
- **Semi-structured phone interview (N=19)**
  - Open-ended questions to describe ideal care
  - Probed about specific aspects of quality and asked parents to rank their importance and comment
  - Sample is similar to a larger sample participating in a longitudinal study about child care

# Key Findings



- **Developmentally Appropriate Practice**
  - Most parents perceive almost all aspects of developmentally appropriate practice as “extremely important” or “very important.”
  - A little over half of parents reported that the provider *knowing about children’s changing needs as they grow and develop* was the most important to their idea of quality
  - One parent reported that the provider *using an assessment tool to measure children’s development over time to determine how they’re doing* was the most important to their idea of quality

# Key Findings



- **Developmentally Appropriate Practice**
  - *“[The provider] need[s] an awareness of how the child can change and it’s important because they are aware. [The provider] can give activities that can foster that and be aware and then supply toys and activities that help support where [the] child is at that time. At this time, don't need a plan to measure. They just need to play. Plan - measuring plan - not appropriate at this age.”*

# Key Findings



- **Practices Supporting Social-Emotional Development**
  - Most parents perceive aspects of promoting children’s social-emotional development as “extremely important” or “very important.”
  - A little over one-third of parents reported that the most important feature of social-emotional caregiving is for the provider to *help children learn to control their behavior*

# Key Findings



- **Family Sensitive Caregiving**
  - Parents report more variation about the role an ideal caregiver would play when working with families.
  - A little over one-third of parents reported that the most important feature of family sensitive caregiving was for the caregiver to work with parents' work schedules.
- **Cultural Sensitivity**
  - Unlike other aspects of quality about which parents were asked, parents reported with less frequency that aspects of cultural sensitivity were "extremely important."
  - A little over one-half of parents reported that the most important aspect of culturally sensitive caregiving is for the caregiver to promote a way of communication with families who do not speak the same language as the caregiver.

# Conclusion



## Parents in this sample:

- Strongly valued developmentally appropriate practice, followed by practices to support social-emotional development;
- Showed some support for aspects of family sensitive caregiving, particularly in relation to communication and flexibility
- Showed least consensus on culturally sensitive aspects of quality



# Conclusion



- There is some match and some mismatch between what parents perceive as important and what QRIS designers think is important about quality
- Important to understand parental perceptions and values when designing a QRIS and targeting parents to use a QRIS
- Potential for educational efforts for parents



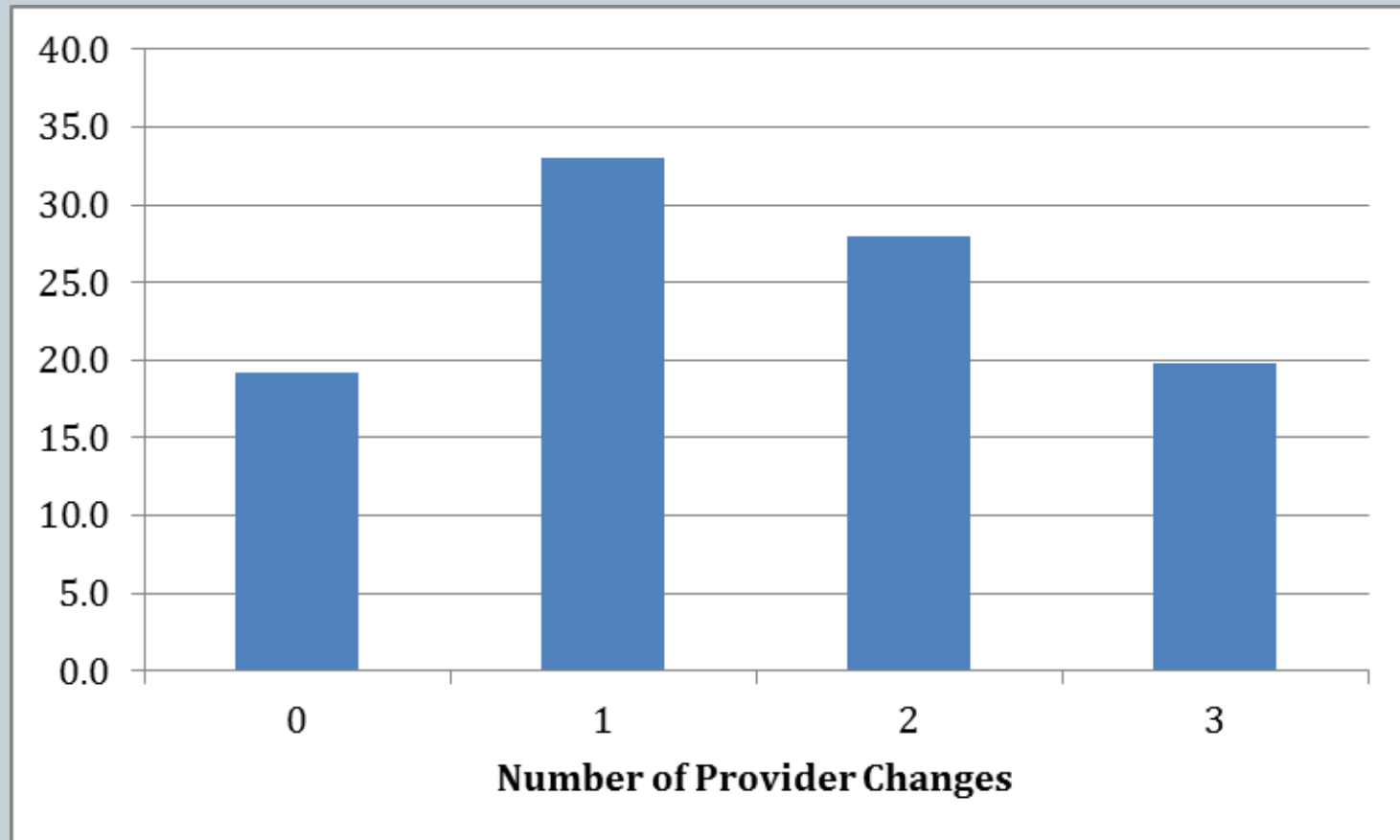
# Substudy 3: Stability and Continuity

# Changes in Child Care Arrangements Among Low-Income Families in Minnesota

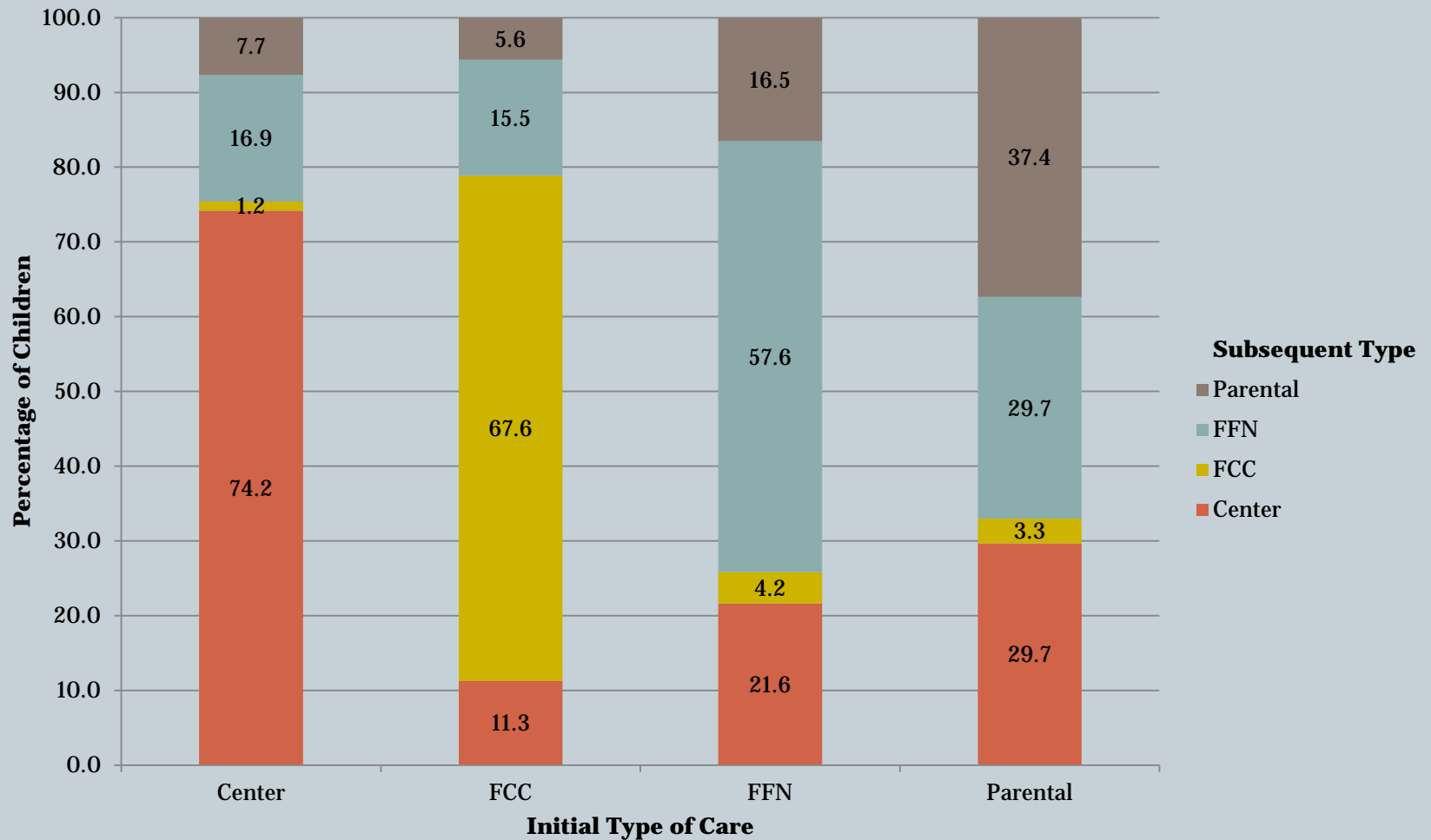


- Data are from a longitudinal parent survey. Analysis reported here based on 3 or 4 survey waves (5 survey waves have been completed now).
- A change in the focal child's primary provider occurred if the parent reported a different provider used most often between two survey waves (approximately six months apart).
- May underestimate the number of changes in arrangements if additional changes occurred between waves.
- Categorized provider types as (1) center; (2) family child care home (FCC); (3) family, friend or neighbor (FFN), or (4) parental care only.

Provider changes were common: Over half of children had a provider change in 6 months and only 19% had no provider changes in 1.5 years.



# Proportion Who Stayed in the Same Type of Care or Changed Between Waves



# Multivariate Analysis of Factors Associated with Changes in Provider or Provider Type



- **Four models (binary dependent variable equals one if there was a:**
  - Change in provider
  - Change in type of (non-parental) provider
  - Change from parental to non-parental care
  - Change from non-parental to parental (end all non-parental care )
- **Explanatory variables:**
  - Child and family characteristics
  - Changes in family circumstances (loss of employment or work hours, change in family structure, new baby)
  - Subsidy receipt in prior wave
  - Parent assessment of child's experience with the provider in the prior wave.

# Summary of key results: Factors associated with changes in provider or provider type



- Changes in child care arrangements were frequently related to changes in family composition and circumstances, including a new baby being born.
- Losing a job was associated with a sizeable increase in the likelihood of ending non-parental care arrangements.
- Families receiving a child care subsidy at the time of the prior survey were *less* likely to drop out of non-parental care and *less* likely to switch non-parental care types.
- The parent's assessment of the child's experience in care was a statistically significant predictor of a change in care arrangement. The less positive the experience, the more likely the child was to have a different primary provider at the next interview.

# **Lessons Learned from the Research Partnership Projects**





# Let's Be Friends!



**LESSONS LEARNED IN DEVELOPING  
PARTNERSHIPS WITH STATE LEADERS**

# Getting permission to play in the sandbox



**LESSONS LEARNED IN OBTAINING  
PERMISSIONS FOR STUDIES**

# Hello? Is anybody out there?



**LESSONS LEARNED IN RECRUITING LOW-  
INCOME FAMILIES**

# What is it that I'm trying to ask?



LESSONS LEARNED IN DEVELOPING SURVEY  
AND QUALITATIVE INSTRUMENTS

# Digging deeper to learn the whys



LESSONS LEARNED IN COLLECTING  
QUALITATIVE DATA

# **Building bridges between experiences and statistics**



**LESSONS LEARNED IN LINKING  
ADMINISTRATIVE AND SURVEY DATA**