



Understanding the relationship between the context of child care decision making, parental perceptions of subsidies, and outcomes



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Background

In the current economy, working poor parents face numerous barriers to raising young children, maintaining healthy families and economic survival. Not only must they earn enough money to pay for food, housing, transportation, health care and child care, they often do not receive services such as child care assistance, regardless of their eligibility. In order to empower working poor families to make the best child care decisions, the barriers they face in choosing and maintaining care must be better understood. States have flexibility in establishing guidelines for the child care subsidy program, which aids families in attaining these goals. The Child Care Assistance Program (CCAP) provides subsidies to assist Missouri families with child care costs. But Missouri also has one of the lowest eligibility rates for parents, has experienced increasing child poverty, and a decrease in the number of families in CCAP.

The theoretical perspective framing this research is an adaptation of Ecological Systems Theory (Bronfenbrenner, 1989) which is applied by Pungello and Kurtz-Costes (1999) to the context of child care selection. This framework pays special attention to the relationship between variables in different systems that influence both family and child outcome indicators related to child care experiences and the selection process.

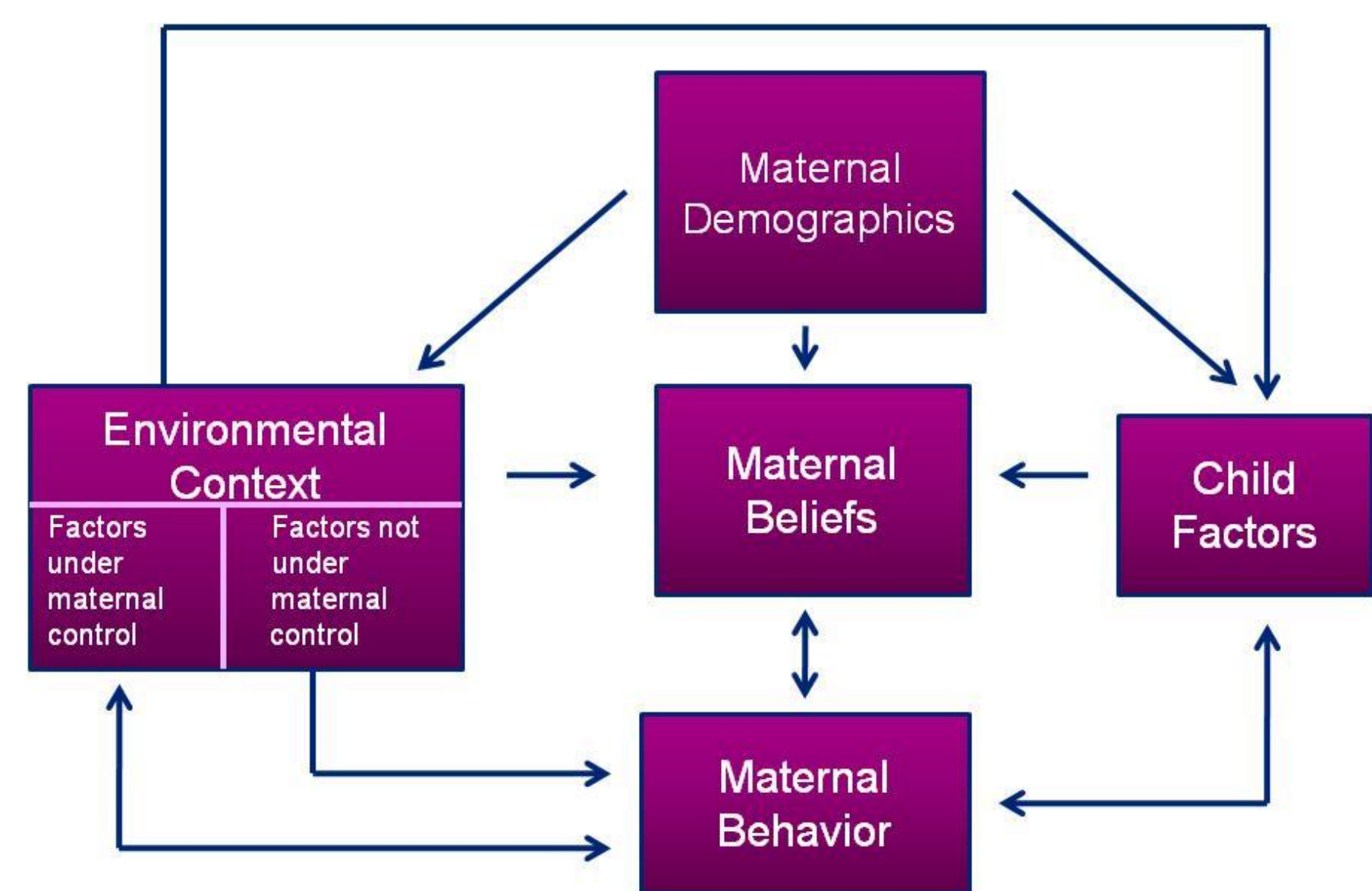


Figure 1: Theoretical Model of Child Care Choice Pungello & Kurtz-Costes (1999)

Purpose

This research sought to understand what factors contributed to parents' decisions and experiences with child care by asking how barriers influenced parental selection criteria, satisfaction with child care, and the continuity of care for children. This exploration included three hypotheses:

Hypothesis 1: Parents with greater perceived barriers (less work flexibility, less affordability, no assistance with child care cost, higher percent of income spent on child care, more transportation problems, less caregiver flexibility, and lower social support) will be more likely to have a discrepancy between selection criteria when choosing an ideal child care setting versus criteria used in choosing their current child's care, than parents with fewer perceived barriers.

Hypothesis 2: Parents with greater perceived barriers will be less satisfied with their child care choice than parents with fewer perceived barriers.

Hypothesis 3: Parents with greater perceived barriers will rate their child as having less continuity of care than parents with fewer perceived barriers.

In addition, this research further explored parental perceptions of the child care subsidy system, and differences that existed between subsidy recipients and non-recipients on a number of factors.

Methods

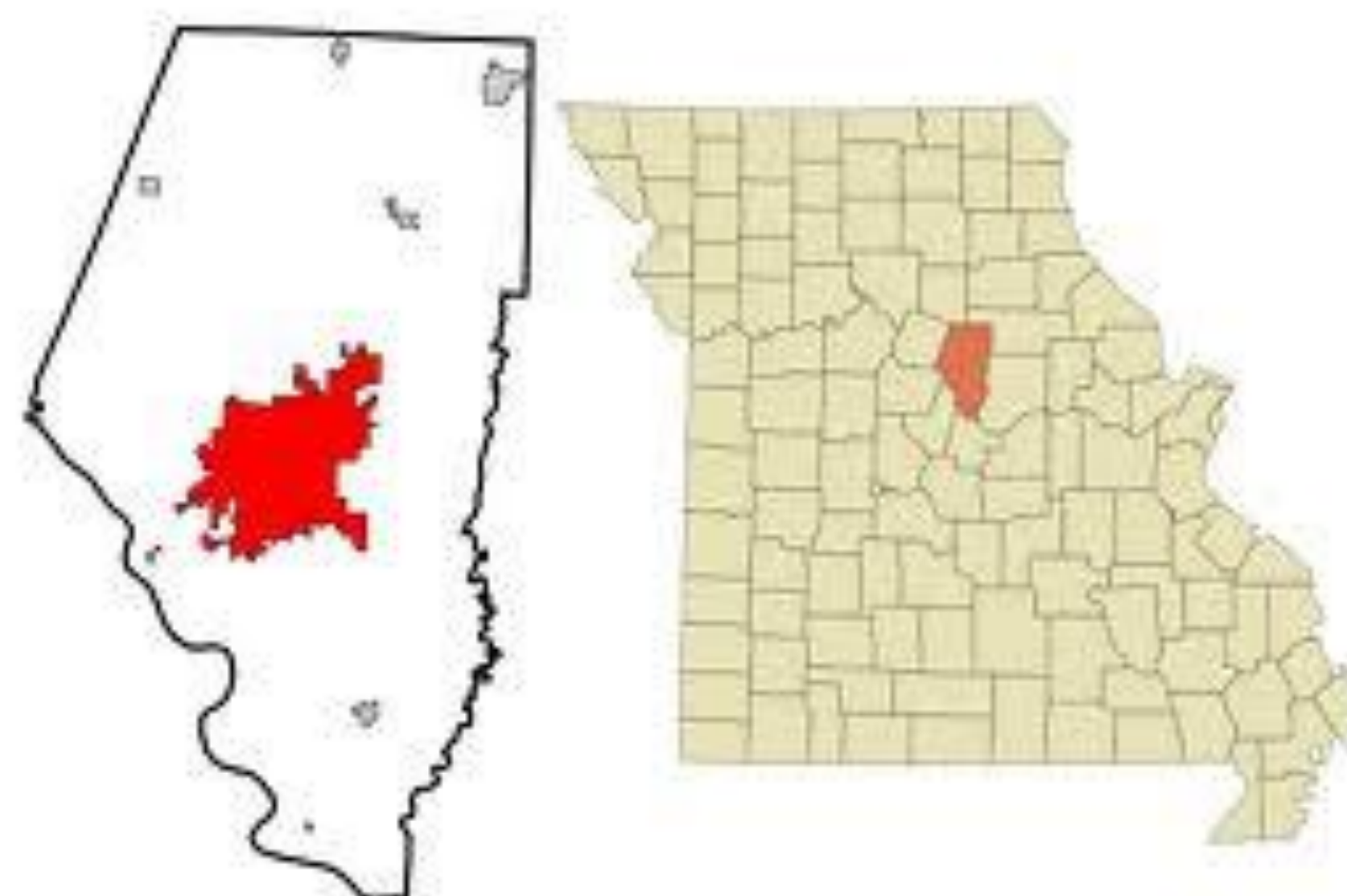


Figure 2: Map of Boone County, Mo., with Columbia highlighted. Map created by Arkyan (2007). Wikimedia Commons.

This study was a cross-sectional exploratory study in which a survey was distributed to 200 working poor parents (under 300% of the federal poverty level) of Mid Missouri children who had not yet entered kindergarten and were in non-parental care at least 10 hours per week. Purposive and convenience sampling techniques of the target population were carried out at the Women, Infant and Children Program, the public library, and Head Start parent groups. Measures for the variables in the survey were derived from two previous surveys (Emlen et al., 1999; Raikes, 2005) and a guide for developing parental child care surveys (Emlen & Weber, 2007). The dependent variable, parental child care selection criteria, was developed by this research team to compare parental assessment of

the importance of both quality and logistical indicators in the context of an ideal situation, versus the actual child care choice. Logistic regression was employed to explore the first three hypotheses. Descriptive analysis is used to report findings regarding parental perceptions of subsidies. Finally Chi-Square and Mann-Whitney U tests were used to compare subsidy recipients to non-recipients.

Results

In terms of the three logistic regression models, all three hypotheses were supported. As barriers increased parents were more likely to report: discrepancy in selection criteria between a real and ideal choice, $\chi^2(9, N=154) = 37.73, p < .001$; some level of dissatisfaction, $\chi^2(9, N=154) = 75.70, p < .001$; and some level of discontinuity, $\chi^2(9, N=154) = 63.47, p < .001$. However different barriers emerged as important depending on the dependent variable (see Table 1). Overall, the barriers most predictive of negative outcomes were a lack of financial assistance and low levels of social support.

Table 1: Significant Results from Logistic Regression Models

Variable	B	SE	Wald	p	OR	95% CI
DV: Selection Criteria Discrepancy						
IV: No financial assistance	1.13	.42	7.39**	.007	3.10	[1.37, 7.00]
IV: Social support	.16	.06	6.52*	.011	1.17	[1.04, 1.33]
DV: Satisfaction with Care						
IV: No financial assistance	1.76	.56	9.82**	.002	5.82	[1.94, 17.53]
IV: Work flexibility	.18	.06	7.95**	.005	1.20	[1.06, 1.35]
IV: Affordability	.41	.09	18.92***	.000	1.51	[1.25, 1.81]
DV: Continuity of Care						
IV: Social support	.28	.07	16.10***	.000	1.33	[1.16, 1.52]

Note: N = 154. SE = standard error; OR = odds ratio; CI = confidence interval. *p < .017. **p < .01. ***p < .001. Bonferroni adjustment, p < .017

When comparing subsidy recipients to non-recipients, several significant differences existed between the two groups (see Tables 2 and 3). In examining participants' understanding of their subsidy eligibility status, 37% reported currently receiving subsidies, while 66% of the sample met the income eligibility criteria. For participants who reported possibly being eligible despite not receiving subsidies, the most common reason for not using subsidies was reported as, "I don't know how to apply" (29%), followed by, "I don't want to mess with the hassle" (26%). Participants who had ever received subsidies in their lifetime (51% of the sample) were asked to assess

Table 2: Significant Chi Square Results Comparing Subsidy Recipients to Non-recipients

Variable	Total (n,%)	Recipients (n, %)	Non-Recipients (n, %)	χ^2	p
Partner status					
In-home	156	57	99	19.37***	.000
Not in-home	80 (51%)	16 (28%)	64 (65%)		
76 (49%)	41 (72%)	35 (35%)			
Race					
White	154	56	98	4.74*	.030
Non-White	97 (63%)	29 (52%)	68 (69%)		
57 (37%)	27 (48%)	30 (31%)			
Type of care					
Relative	154	57	97	17.81***	.000
Non-Relative	41 (27%)	4 (7%)	37 (38%)		
113 (73%)	53 (93%)	60 (62%)			
% income on care					
10% or less	142	51	91	8.77**	.003
More than 10%	55 (39%)	28 (55%)	27 (30%)		
87 (61%)	23 (45%)	64 (70%)			
FPL %					
127% or less	141	50	91	13.86***	.000
More than 127%	93 (66%)	43 (86%)	50 (55%)		
48 (34%)	7 (14%)	41 (45%)			

Note: Total N varies due to missing data. *p < .05. **p < .01. ***p < .001

their perceptions and experiences while using subsidies. Slightly over half of parents who had used subsidies, received them for less than one year and about one-third of parents experienced lost or interrupted subsidies. Of those who had lost subsidies, over half had lost them more than once and a quarter reported withdrawing children from the care setting. Overall responses to the series of yes/no questions regarding their perceptions of subsidies revealed more positive than negative assessments. For example, 87% responded yes to the statement, "Child care subsidies are a tremendous boost to our family's ability to work and make a living." About one-third to one half of parents indicated negative responses with regards to having more choices because of subsidies and subsidies being easy to keep. One-third of parents also reported that some of the providers they approached would not care for their children because of subsidies.

Results (cont.)

Table 3: Significant Mann Whitney Results Comparing Subsidy Recipients to Non-recipients

Variable	Subsidy MR	Non-Subsidy MR	U	Z	p
Monthly household income	54.75	80.88	1466.50***	-3.64	.000
FPL %	57.32	78.52	1591.00**	-2.95	.003
Monthly child care expenses	66.93	85.16	2162.00*	-2.44	.015
Monthly child care expenses ^a	63.05	83.42	1928.00**	-2.78	.006
Importance of logistics ^a	86.56	72.18	2248.00*	-2.06	.039
Work flexibility ^{ab}	68.80	84.09	2268.50*	-2.04	.041
Satisfaction with care ^{ab}	68.68	84.15	2262.00*	-2.42	.016
Education	62.61	86.01	1910.00**	-3.26	.001

Note: MR = Mean rank. ^aVariable refers to information gathered for the youngest child in non-parental care. ^bHigher numbers indicate more negative parental assessments. *p < .05. **p < .01. ***p < .001

Discussion

Results from this study point to implications for policy, practice and future research. First in terms of policy, families who received financial assistance with the cost of child care were able to choose child care based more on quality, and feel more satisfied with their child care choices. This finding suggests the critical importance of ensuring that more eligible families receive financial assistance with child care through programs such as child care subsidies and Head Start. Subsidy policy may need to be reevaluated in light of the number of families in this sample who received subsidies and still paid more than 10% of their income on child care, as well as the number of families who felt subsidies were not easy to keep, who had lost or interrupted subsidies, and those who felt their child care choices were limited because of subsidies. With regards to practice implications, many families reported not knowing how to apply for subsidies and were unsure of their eligibility status. Information could be made more widely available so that child care needs can be assessed at multiple social service contact points. In addition, given the importance of social support in making better choices and maintaining care for this sample, programs that develop families' social support networks with regards to child care could be created. Finally, future research could compare parents who receive enhanced social support services to assess the influence on continuity of care and other outcomes. Further measures of social support related to child care, and selection criteria used to choose care in ideal vs. real scenarios, could also be explored, as measurement of these variables is still in its infancy.

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