MN 2004 HOUSEHOLD CHILD CARE SURVEY

Revised

First, we would like your opinions about child care, including centers and homes, as well as regular care by relatives, friends, or neighbors; preschool programs; before and after school programs, and summer programs. I am going to read some things that people look for in selecting arrangements for child care and for school age care. For each one, please tell me if you think it is very important, somewhat important, or not important in selecting care arrangements for your YOUNGEST child.

	(Would you say)		
How about	Very Important,	Somewhat Important, or	Not Important?
Q1. A caregiver or provider who has special training in taking care of children?	1	2	3
Q2. A caregiver who is a relative or family member?	1	2	3
Q3. A place where children will be cared for when they are sick?	1	2	3
Q4. A place close to home?	1	2	3
Q5. A reasonable cost?	1	2	3
Q6. A small number of children in the same class, home, or group?	1	2	3
Q7. A caregiver or provider who speaks English with your child?	1	2	3
Q8. A caregiver or provider who speaks your family's native language with your child?	1	2	3

Q9. In your neighborhood, at what age do you think **a** child could be left to care for himself or herself on a regular basis?

_____ (ENTER AGE: 1-18)

Q10. Thinking about your neighborhood, for how long at a time do you think a child of that age could be left to care for himself or herself?

_____ minutes or ______ hours

Q11.Next, we would like to learn about some of the needs you and your children age 12 and younger may have.

Do you have any relatives, other than those in your household, who would be available and willing to care for your child(ren) age 12 and younger on a regular basis, at least once per week for a total of 5 or more hours per week? Would you say a relative is available and willing...

Always,	1
Usually,	
Sometimes,	
Rarely, or	4
Never?	5
-1-	WRC/MN 2004 Household Child Care Survey: April 2004

Q12A. Do you know of any individual, such as a neighbor or friend, who is not a relative, who might be available and willing to care for your child(ren) age 12 and younger on a regular basis, at least once per week for a total of 5 or more hours per week? Would you say such a person is available and willing...

Always,	1
Usually,	2
Sometimes,	3
Rarely, or	4
Never?	5

Q12B. In the past 12 months, have any problems with child care prevented you from accepting or keeping the kind of job you want? Would you say:

Yes,	1
Sometimes, or	2
No?	3

Q13A. Are you aware of the availability of state or county subsidy programs to help pay for child care costs?

Yes	1
No	(GO TO Q15)2

Q13B. Do you currently receive child care financial assistance through a state or county subsidy program?

Yes	
No	2

Q13C. Are you currently on a waiting list for child care financial assistance in your county?

Yes	
No	2

Q14. Would you be on a waiting list for assistance if the lists were not as long as they are now?

-2-

Yes	1
No	2

WRC/MN 2004 Household Child Care Survey: April 2004

Q15. Are you aware that there is a child care resource and referral service for your community to help you find child care? (AS NEEDED: The County provides referral services to each community.)

Yes	1
No	2

Q16. How helpful would it be to you if your community had a child care rating system that would give you information you could use for selecting quality care? Would it be:

Very helpful,	1
Somewhat helpful,	2
Not very helpful, or	3
Not at all helpful?	4

Q17. We would like to select a child in the household at random to be the focus of the interview. Would you be willing to tell me the first names, the initials, or the birth months, as well as the ages of all the children age 12 or younger who live in this household, beginning with the <u>youngest</u> child. (IF R IS RELUCTANT TO GIVE NAMES, ASK R TO IDENTIFY CHILDREN ANY OTHER WAY.)

Name	Age
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

- 1. IF ONE CHILD, THAT CHILD IS TARGET.
- 2. IF TWO OR MORE CHILDREN, RANDOMLY SELECT ONE FOR TARGET.
- 3. ASK IF THE SELECTED CHILD HAS USED CHILDCARE AT LEAST ONCE IN EACH OF THE LAST TWO WEEKS. IF NO, RE-SELECT ANOTHER CHILD AT RANDOM.

Q18. (IF MORE THAN ONE CHILD: The computer has selected one of your children at random.) These next questions are about {child} only.

Is {child} a boy or girl?

Boy	1
Girl	2
Volunteered Other	3

Q19. I am going to read statements that describe child care needs for children with special needs. Please answer YES or NO to let me know if these statements describe the possible child care needs of {Child}.

{C	hild}	Yes	No	REF	DK
a.	has special needs requiring a lot of extra effort.	1	2	7	8
b.	had a caregiver/provider who quit or let him/her go because of behavioral problems.	1	2	7	8
c.	has a physical or developmental disability that requires special attention.	1	2	7	8
d.	has a health care need that requires extra attention.	1	2	7	8
e.	has an emotional or behavioral problem that requires special attention.	1	2	7	8
f.	has a learning disability that requires specialized approaches.	1	2	7	8
g.	has an Individual Education Plan (IEP) or an Individual Interagency Intervention Plan (IIIP)?	1	2	7	8

Q20. CURRENT CHILD CARE TYPES and SCHEDULE

We would like to know how {child} spent his/her time when he/she was not with you or the child's other parent during the last two weeks. We are interested in all the times {child} was not with a parent at any time during the day or night. I am going to read a list of different kinds of child care arrangements, programs children attend, and people who care for children. I would like you to tell me which ones you used for {child}, **at least once in each of the last two weeks**.

[IF ON VACATION DURING PAST TWO WEEKS, ASK ABOUT TWO WEEKS BEFORE VACATION}

Child Age 5...GO TO Q20A Child Age 0-4...GO TO Q20B Child Age 6-12...GO TO Q20J

For child age 5

Q20A. First, is {child} in Kindergarten?

1. Yes

2. No...GO TO Q20B

Q20AA. About how many hours per week was {child} usually cared for in Kindergarten? (AS NEEDED: This does not include transportation to and from kindergarten, such as a bus.)

For child age 0-5

Q20B. Did {child} attend Head Start?

- 1. Yes
- 2. No...GO TO Q20C

Q20BB. About how many hours per week was {child} usually cared for in Head Start?

- Q20C. Other than Head Start, did {child} attend a day care or group care center, a nursery, a preschool, or a pre-kindergarten? Please do not include child care or babysitting in either your or someone else's home.
 - 1. Yes
 - 2. No...GO TO Q20D

Q20CC. About how many hours per week was {child} usually cared for there?

Q20CCC. Which of the following times of the week was {child} in that type of care... (CIRCLE ALL THAT APPLY)

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends

IF {child} IS NOT IN KINDERGARTEN (SAID NO TO Q20A) OR IT IS SUMMER BREAK (June 17th-Sept. 14th) THEN SKIP TO Q20E.

Q20D. Did {child} attend a program that provided before school or after school care outside your home?

1. Yes

2. No...GO TO Q20E

Q20DD. About how many hours per week was {child} usually cared for there?

Q20DDD. Which of the following times of the week was {child} in that type of care... (CIRCLE ALL THAT APPLY)

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends
- Q20E. Did {child} have child care or babysitting **in your home or the child's other parent's home** by someone other than you or the child's other parent? This could include a relative, an older sibling, or a nanny.
 - 1. Yes
 - 2. No...GO TO Q20F

Q20E1. Was that a ... (CIRCLE ALL THAT APPLY)

- 1. Grandparent,...GO TO Q20EE
- 2. Older sibling,...GO TO Q20E2
- 3. Another relative such as aunt or cousin, or...GO TO Q20E3
- 4. A non-relative?...GO TO Q20E5

Q20E2. What age is the older sibling?

_____ GO TO Q20EE

Q20E3. Is that person 18 or older?

1. Yes...GO TO Q20EE

2. No

Q20E4. What age is that person?

_____ GO TO Q20EE

Q20E5. Is that person 18 or older?

- 1. Yes...GO TO Q20EE
- 2. No

Q20E6. What age is that person?

Q20EE. About how many hours per week was {child} usually cared for in this type of arrangement?

____ (Childcare or babysitting in YOUR home.)

Q20EEE. Which of the following times of the week was {child} in that type of care... (CIRCLE ALL THAT APPLY)

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends

Q20F. Did {child}have child care or babysitting in someone else's home during the day, evening, or overnight?

1. Yes

2. No...GO TO Q20H

Q20F1. Was that a... (CIRCLE ALL THAT APPLY)

- 1. Grandparent,...GO TO Q20G
- 2. Older sibling,...GO TO Q20F2
- 3. Another relative such as aunt or cousin, or...GO TO Q20F3
- 4. A non-relative?...QGO TO Q20F5

Q20F2. What age is the older sibling?

_____ GO TO Q20G

Q20F3. Is that person 18 or older?

1. Yes...GO TO Q20G

2. No

Q20F4. What age is that person?

_____ GO TO Q20G

Q20F5. Is that person 18 or older?

- 1. Yes...GO TO Q20G
- 2. No

Q20F6. What age is that person?

_____ GO TO Q20G

ONLY ASK Q20G IF SAID YES TO A NON-RELATIVE IN Q20F1.

Q20G. Was that a licensed family child care home?

1. Yes

2. No

Q20GG. About how many hours per week was {child} usually cared for in this type of arrangement?

(Childcare or babysitting in SOMEONE ELSE'S home.)

Q20GGG. Which of the following times of the week was {child} in that type of care... (CIRCLE ALL THAT APPLY)

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends

Q20H. Did {child} have supervised activities or lessons at a recreation center, library, church, camp, gym, or a sports facility? (**During summer (June 17th-Sept. 14th) add:** organized summer program, such as a recreation program or summer day camp)

1. Yes

2. No...GO TO Q20I

Q20HH. About how many hours per week was {child} usually cared for there?

Q20HHH. Which of the following times of the week was {child} in that type of care...

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends

Q20I. Sometimes it is difficult to make arrangements to look after children all the time. During the past 2 weeks did {child} take care of himself/herself (or stay alone with a brother or sister who is 12 or younger) on a **regular** basis, even for a small amount of time?

1. Yes

2. No...GO TO Q21

Q20II. About how many hours per week did {child} usually care for himself/herself?

Q20III. Which of the following times of the week did {child} care for himself/herself... (CIRCLE ALL THAT APPLY)

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends

For child age 6-12

(ONLY ASK Q20J DURING SUMMER (June 17th-Sept. 14th), OTHERS GO TO Q20K) Q20J. Did {child} attend an overnight camp?

- 1. Yes
- 2. No...GO TO Q20K

Q20JJ. About how many hours per week was {child} usually cared for there?

Q20K. ASK DURING SCHOOL YEAR (Before June 17th & After Sept. 14th): Did {child} attend a program that provided before school or after school care outside your home?

ASK DURING SUMMER (After June 17th & before Sept. 14th): Did {child} attend a day care or group care center?

- 1. Yes
- 2. No...GO TO Q20L

Q20KK. About how many hours per week was {child} usually cared for there?

Q20KKK. Which of the following times of the week was {child} in that type of care... (CIRCLE ALL THAT APPLY)

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends
- Q20L. Did {child} have child care or babysitting in your home or the child's other parent's home by someone other than you or the child's other parent?
 - 1. Yes
 - 2. No...GO TO Q20M
- Q20L1. Was that a... (CIRCLE ALL THAT APPLY)
 - 1. Grandparent,...GO TO Q20LL
 - 2. Older sibling,...GO TO Q20L2
 - 3. Another relative such as aunt or cousin, or...GO TO Q20L3
 - 4. A non-relative?...GO TO Q20L5

Q20L2. What age is the older sibling?

_____ GO TO Q20LL

Q20L3. Is that person 18 or older?

1. Yes...GO TO Q20LL

2. No

Q20L4. What age was that person?

___ GO TO Q20LL

Q20L5. Is that person 18 or older?

- 1. Yes...GO TO Q20LL
- 2. No

Q20L6. What age was that person?

Q20LL. About how many hours per week was {child} usually cared for in this type of arrangement?

Q20LLL. Which of the following times of the week was {child} in that type of care... (CIRCLE ALL THAT APPLY)

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends
- Q20M. Did {child} have child care or babysitting in someone else's home during the day or evening or overnight?
 - 1. Yes
 - 2. No...GO TO Q200
- Q20M1. Was that a... (CIRCLE ALL THAT APPLY)
 - 1. Grandparent,...GO TO Q20N
 - 2. Older sibling,...GO TO Q20M2
 - 3. Another relative such as aunt or cousin, or...GO TO Q20M3
 - 4. A non-relative?...GO TO Q20M5

⁽Child care and babysitting in YOUR home.)

Q20M2. What age is the older sibling?

_____ GO TO Q20N

Q20M3. Is that person 18 or older?

1. Yes...GO TO Q20N

2. No

Q20M4. What age is that person?

_____ GO TO Q20N

Q20M5. Is that person 18 or older?

- 1. Yes...GO TO Q20N
- 2. No

Q20M6. What age is that person?

ONLY ASK Q20N IF SAID YES TO A NON-RELATIVE IN Q20M1.

Q20N. Was that a licensed family child care home?

1. Yes

2. No

Q20NN. About how many hours per week was {child} usually cared for in this type of arrangement?

(Childcare or babysitting in SOMEONE ELSE'S home.)

Q20NNN. Which of the following times of the week was [child] in that type of care... (CIRCLE ALL THAT APPLY)

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends
- Q200. Did {child} attend supervised activities or lessons at a recreation center, library, church, camp, gym, or a sports facility? (During summer (**June 17th-Sept. 14th**) add: organized summer program, such as a recreation program or summer day camp)
 - 1. Yes
 - 2. No...GO TO Q20P
- Q2000. About how many hours per week was {child} usually cared for there?
- Q20000. Which of the following times of the week was {child} in that type of care; (CIRCLE ALL THAT APPLY)
 - 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
 - 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
 - 3. Evenings from about 6:00 p.m. to 10:00 p.m.
 - 4. Late nights after 10:00 p.m.
 - 5. Weekends
- Q20P. Sometimes it is difficult to make arrangements to look after children all the time. During the past 2 weeks did {child}take care of himself/herself {or stay alone with his brother or sister who is 12 or younger} on a **regular** basis even for a small amount of time?
 - 1. Yes
 - 2. No

Q20PP. About how many hours per week did {child} usually care for himself/herself?

Q20PPP. Which of the following times of the week did {child} usually care for himself/herself... (CIRCLE ALL THAT APPLY)

- 1. Standard weekday, any time from about 7:00 in the morning to 6:00 at night (includes after-school)
- 2. Early mornings before 7:00 a.m. (after child woke up in the morning)
- 3. Evenings from about 6:00 p.m. to 10:00 p.m.
- 4. Late nights after 10:00 p.m.
- 5. Weekends
- Q22. Which of the following child care arrangements have you used most often at least once a week in each of the last two weeks?

Kindergarten	1
Head Start	2
Group Care Center, Nursery, Preschool, or Pre-Kindergarten	3
Before or After School Program	4
Childcare or Babysitting in your home	5
Childcare or Babysitting in someone else's home	6
Activities at a Rec. Center, Library, Church, Camp, Gym, or Sports	
Facility	7
Overnight Camp	8
Child cared for Self	9

IF THERE IS A TIE, FIRST ASK WHICH ONE THEY CONSIDER THE ONE USED MOST OFTEN. IF THEY CAN'T DECIDE, FLIP A COIN TO CHOOSE ONE AT RANDOM. IF R SAYS THAT HE/SHE DID NOT USE CHILDCARE AT LEAST ONCE IN EACH OF THE LAST TWO WEEKS PLEASE SAY,

Thank you for your time, but we are only interviewing households that used childcare at least once in each of the last two weeks.

Q23A. INTERVIEWER: IF THE ARRANGEMENT USED MOST OFTEN WAS NOT FOR AT LEAST 5 HOURS PER WEEK SKIP TO Q48A, IF THE ARRANGEMENT USED MOST OFTEN PER WEEK IS KINDERGARTEN, ALSO SKIP TO Q48A.

How did you first learn about the {ARRANGEMENT USED MOST} that you are currently using for {child}? (IF ARRANGEMENT IS RELATIVE CARE, OR CHILD'S SELF CARE, SKIP TO 24.) DO NOT READ LIST. CIRCLE ONE RESPONSE ONLY.

Newspaper/advertisements/yellow pages1
Community service ([NOT] social service or welfare agency);
child care resource and referral service (may be actual name of service)2
Referred by friends/neighbors/relatives/co-workers
Provided care for another child of R's4
Welfare or social service caseworkers5
Health care provider
Place of employment7
Public or private school
Church, synagogue, or other place of worship
R already knew provider10
Reference materials
Public bulletin boards/flyers
Other: Q23B: Specify

Q24A. Why did you choose {ARRANGEMENT USED MOST} for {child} over other possibilities? In other words, what was the [most important] thing you considered?

Cost	1
Hours convenient (flexibility or hours needed for schedule)	2
Location convenient (close to work/home)	3
Quality of care given	4
Availability (they had an opening)	5
Family member care prefered	6
Appearance (outside) of the home/center	7
Appearance (inside) of the home/center	8
Sick (takes child when child is sick)	9
Number of children in the home/center	10
-16- WRC/MN 2004 Household Child Care Survey:	April 2004

Personality of provider	11
Training/experience of Provider	12
Language (caregiver speaks language spoken in home)	
Culture (want child to grow up within his/her culture)	14
Interaction between child and provider	15
References	16
Trust (I trust them)	17
Special needs of	
Licensed (care was licensed)	19
Accredited (care was accredited)	
Schoolwork and study time help is provided	21
Other: Q24B:Specify	

Q25. What was the second most important thing?

Cost	1
Hours convenient (flexibility or hours needed for schedule)	2
Location Convenient (close to work/home)	3
Quality of care given	4
Availability (they had an opening)	5
Family member care prefered	6
Appearance (outside) of the home/center	7
Appearance (inside) of the home/center	8
Sick (takes child when child is sick)	9
Number of children in the home/center	10
Personality of provider	11
Training/experience of Provider	12
Language (caregiver speaks our family's home or native language)	13
Culture (want child to grow up within his/her culture)	14
Interaction between child and provider	15
References	16
Trust (I trust them)	17
Special needs of child -17- WRC/MN 2004 Household Child Care Survey: April	

Licensed (care was licensed)	19
Accredited (care was accredited)	20
Schoolwork and study time help is provided	21
Other: Q25B:	22
(Volunteered) nothing else	23

IF ARRANGEMENT USED MOST OFTEN IS SELF CARE SKIP TO Q43 (PAGE 19)

Q26. Do you feel free to drop in at this child care arrangement without an appointment?

Yes	1
No	2
(Volunteered) Newly enrolled, hasn't happened	3

Q27. Counting {child}, how many <u>children</u> are usually cared for together, in the same group at the same time, by {ARRANGEMENT USED MOST}? (IF A CENTER, PRESCHOOL, NURSERY SCHOOL, OR HEAD START: How many children are usually in your child's room or group at this center/program?)

(NUMBER OF CHILDREN)

Q28. How many <u>adults</u>/people usually care for your child at the same time at {ARRANGEMENT USED MOST}? (IF A CENTER, PRESCHOOL, NURSERY SCHOOL OR HEAD START: How many adults are usually in your child's room or group at this center/program?)

(NUMBER OF ADULTS)

Next, I'll read some statements about child care. Please think about when {child} is at {ARRANGEMENT USED MOST}, and choose the answer that best represents the quality of care you believe {CHILD} is receiving there.

	(Would yo	u say)			
	Never,	Rarely,	Some- times,	Usually, or	Always?
Q29. My child feels safe and secure.	1	2	3	4	5
Q30. The caregiver or provider is warm and affectionate toward my child.	1	2	3	4	5
Q31. The caregiver or provider and I share information about my child.	1	2	3	4	5
Q32. There are lots of creative activities going on.	1	2	3	4	5
Q33. My child gets a lot of individual attention.	1	2	3	4	5
Q34. The caregiver or provider provides activities that are just right for my child.	1	2	3	4	5
Q35. My caregiver or provider knows a lot about children and their needs.	1	2	3	4	5
Q36. My child likes the caregiver or provider.	1	2	3	4	5
Q37. My caregiver or provider feels that my child's needs are too demanding.	1	2	3	4	5
Q38. I rely on my caregiver or provider to be flexible about my hours.	1	2	3	4	5
Q39. The caregiver or provider needs more help with the children.	1	2	3	4	5
Q40. The children watch too much TV.	1	2	3	4	5
Q41. If I had it to do over, I would choose this care again.	1	2	3	4	5
Q42. There has been too much turnover in my child's caregivers or providers at this arrangement.	1	2	3	4	5

Q43. If you could change only one thing about {child}'s {ARRANGEMENT USED MOST}, what one thing would you change?

Q44A. Would you say the {ARRANGEMENT USED MOST} is your preferred, number one choice for child care, or would you prefer to change types of caregiver or provider?

This is preferred type(GO TO Q45A)1	
Would rather change(GO TO Q44B)2	
Don't know(GO TO Q45A)8	

Q44B. If you could choose any type of care, what type of care would you rather have? INTERVIEWER: CODE AS 1 OR 2 AND ENTER TEXT RESPONSE ON NEXT SCREEN.)

- 1. Stay home with child
- 2. Something Else

Q44C. If "Stay at home with child"...What is your next choice for type of care?

Q44D. Is there anything that keeps you from changing to that type of care?

- 1. Yes
- 2. No...GO TO Q45

Q44E. What keeps you from changing to that type of care?

IF ARRANGEMENT USED MOST OFTEN IS SELF CARE SKIP TO Q48A

Q45A. What language does the provider or caregiver at {child}'s {ARRANGEMENT USED MOST OFTEN} speak most when caring for (him/her)?

	English	1
	Spanish	2
	Hmong	3
	Other language: Q45B:Specify	4
Q46. How long does it take to go o Would you say	ne way from {child}'s home to (ARRANGEMENT USED MOST)?	
	It's in my home,	1
	A couple of minutes (next door or across the street),	2
	5 minutes or less (1 or 2 blocks),	3
	More than 5 but less than 10 minutes,	4
	10 to 20 minutes,	5
	21 to 30 minutes, or	6
	More than 30 minutes?	7

Q47A. How does {child}get to and from this arrangement? (DO NOT READ LIST) (CIRCLE ALL THAT APPLY)

Family vehicle	1
Public transportation (city bus)	2
School bus	3
Child care provider picks up child	4
Someone else, besides other parent, takes child to child care	5
Walk	
Car pool	7
Гахі	8
Other: Q47B:Specify	9

Q48A. When you chose this care for {child}, did you seriously consider other types of providers, such as a day care center, family child care, care by a relative, or staying home yourself? Would you say...

Q48B. What other kinds of care did you seriously consider using? DO NOT READ LIST. CIRCLE ALL MENTIONED.

R takes care of child	1
Husband/wife/partner takes care of child when you are not at home	2
an ex-spouse or partner	3
child's grandmother or grandfather	4
The child's brother, sister, step-brother or step-sister	5
Another relative, such as an aunt, uncle or cousin	6
Informal care by non-relative (friend, neighbor, sitter, aupair)	7
Legally unlicensed family day care	8
Licensed family day care	9
Day care center	10
Nursery school, pre-school, pre-kindergarten	11
Before or after school program	12
Head Start	13
Kindergarten, elementary, or jr. high school	14
Lessons (art education, performing arts, computer, language)	15
Clubs (boys/girls clubs, scouts, 4H, etc.)	16
Sports, physical education activities	17
Community recreation program, pool, or supervised playground	18
Child takes care of him/herself	19
Other arrangements: Q48C:Specify:	20

Q49. In choosing child care for {child}, did you feel like you had to take whatever you could get. Would you say...

Definitely yes	1
Mostly yes,	2
Sort of yes, sort of no,	
Mostly no, or	4
Absolutely not?	5

Q50A. These next questions are about **all** of your children age 12 and younger. When I refer to "child care," please think about **all** situations when someone other than the child's parent or school, is responsible for the care of your child.

For **all** of your children age 12 and younger, how many different child care arrangements do you have throughout the day and night that you used at least once per week in each of the last two weeks.

(# OF ARRANGEMENTS)

Q50B. Is transportation to and from child care a big problem for your household? Would you say...

Yes,	1
Sometimes, or	2
No?	3

Q50C. Please think about an average day using child care last week and how long it took to get all of your children **HOME** from child care on that average day. We are only interested in the time it took to get them home, not the time to take them there. How much time did it take, on a typical day, to get all of your children home from child care?

(AS NEEDED: Please include transportation home from after-school programs, lessons, or any place where your child goes and you leave him or her in the care of another person

(MINUTES ON AN AVERAGE DAY)

Q51. Please think about how much your household paid or will pay for last week, Monday through Sunday, for all of your child care expenses, for all of <u>your</u> children age 12 and younger? Please round to the nearest dollar. We are only interested in how much you paid for last week, whether or not you actually made the payment last week, or pay by the week, month, or some other period of time.

\$_____ (AMOUNT PAID FOR MONDAY-SUNDAY OF LAST WEEK)

Q52. Did you claim a federal or state income tax credit for any child-care expenses for 2003?

Yes	1
No	2
Don't know	3

Q53. Does your family use a plan through an employer that allows you to purchase child care with before-tax dollars?

Yes	
No	

Q54. Are your child-care expenses reduced because of a discount, bargain rate, sliding scale, scholarship, or general program subsidy by a church, child-care provider, employer, or agency?

Yes	1
No	2
Don't know	8

Q55A. Think about all of the child care arrangements you had last week for {child}. Did or will anyone in your household, pay any amount of your/their **own money** at any time (cash, check or credit card) for any of these arrangements?
(INTERVIEWER: If payment has not yet been made, but they expect to pay for these services, code yes. If payment is 100% through subsidy, or childcare is provided at no cost, code no.)

Yes1	
No(SKIP TO Q. Q56)	

Q55B. For which arrangement(s) last week did you or will you make any payment? We are only interested in payments you have made or will make for child care last week for {child}. If payment covers more than one child, please estimate amount paid for {child}.

Paid Arrangement	RECORD AMOUNT PAID HERE	PERIOD OF TIME (e.g. day, week, month, quarter)
1.	\$	
2.	\$	
3.	\$	
4.	\$	
5.	\$	

Q56. Does anyone else pay for all or part of the cost of the child care for {child}? By this I mean a government agency, your employer, or someone outside your household.

 Q57A. Who or what agency helped pay for this arrangement? CIRCLE ALL THAT APPLY.

Government (federal, state, or local government agency or welfare office)	1
Child's other parent	2
Employer	3
Other: Q57B: SPECIFY:	4

Q58A. We know that it is sometimes difficult to make arrangements to look after children.

ASK ONLY IF ANY CHILD AGE 2 OR YOUNGER: During the last month, were any of your children age 2 or younger watched or cared for on a regular basis, even for a small amount of time, by a brother or sister who is age 12 or younger?

Yes	1
No(GO TO Q60)	2
Not applicable(GO TO Q60)	9

Q58B. **ASK ONLY IF ANY CHILD AGE 3-5:** During the last month, did any of your children ages 3 to 5 stay alone or with a brother or sister who is age 12 or younger on a regular basis, even for a small amount of time?

Yes	1
No(GO TO Q60)	2
Not applicable(GO TO Q60)	9

Q58C. ASK ONLY IF ANY CHILD AGE 6-9: During the last month, did any of your children ages 6 to 9 take care of himself or herself or stay alone with another brother or sister age 12 or younger on a regular basis, even for a small amount of time?

Yes	1
No(GO TO Q60)	2
Not applicable(GO TO Q60)	9

Q58D. ASK ONLY IF ANY CHILD AGE 10-12: During the last month, did any of your children ages 10 to 12 take care of himself or herself or stay alone with another brother or sister age 12 or younger on a regular basis, even for a small amount of time?

Yes		1
No(GO TO Q60)		2
Not applicable(GO T	O Q60)	9
-25-	WRC/MN 2004 Household Child Care Survey:	April 2004

DRAFT #2

Q59. Have any of these children had any babysitting or home safety training, such as from the Red Cross or community education?

Yes	 	 	1
No	 	 	2

Q60. In the past 6 months, did any of the following happen for you, your spouse, or partner? (AS NEEDED: This does not include your child being sick.)

 Missed an entire day of work because of a problem with your child care arrangements? Late for work or left early because of a problem with your child care arrangements? Quality of work suffered worrying about your child because of a problem with your 	es No
	1 2
3. Quality of work suffered worrying about your child because of a problem with your	1 2
child care arrangements?	1 2
4. Could not work overtime because of a problem with your child care arrangements?	1 2
5. Changed shifts or schedule because of a problem with your child care arrangements?	1 2
6. Worked fewer hours because of a problem with your child care arrangements?	1 2
7. Did not get a raise or promotion because of a problem with your child care arrangements?	.1 2
8. Quit job or was fired because of a problem with your child care arrangements?	1 2

IF ALL NO, GO TO Q63, IF ANY YES CONTINUE WITH Q61

Q61. In the past 6 months, about how often did you or your spouse/partner have those kinds of problems with your child care arrangements? Would you say...

Rarely,	1
Sometimes, or	2
Often?	3

IF ALL "NO" TO RESPONSES 1,2,4, & 6 on Q60, SKIP TO Q63A

Q62A. What was the problem with your child care arrangement(s) the last time all, or part, of a day of work was missed, **because** of a problem with your child care arrangement(s)? (DO NOT READ LIST)

-26-

Provider ill	1
Provider's family ill	2
Provider had personal problems	3
School or center closed (scheduled)	4
School or center closed (unscheduled)	5
Other: Q62B:Specify:	6

WRC/MN 2004 Household Child Care Survey: April 2004

Q63A. What usually happens when {child} is sick and cannot go to school or child care? DO NOT READ LIST. (IF NOT CLEAR: What do you do about (his/her) child care?)

Take child to regular non-school arrangement	1
Respondent stays or goes home	2
Spouse/partner stays/goes home	3
R or spouse/partner take child to work	4
Relative watches child	5
Neighbor/friend watches child	6
Child watches self	7
Hire sitter	8
Older child stays home to watch {child}	9
Other: Q63B:Specify:	10

FOR SCHOOL-AGE CHILDREN DURING THE SCHOOL YEAR. IF NOT DURING SCHOOL YEAR (June 17th-Sept. 14th) GO TO Q65.

Q64A. What usually happens when there is no school on a regular weekday, for instance, school holidays and vacations other than summer vacation? What do you do about child care? (**DO NOT READ LIST**)

Take child to regular non-school arrangement	1
Respondent stays or goes home	2
Spouse/partner stays home	3
Take child to work	4
Relative watches child	5
Neighbor/friend watches child	6
Child watches self	7
Hire sitter	8
Older child stays home to watch child	9
Other: Q64B:Specify	10
Volunteered: {Child} not in school	11

Q65. During the **past 12 months**, how many other arrangements, if any, did you use for {child} which lasted for one week or more? By other arrangements we mean those you are **no longer using**.

_ (NUMBER OF ARRANGEMENTS MADE, IF O, GO TO Q68)

Q66A. Other than the arrangement you use most often now, what was the last arrangement you had and used most? (**DO NOT READ LIST**)

R cares for child	1
Husband/wife/partner takes care of child when you are not at home	2
Ex-spouse or partner	3
Grandmother or Grandfather	4
A brother, sister, step-brother or step-sister	5
Relative/other; such as an aunt, uncle or cousin	6
Non-relative, informal care (friend, neighbor, sitter, aupair)	7
Unlicensed, legally registered, family day care	8
Licensed family day care	9
Day care center	10
Nursery school, pre-school, pre-kindergarten	11
Before or after school program	12
Head start	13
Kindergarten, elementary or jr. High school	14
Lessons (art education, performing arts, computer, language)	15
Clubs (boys/girls clubs, scouts, 4h, etc.)	16
Sports, physical education activities	17
Community recreation program, pool, or supervised playground	18
Selfcare (child takes care of him/herself)	19
Other arrangements: Q66B:Specify	20

Q67A. What is the **main** reason that arrangement ended? (DO NOT READ LIST).

IF R VOLUNTEERS THAT THE ARRANGEMENT HAS NOT ENDED THEN ASK... What is the **main** reason this arrangement is no longer the one you use most often?

Provider close	ed/stoppe	d providing care	1
Child exceede	d age of	old program	2
Child reached	age for n	new program	3
Unhappy with	program	n, parent or child	4
Education (wa	anted edu	cational program)	5
Preferred prog	gram beca	ame available	6
Cost (could no	o longer a	afford care/program)	7
	-28-	WRC/MN 2004 Household Child Care Survey	: April 2004

Sibling care saves money during the summer	8
Parent changed job or schedule	9
Parent wanted to stay with children	10
Started having to stay home with other dependents	11
Respondent/child moved	12
Parent stopped working/finished school	13
Seasonal (arrangement was seasonal)	14
School year started/ended	15
Temporary (arrangement was temporary)	16
Culturally appropriate arrangement was wanted	17
Problems with staff/provider turnover	18
Not enough space	19
Eligibility for assistance changed	20
Lost child care subsidy	21
Other: Q67B:Specify	22

Q68A. To get an overall picture of households in our survey, we would like to ask a few questions about you and your household.

What is your relationship to {CHILD}? (DO NOT READ LIST.)

Biological, Step, or Adoprive parent	1
Foster parent	2
Lover/partner of (biological, step, foster, or adoptive) parent	3
Grandparent (incl. great-grandparent)	4
Brother/sister	5
Step-brother or step-sister	6
Half-brother or half-sister	7
Brother-in-law or sister-in-law	8
Other relative (aunt, uncle, cousin, etc.)	9
Child of lover of parent	10
Friend (of child)	11
Other non-relative	12
Other: Q68B:Specify	13

Q69. Besides your children age 12 and younger, please tell me which of the following people live in the same household with you? (CODE YES OR NO FOR EACH.)

a.	A spouse or partner	1	2
b.	One or more children age 13 or older	1	2
c.	Other relatives	1	2
d.	Non-relatives	1	2

Yes

No

Q70A. (ASK ONLY IF YES TO SPOUSE/PARTNER ABOVE.)

You mentioned spouse/partner, what is that person's relationship to {child}?

(DO NOT READ LIST.)

Biological, Step, or Adoptive parent	1
Foster parent	2
Lover/partner of (biological, step, foster, or adoptive) parent	3
Grandparent (incl. great-grandparent)	4
Brother/sister	5
Step-brother or step-sister	6
Half-brother or half-sister	7
Brother-in-law or sister-in-law	8
Other relative (aunt, uncle, cousin, etc.)	9
Child of lover of parent	10
Friend (of child)	11
Other non-relative	12
Other: Q70B:Specify	13

Q71. Including yourself and the children, how many people, altogether, live in your household?

(NUMBER OF PEOPLE)

INTERVIEWER: REPEAT AS NEEDED: Does that include you?

Q72. ASK IF NECESSARY: What is your gender?

Male	1
Female	2
Other	3

Q73. If I may ask, what is your age?

_____ (AGE)

Q74A. What is the highest level of education that you have completed? (DO NOT READ LIST)

Eighth grade or lower	1
Some high school	2
High school graduate or GED	3
Some college (include 2 year or less degree or technical college)	4
College graduate (BA, BS)	5
Post-graduate work or professional school	6
Refused	7
Don't know	8

ONLY ASK Q74B IF R SAID HE/SHE HAD A SPOUSE/PARTNER ON Q69

Q74B. What is the highest level of education that your spouse/partner has completed? (DO NOT READ LIST)

Eighth grade or lower	1
Some high school	2
High school graduate or GED	3
Some college (include 2 year or less degree or technical college)	4
College graduate (BA, BS)	5
Post-graduate work or professional school	6
Refused	7
Don't know	8

Q74C. Have you ever participated in a parent education class, such as ECFE or another program? (ECFE = Early Childhood & Family Education)

1. Yes

2. No

Q75. What is your current marital status? (DO NOT READ LIST)

Married1
Living together in a marriage-like arrangement but not legally married2
Separated
Divorced4
Widowed5
Never married

Q76A. Which one or more of the following describes you? Please answer YES or NO. Are you...

(AS NEEDED: Some people identify as more than one race, so I need to read all the options.)

		Yes	No
a.	Black or African American,	1	2
b.	Asian,	1	2
c.	Hispanic or Latino,	1	2
d.	American Indian	1	2
e.	White or Caucasian, or	1	2
f.	Another race or ethnic group: Q76B:Specify	1	2

Q76C. ASK IF YES TO ASIAN: Are you...

Hmong,	1
Vietnamese,	2
Chinese,	
Japanese, or	4
Another Asian group?	5
-32-	WRC/MN 2004 Household Child Care Survey: April 2004

Q76D. ASK IF YES TO MORE THAN ONE OF 76A (a-f) ABOVE, OTHERS GO TO Q76F: You mentioned more than one racial group. Is there one group in particular that you primarily identify with?

Yes		1
No	(GO TO Q. 76F)	2

Q76E. With which group do primarily identify?

Black or African American	.1
Asian	2
Hispanic or Latino	.3
American Indian	.4
White or Caucasian	.5
Some other race or ethnic group	6

Q76F. Are you from an immigrant or refugee group?

(AS NEEDED: Are you an immigrant?)

- 1. Yes
- 2. No...GO TO Q76G

Q76F1. What group is that?

Q76G. What about for {child}. Which one or more of the following describes {child}? Please answer YES or NO. Is {child}...
(AS NEEDED: Some people identify as more than one race, so I need to read all the options.)

Ye	s No
Black or African American,	2
. Asian,1	2
Hispanic or Latino,1	2
. American Indian1	2
White or Caucasian, or1	2
Other race or ethnic group: Q76H:Specify1	2
	Black or African American,

Q76I. ASK IF YES TO ASIAN: Is {child 1}...

Hmong,	1
Vietnamese,	2
Chinese,	3
Japanese	4
Another Asian group?	5

Q76J. ASK IF YES TO MORE THAN ONE OF 76G (a-f) ABOVE, OTHERS GO TO Q76L: You mentioned more than one racial group. Is there one group in particular that {child} primarily identifies with?

INTERVIEWER: IF CHILD DOES NOT IDENTIFY WITH A GROUP, ASK RESPONDENT WHAT GROUP HE/SHE IDENTIFIES CHILD WITH.

Yes		1
No	(GO TO Q77)	2

Q76K. With which group?

Black or African American	1
Asian	2
Hispanic or Latino	3
American Indian	4
White or Caucasian	5
Some other race or ethnic group	6

Q76L. Is {child} from an immigrant or refugee group?

(AS NEEDED: Is {child} an immigrant?)

1. Yes

2. No...GO TO Q77A

Q76L1. What group is that?

Q77A. What language does your household speak most at home?

English	1
Spanish	2
Hmong	3
Other language: Q77B:Specify	4

Q78A. What is your current zip code?

(ZIP CODE)

Q78B. What county do you live in?

_____ (COUNTY)

Q79. How long have you lived at your current address?

Years1	
Months2	
Years andMonths3	
All my life4	All my l
Less than one month	Less that

Q80. Do you own your home?

Yes1	
No	,

Q81A. Now I'd like some information on what you were doing related to employment and schooling last week, Monday through Sunday.

During most of last week were you... (READ LIST AND CODE YES OR NO FOR EACH.)

		Yes	No
a.	Working for pay at a job	1	2
b.	Holding a job but not at work (i.e. vacation, jury duty, sick)	1	2
c.	Looking for work	1	2
d.	Going to school	1	2
e.	In an unpaid (not-for-credit) job training program	1	2
f.	At home full time (keeping house)	1	2
g.	Unable to work (because of disability)	1	2
h.	Other: Q81B:Specify	1	2

T 7

Yes

No

Q82. (IF YES TO 83 A, B, C, D, E, OR H): What days during last week did you participate in any or all of these activities you just mentioned? (CODE YES OR NO FOR EACH DAY.)

a.	Monday1	2
b.	Tuesday1	2
c.	Wednesday1	2
d.	Thursday1	2
e.	Friday1	2
f.	Saturday1	2
g.	Sunday1	2

ONLY ASK Q83 IF SAID YES TO "WORKING FOR PAY AT JOB, OR HOLDING A JOB BUT NOT **AT WORK" OTHERS GO TO Q84A**

Q83. How many hours do you work in a typical week in all your jobs combined?

Q84A. (ASK FOR WORKING ONLY.): Do you usually work the same schedule every week, or do your hours vary from week to week, such as rotating from days to evenings or nights?

WRC/MN 2004 Household Child Care Survey: April 2004 -36Q84B. (ASK FOR LOOKING FOR WORK ONLY.): When you are looking for work, do you usually do this at the same times of the day and on the same days of the week, or do the hours you spend in this activity vary from week to week, such as sometimes looking for work during the day, and sometimes in the evening and on weekends?

Same hours	1
Varied hours	2

Q85. (ASK Q85 FOR WORKING ONLY.) Where you work, how difficult is it for you to deal with child care problems that arise during working hours? Would you say this is...

Always difficult,	1
Usually,	2
Sometimes,	3
Rarely difficult, or	4
It's never difficult to deal with child care during working hours?	5

REPEAT FOR SPOUSE/PARTNER IF APPLICABLE, OTHERS SKIP TO Q90A

Q86A. Now I'd like some information on what your spouse/partner was doing related to employment and schooling last week, Monday through Sunday.

During most of last week was your spouse/partner... (READ LIST AND CODE YES OR NO FOR EACH.)

 a. Working for pay at a job			Y es	INO
 c. Looking for work	a.	Working for pay at a job	1	2
 d. Going to school	b.	Holding a job but not at work (i.e. vacation, jury duty, sick)	1	2
 e. In an unpaid (not-for-credit) job training program	c.	Looking for work	1	2
f. At home full time (keeping house)	d.	Going to school	1	2
g. Unable to work (because of disability)1	e.	In an unpaid (not-for-credit) job training program	1	2
	f.	At home full time (keeping house)	1	2
h. Other: Q86B:Specify1	g.	Unable to work (because of disability)	1	2
	h.	Other: Q86B:Specify	1	2

X7 - --

NT-

Q87. (IF YES TO 83 A, B, C, D, E, OR H): What days during last week did your spouse/partner participate in any or all of these activities you just mentioned? (CODE YES OR NO FOR EACH DAY.) No

		1 65	INU
a.	Monday	1	2
b.	Tuesday	1	2
c.	Wednesday	1	2
d.	Thursday	1	2
e.	Friday	1	2
f.	Saturday	1	2
g.	Sunday	1	2

X7

ONLY ASK Q88 IF SAID YES TO "WORKING FOR PAY AT JOB, OR HOLDING A JOB BUT NOT **AT WORK" OTHERS GO TO Q89A**

Q88. How many hours does your spouse/partner work in a typical week in all jobs combined?

Q89A. (ASK FOR WORKING ONLY.): Does your spouse/partner usually work the same schedule every week, or do your spouse/partner's hours vary from week to week, such as rotating from days to evenings or nights?

Same schedule and hours	1
Varied hours	2

Q90A. At any time during 2003, did you or anyone in your household have any income from any of the following sources? How about ... (READ LIST, CODE ALL THAT APPLY.)

2
3
4
5

WRC/MN 2004 Household Child Care Survey: April 2004 -38Q91. It would be helpful to know the range of income of all the households we interview. Thinking about your household's total income before taxes from all sources and all members of your household in 2003, did your household receive \$20,000 or more last year or was it less than that?

\$20,000 or more	
Less than \$20,000	2

Q92. Into which of the following categories did the total income, before taxes, from all sources and all members of your household fall in 2003? Stop me when I say the right range.

Under \$5,000	1
\$5,000 to under \$7,500	2
\$7,500 to under \$10,000	3
\$10,000 to under \$12,500	4
\$12,500 to under \$15,000	5
\$15,000 to under \$17,500	6
\$17,500 to under \$20,000	7

Q93. Into which of the following categories did the total income, before taxes, from all sources and all members of your household fall in 2003? Stop me when I say the right range.

20,000 to under \$25,0001
25,000 to under \$30,0002
30,000 to under \$35,000
35,000 to under \$40,000
40,000 to under \$45,0005
45,000 to under \$50,0006
50,000 to under \$75,0007
75,000 to under \$100,0008
100,000 to under \$125,0009
125,000 to under \$150,00010
150,000 or over
-39- WRC/MN 2004 Household Child Care Survey: April 2004

END: We really appreciate your help and your time with this important child care survey. The findings from this survey will be reported on Wilder's Website (<u>www.wilder.org</u>) early next year. Thanks again. Good-bye.

(AS NEEDED: If you have any questions or concerns about the survey please contact Richard Chase at the Wilder Research Center (651-647-4600/1-888-328-2972), or Deb Swenson-Klatt at the Department of Human Services (651-215-0579). Deb can also be contacted via email at (deb.swenson-klatt@state.mn.us).