Home-Based Providers in the NSECE

CCPRC Presentation
October 24, 2012

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Overview of Today’s Presentation

- Motivation
- Dual-frame approach
- Questionnaire
- Data collection techniques
- Analysis implications
Motivation

Difficult to get an accurate picture of home-based provider care in the U.S. for several reasons

- Home-based care
  - Small businesses
  - FFN care
  - Individual Workers (e.g., nannies)
- Licensing /registration laws vary widely by location (state rules, local rules)
- “Listable” provider communities of widely varying size in different communities
Challenges

• Identifying and locating home-based providers of all types
• Creating an instrument to collect information from such a diverse group of caregivers
• Providing flexible options for completing the interview to maximize response rates
Dual-frame Approach

• State-level administrative lists (6,845)
  o Licensed and registered home-based providers
• Identified when initially screening the Household sample (5,243)
  o Home-based providers serving general public, but are not on state lists
  o Family, friends, and neighbors
  o Nannies
Questionnaire

• Use of general language about caregiving
• Two main questionnaire paths
  1. For caregivers who had a prior relationship with children they look after
  2. For caregivers who had no prior relationship with the children they look after
Data Collection Techniques
Household Screening

• Many households no longer eligible at time of interview
  o Roughly 40% of households reversed eligibility
  o Almost ¾ of these screened in by mail

• Main reasons for change in eligibility
  o No longer providing care
    ▪ Time elapsed between screening and interviewing
  o Questions misunderstood by respondents
    ▪ Reported on their own children
    ▪ Did not provide regular care (at least 5 hours a week)
Data Collection Techniques
Interview, Web & Email

- Two Modes
  - In person or on phone with field interviewer
  - Self-administered by web
- About 60% of cases completed with an interviewer
- About 40% completed by web
  - Roughly 10% web completed with only mail prompting
Data Collection Techniques

No address cases

- Cases with no addresses provided
  - Almost 20% of our HB sample from state administrative lists
- Locating work before and during data collection
- About 50% of these cases completed interviews
Data Collection Summary

- Recognize the limitations of lists
  - Some states will not provide addresses
  - Use a dual sampling-frame approach
- High obsolescence rate of about 1/3
- Design questionnaire to adapt to diversity of providers
- Web & Email are important data collection tools
**Analysis Implications**

• For Sampling & Analysis
  ○ On-List vs. identified by household screening

• For analysis
  ○ Receiving market-level $ for caring for unrelated children at least 5 hours per week
    ▪ Arm’s Length Home-Based Providers (ALHBP)
  ○ Not receiving market-level $ for caring for unrelated children at least 5 hours per week
    ▪ Family, Friends & Neighbors Care (FFN)
Analysis Implications

• Characteristics of ALHBP
  o Lists vs. Identified by Household Screening
    ▪ Impacts of Regulation/Registration

• How Do Regulation Affect Mix
  o Announced vs. Unannounced Inspections
  o Stringency of Regulations

• How Do Community Characteristics Affect Mix
  o Low-income, moderate income & high income
  o New immigrant vs. native born communities
Questions?