Child Care Policy Research Consortium Annual Meeting Renaissance Washington, D.C. Hotel April 13–16, 2004

SESSION 7

What do we know about the dynamics of child care selection among low-income families, especially those who use subsidies?

Which families select what forms of care for which children? What factors seem to influence their choices? How do selection factors interact with characteristics of care (such as quality and stability), market structure (such as availability and cost of various care options), characteristics of parents (such as ethnic preferences and demographic patterns), characteristics of children (such as age, disabilities, interests, or skills) and community economic structure? What community-level variations are associated with child care quality, child outcomes, and parent outcomes?

Theme: Families

Facilitator: Shelly Waters Boots, New America Foundation

Discussants: James Elicker, Purdue University

Ajay Chaudry, The New School

Reeva Murphy, Rhode Island Department of Human Services

Scribe: Rose Ribeiro, National Child Care Information Center

Ajay Chaudry Presentation: Children's Care in the Age of Personal Responsibility

His study asked: What are the arrangements low-income working mothers make for their children? Study sample included African American and Latina respondents.

Overall Findings

- Children spend most of their waking time in child care.
- Many families use multiple care arrangements.

Types of Care

- Informal care is the secondary choice for the vast majority of families.
- Family care was the first choice for the vast majority of families.
- The vast majority of families had two or three child care arrangements.

Model for child care choices is divided into supply and demand factors:

- Demand factors:
 - o child (age)
 - o mother (job requirements, resources, attitudes)
 - household (family structure)
- Supply factors:
 - Cost availability
 - o local child care regulations
 - o welfare priorities

Other Findings

- Parents were more likely to use kin care when mothers worked odd hours.
- Mothers in welfare-to-work programs were more likely to use kin care. (Kin care would keep money within the family.)
- There is a limited supply of child care (lack of a particular type of care that is needed in the area).
- Mothers were more likely to use family child care arrangements if they had ties to community-based agencies.
- Kin and informal care have more short time spells, and family care is more consistent across time.
- There was a large amount of instability in child care arrangements. Most primary care was provided in short spells.
- When mothers are working, the most prevalent choices of child care are family and center care.
- Use of subsidies increased the size of time spells for some types of care.

James Elicker Presentation: Low-Income Working Families: Utilization and Quality

Study Sample

- n = 307
- Annual income less than \$35,000
- Not receiving TANF
- Work 20 hours or more per week
- Young children in child care for 15 hours or more per week
- 59 percent African American, 23 percent white

Findings of the Focus Group With Parents

- Need flexible care; rely on kith and kin
- Often managing multiple providers
- Subsidies are essential but not often available
- Transportation is difficult issue
- Worries about safety/quality of child care

Primary Care Setting Used

- 38 percent in licensed child care center
- 24 percent in licensed family care

- Head Start
- Child care ministry (regulated, but not *well* regulated; raised some concerns): 15 percent of all care
- Unlicensed care

There is some relationship between choice and supply in each community. The availability of certain types of child care has an impact on choice.

Findings on Global Quality ECERS-R and FDCRS

- Licensed family child care had lowest quality (mean) in the four communities' studies.
- More children in *licensed* vs. *unlicensed* family care.
- *Center-based* care use is more stable across community
- Family care varies more across communities.

Variation Across Community

• Lake [?] has lowest infant care quality.

Licensed family child care has the lowest responsive interaction with the child.

Reeva Murphy Presentation

Presented research that relied exclusively on administrative data and has some limitations. Studied data on household characteristics and community characteristics (availability of regulated care in the community) from 1998 and 2002.

About the study:

- Study asked how policy changes (in Rhode Island) affect child care choices.
- High reimbursement rate increases affect child care choice; more families used family care instead of center care.
- Rate increases increased availability of center care.
- Rhode Island's child care slot capacity exceeded demand (due to increase in regulated care).
- State does not direct parents to choose providers; parents get portable vouchers and can change providers without consulting anyone.
- All families in the study were participating in child care subsidies.
- All families were single-parent families; more than 80 percent of children receiving subsidies are in single-parent families.

Findings:

- Families tend to make the same child care choice for all their children. (If you choose a center, you will place all of your children in center care.)
- Families with multiple children make very different choices than do families with one child.
- Vast majority of the children are in center care.

- During study period, use of family care increased and use of informal care declined.
- Families who receive cash assistance tend to choose center care more than other families do.
- Age of head of household had an impact for families that had received cash assistance (they used higher quality care).
- More educated parents and families that had previously received cash assistance used higher quality care (center-based care).
- Families with one or two children used center-based child care.

Group Discussion

- Question about Rhode Island study: Do unemployment trends affect choice? *Answer:* Families have to be working to receive subsidies.
- Policy question: How can policies to change parent choice have an impact on the market?
- Elicker study question: How did parents define quality? *Answer:* They were unhappy that their children were watching too much TV and did not have enough educational activities.
- Chaudry study findings: Mothers who worked a lot placed children in center care. Quality concerns: not enough educational activities.
- Discussions about quality were not factors in parents' choice of child care. Cost and availability are more significant factors in the child care choices parents make.
- Shelley Waters Boots' study asked parents if a certain kind of child care was available, would they change the type of care they used.
- Shelley Waters Boots' study confirmed that parents wanted more formal types of care.
- Parents care about quality child care, but they don't have the choices. In some cases, parents fear for the safety of their children in centers. Focus group parents were afraid of center care because of safety issues.
- The biggest problem for parents using subsidies is the bureaucracy.
- Choice: Mothers were making the only arrangement they could find. That is not a choice model; it is a constraint model.
- Flexibility and social support are very important; it helps when employers, family, and child care providers can provide flexibility in terms of hours.