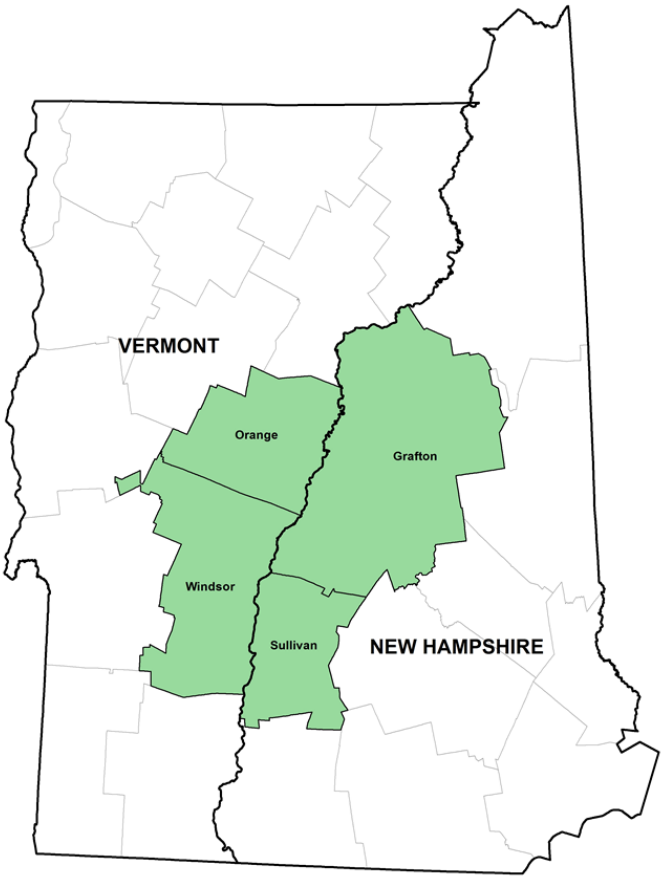
Understanding Early Childhood Education Needs and Opportunities in the Upper Valley

Phase II: Needs and Experiences of Upper Valley Workers



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Purpose and Overview of Report

The survey on which this report is based was designed to better understand the early childhood education needs and opportunities in the Upper Valley of New Hampshire and Vermont. Disseminated among four of the region's largest employers, the survey specifically inquired about the child care use, challenges, and choices of select Upper Valley workers to lend geographic and contextual detail to data from national surveys and state administrative systems.

This report begins with a series of key findings from the survey and a description of the report data and methodology. The body of the report focuses on four key areas: (1) child care need among respondents, (2) their current child care arrangements, (3) experiences with access to child care, and (4) their perceptions of resources about and within the child care system. This report concludes with a summary of findings specific to Hypertherm associates, and a series of conclusions about all respondents and recommendations for future research.

Key Findings

Child care is essential for respondents to this survey, 96 percent of whom said that it was necessary in order for them to work.

The type of care respondents report using varies by their children's ages.

Only half of respondents with infants reported exclusively using licensed care, compared with two-thirds of respondents with preschoolers.

Most respondents (92 percent) pay at least something for child care, and among those who do, the majority (79 percent) pay the full cost out of pocket.

Existing child care options don't necessarily meet families' needs.

More than half (53 percent) of respondents said that their youngest child's current arrangement was not affordable for their family.

More than half said that in the past six months, there was a time that they needed or wanted more child care, but couldn't get it.

Three-fifths of respondents (61 percent) said that they would use drop-in or back-up care if this option were available to them.

Respondents value their informal connections when it comes to locating and selecting a child care provider.

When ranking factors in choosing child care, respondents most often selected "I heard good things about the provider from someone I know" as the most important factor.

Further, more than half of respondents found out about their current provider from a relative, friend, or neighbor.

Providers may be able to do more to educate and act as a resource for families, although those using unlicensed or informal providers may need other sources of information.

Only 27 percent of respondents are at least moderately familiar with the QRIS system.

Only one-third of respondents say that their provider has shared information about family and child resources or services, and among respondents who only use unlicensed care, that share is just 18 percent.

About the Data

Dissemination & Data Collection

Invitations to participate in the survey were extended to those affiliated with four of the region's largest employers (Dartmouth Hitchcock Medical Center, Dartmouth College, Hypertherm, and Alice Peck Day Memorial Hospital),[1] with contact made by the Foundation and its collaborators. All employees received an introductory email and survey link from their Human Resources department, with a single reminder scheduled two weeks after the initial invitation. Data were collected between February 6, 2018 and March 15, 2018. All components of the survey and data collection process were approved by the University of New Hampshire's Institutional Review Board for the Protection of Human Subjects in Research.

Generalizability and "Response Rates"

This survey does not represent a random sample of Upper Valley workers or families. As such, results are not generalizable to populations other than those who participated in this survey. Further, it is difficult to calculate a survey response rate, because while we know how many people were invited to participate in the survey, we do not know what share of those people actually have young children in the household. Based on the estimated size of each employer and the number of participants who identified their employer in the survey, about 5 percent of employees invited to participate actually did so (assuming all employees of each employer were invited to participate).

To provide some context, Census Bureau data suggest that about 8 percent of Upper Valley households contain at least one child under age 6. However, because this represents the share of households (not people) with young children, and because those invited to participate may be more, or less, likely to have children than Upper Valley households overall, this rate is provided as background information and not a target response rate.

Analytic Subpopulation and Survey Completion

While 816 people responded to the survey, not all those responses contain usable data. Table 1 describes the process of identifying usable cases among all responses, and the resulting impact on the analytic subpopulation (i.e., the people for whom results are reported). Respondents were removed if they did not consent to participate in the survey (N=4), and if they consented, but went on to report having no children under age 6 in the household (N=69). Another 20 respondents were removed from analysis because their reports of young children in the household were somehow mismatched with their count of children reported by age.[2] These

[1] Additional large area employers were also invited to participate in this project, but declined to do so. These employers included Sturm Ruger Firearms, Whelen Engineering, Plymouth State University, and Timken Aerospace.

[2] Six of these respondents reported having some children in the household, but did not report their ages, and did not report using any child care. An additional 14 respondents reported having children under 6 but only reported some of their ages (N=4) or reported more children by age than indicated by their total number of children reported.

respondents are excluded for several reasons: (1) because data from these respondents cannot be reliably disaggregated into categories by their children's ages—a key factor in many of the later analyses; (2) because it is unclear whether these they are providing complete reports about their children's care experiences, and (3) because it is unclear to which child items about their "youngest child" refer. Most respondents reported using some kind of child care, although those who do not are still included in the analyses where appropriate (more detail below).

Table 1. Screening Respondents for Analytic Subpopulation

	Total	**Subpopulation Reduction**
All Respondents	816	-
Consented to participate	812	4 (0.5%)
Reported any young children in the household	743	69 (8.5%)
Number of young children reported matches number of children reported by age	723	20 (2.7%)
Has at least one child in non-parental care	630	N/A

A total of 576 respondents identified their employer, as shown in Table 2, below. Assuming that all employees received an invitation to participate, the distribution of survey respondents approximately matches the distribution of those invited to participate. For instance, 10 percent of invited participants were Hypertherm associates, compared with 9 percent of actual respondents.

Table 2. Distribution of Upper Valley Employees and Survey Respondents, by Employer

	Estimated Employees		**Survey Responses**	
	Total	Percent	Total	Percent
Dartmouth-Hitchcock Medical Center	6,900	55.0	342	59.4
Dartmouth College	3,500	28.0	153	26.6
Hypertherm	1,300	10.0	53	9.2
Alice Peck Day Memorial Hospital	500	4.0	27	4.7
TomTom[3]	300	2.0	1	0.2
TOTAL	12,500	100.0	576	100.0

Of the screened respondents (N=723), 92 percent completed the entire survey. Those with incomplete data are not necessarily excluded from the results here, as they do provide some usable data that can be analyzed. There was significant variation in the length of time that it took respondents to complete the survey (likely due to some respondents leaving the incomplete survey open in their browser window), ranging from 20 seconds to 6 days, with a median value of 6 minutes.

To protect participants' privacy, few demographics were collected about respondents. However, respondents were 76 percent female, and 93 percent reported at least one other adult living in the household.

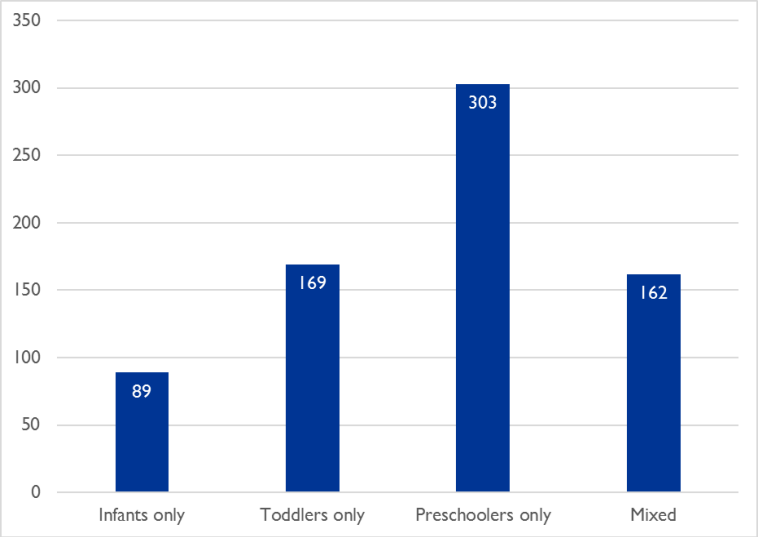
[3] Although TomTom was originally considered as a potentially participating employer, they did not distribute the survey link to their employees in the end. As such, it's unclear how this one TomTom employee learned of the survey, but that person is not excluded from the analyses here.

Child Care Need

As expected, child care is a critical component of Upper Valley workers' lives, and the vast majority of respondents (96 percent) reported that child care is necessary for them to remain in the workforce. Even among those who report using no child care, there is some demand: when asked whether, if "child care options were affordable, easily accessible, and matched well with your family's schedule" they might enroll their child[ren] in care, three-quarters reported being extremely or somewhat likely to do so.

Figure 1 shows the distribution of respondents by their children's age group, and indicates that respondents are most likely to have preschoolers (age 3-5) in the household. Existing research suggests two possibilities for this pattern: first, parents (particularly mothers) of infants are less likely to be in the workforce.[4] Second, it is also possible that Upper Valley families are less likely to have infants than to have older children.[5]

Figure 1. Respondents' Young Children, by Child Age Group Reported



Note: Numbers refer to respondents reporting each family type, not numbers of children in each group, although few respondents (N=64; 80 percent of whom have multiple preschoolers) report having multiple children in a single age group. Infants refer to children under 12 months old; toddlers to children aged 12-35 months old, and preschoolers to children aged 3-5 years old. N=723

[4] See, for example "Employment Characteristics of Families Summary," Economic News Release April 20, 2017. Washington, DC: Bureau of Labor Statistics, U.S. Department of Labor. https://www.bls.gov/news.release/famee.nr0.htm.

[5] Data from New Hampshire and Vermont vital statistics do suggest some declines in the number of births to Upper Valley-residing families between 2011 and 2016, meaning that fewer infants than other-aged children may live there. However, because this survey is among Upper Valley workers—who may or may not actually reside in the region—it is unclear to what degree these data are informative or to what degree these data represent longer-term regional trends.

Current Child Care Arrangements

Type and Structure of Care

Among all respondents, 87 percent reported using some nonparental child care arrangement,[6] and the type of child care used varies by children's ages (see Table 3). For respondents with infants, center-based care is the most popular option, followed by unlicensed relative/non-relative care. For respondents with toddlers, center-based care is also most prevalent, followed by the use of multiple arrangements. Multiple arrangements are the most prevalent option among respondents with preschoolers, followed by center-based care. Interestingly, the share of respondents who report using no child care is highest among those with preschoolers. This is somewhat counter to expectations, given previous research, and it is unclear why this is the case here.

Table 3. Type of Care Used by Child Age

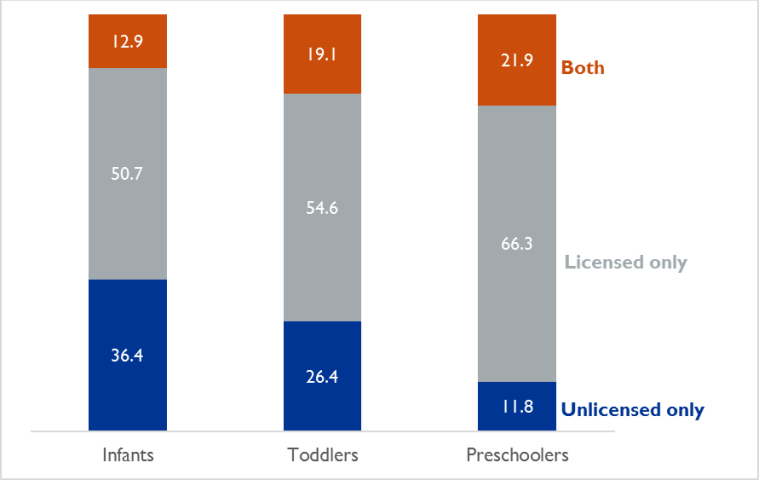
	Infants (N=156)	Toddlers (N=294)	Preschoolers (N=441)
Center	37.8	41.8	27.7
Unlicensed relative/non-relative	27.6	19.0	7.9
Licensed or registered home	7.1	6.8	3.2
Preschool or kindergarten			7.9
Multiple	17.3	24.8	31.5
Other	0	0.7	0.7
None	10.3	6.8	21.1
	100.0	100.0	100.0

Note: Recall that Ns refer to number of respondents reporting having one or more child of that age group, and not necessarily to the number of children in each category. Respondents may appear in more than one category. Respondents who selected multiple types of care for a single age group are included in the "multiple" category, so that any respondent in a specific type of care category reports using only that type of care.

An alternate way of exploring respondents' child care arrangements is by licensing status. Figure 2 reveals a clear pattern that is less visible in Table 3: respondents are more likely to report using only unlicensed care for younger children than older children. Whether this is due to preference—for instance, that parents prefer to leave infants with relatives—or limited numbers of infant-toddler slots in licensed care is unclear.

[6] Determining the share of respondents who use some form of nonparental child care was less straightforward than anticipated. For instance, 9 percent of respondents reported that none of their children under age 5 were cared for by anyone other than a parent. (These respondents were allowed to continue with the survey—asked, for example, whether they *would* use child care if it were available and affordable). Later, more than one-third of those who said that they used no child care went on to report some kind of specific child care arrangement for at least one of their children (e.g., have one infant in a center). As a result, I consider all respondents who report at least one specific child care arrangement to use nonparental child care, regardless of how they answer the more generic "are any of [your] young children regularly cared for by someone other than a parent?"

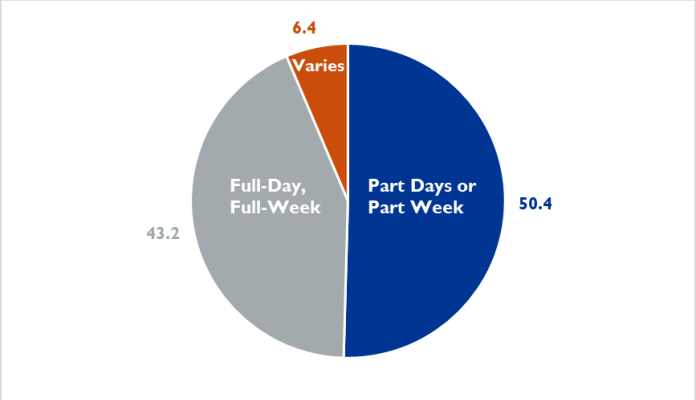
Figure 2. Percent of Respondents Using Licensed Care by Child Age



Note: Among those who use any care (infants N=140; toddlers N=273; preschoolers N=347). This figure disaggregates respondents who report using multiple types of care and assigns them to a licensing status according to the combination of care that they report using. Only one respondent is included in Table 3 but excluded from the figure, given the lack of clarity around that respondent's specific care situation.

Along with variation in the type of care used, respondents' child care schedules also vary significantly. Figure 3 shows that half of respondents report that their youngest child in care attends less than full time, while another 43 percent report full-day, full-week attendance. Six percent of respondents report that their schedules vary. However, because respondents were asked to report their child's attendance in ranges of hours (e.g., 20-29 hours per week), it is possible that even those who didn't explicitly say that their child's schedule varies may indeed have some variation in attendance. While these arrangements may not always reflect ideal schedules for respondents, it is clear that there is at least some demand for less than full time care, alongside traditional full-time options.[7]

Figure 3. Child Care Schedules for Respondents' Youngest Children



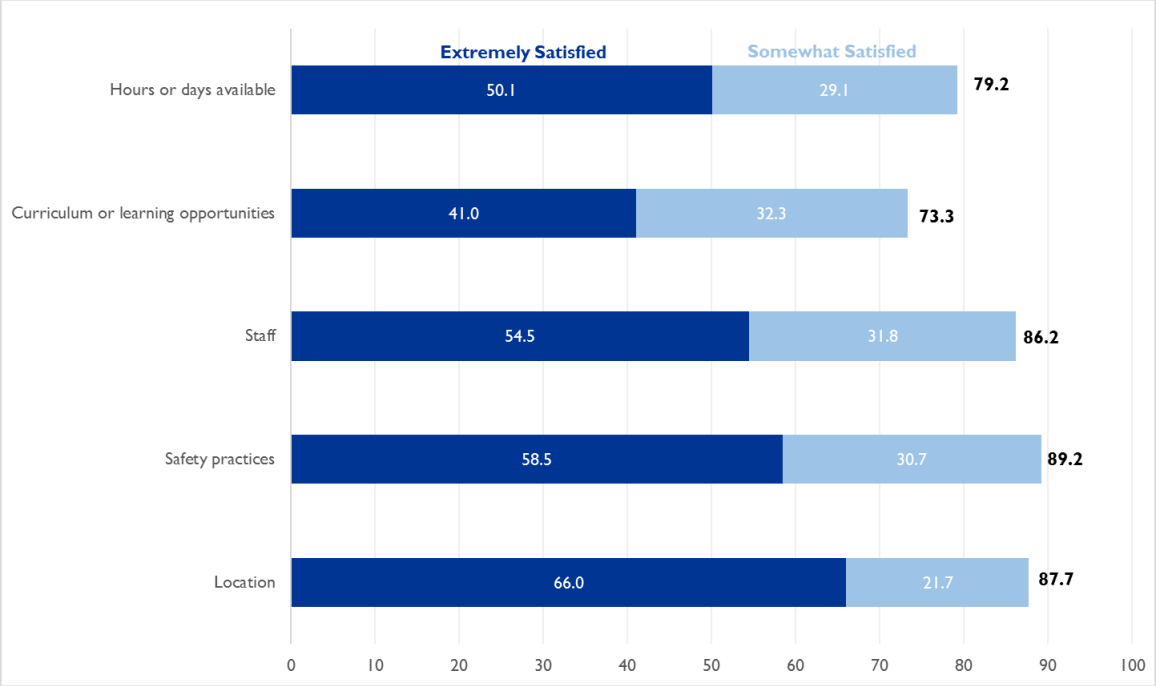
Note: "Full-day, full-week" refers to percent of respondents who report using at least 40 hours of care across at least 5 days per week. Part days or part week includes anyone who reports using fewer days OR fewer hours,

[7] Importantly, the 579 respondents who reported their youngest child's care schedule did so with 37 different combinations of hours and days per week attended. This tremendous variability in care scheduling supports the interpretation that parents may need flexible and varied options to meet their care needs.

including, for example, someone using 30-39 hours across 5 days or someone using 10-19 hours across 7 days. N=570

Figure 4 shows that respondents who use child care are largely satisfied with many dimensions of their arrangement, although a slightly lower share of respondents is satisfied with their provider's curriculum or learning opportunities. This disparity is not driven by a high share that is *dis*satisfied, but rather by the 12 percent of respondents who say they are neither satisfied nor dissatisfied—about double the share of respondents who select this option on other dimensions (average = 5.6 percent). Indeed, it is possible that respondents don't necessarily feel neutral about this dimension, but perhaps don't feel as if they have enough information about their child's learning opportunities, or how those opportunities align with developmentally-appropriate recommendations, to make an assessment. As such, strengthening parents' access to information on this topic might be useful.

Figure 4. Percent Satisfied with Specific Dimensions of Current Care Arrangement



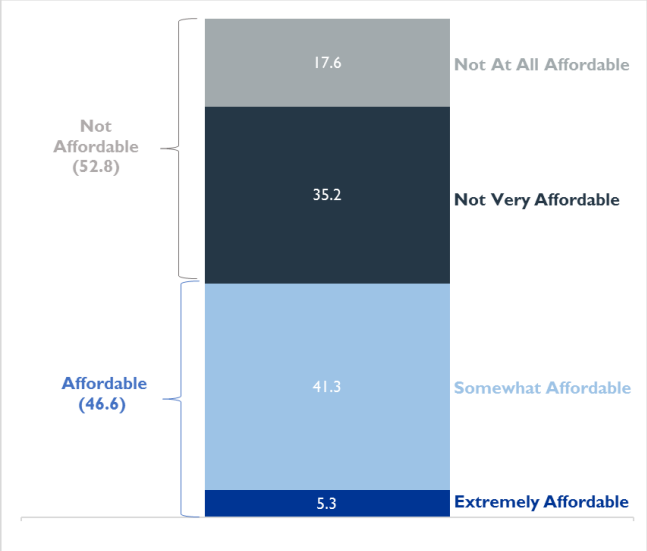
Note: N=571

Paying for Care

The vast majority of respondents (92 percent) pay at least something for their child care, and of those who pay, 79 percent pay the full cost out of pocket. An additional 12 percent pay on a sliding scale, and just 4 percent report using a subsidy. Among the 8 percent of respondents who pay nothing for care, the most common reason is because they use a provider—usually a family member—who doesn't charge for care.

Of the respondents who pay for care, there is disagreement in whether that care is affordable. Figure 5 shows that 53 percent of respondents say that their youngest child's care is either not very, or not at all, affordable.

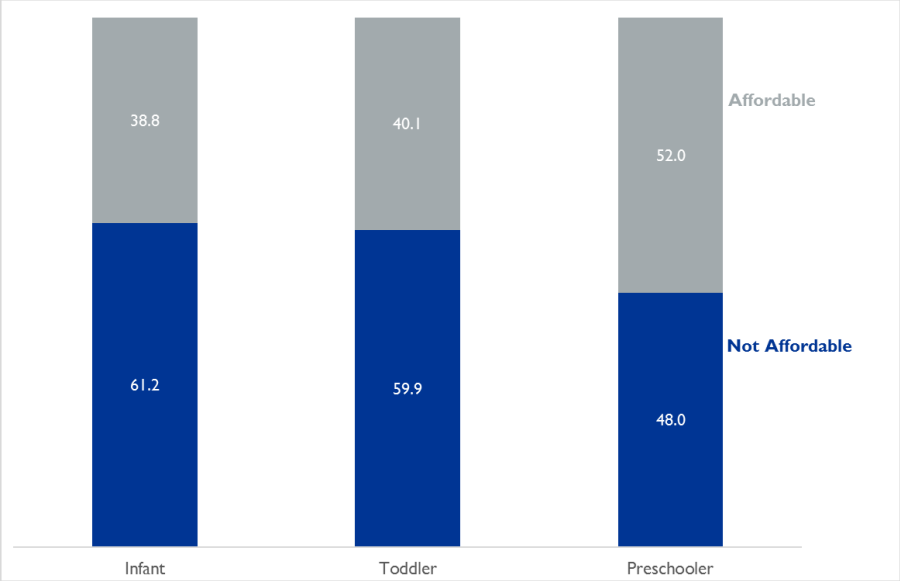
Figure 5. Affordability of Care for Youngest Child



Note: Percent; N=528 respondents who report paying at least something for child care

As might be expected, given previous research on child care costs, perceived affordability of care varies by respondents' children's ages. Figure 6 shows that about 60 percent of respondents whose youngest child in care is an infant or a toddler report care as not affordable, while those with only preschoolers are more likely to find care affordable.

Figure 6. Affordability of Care for Youngest by Age of Respondents' Youngest Child



Note: Percent; N=525 respondents who report paying at least something for child care

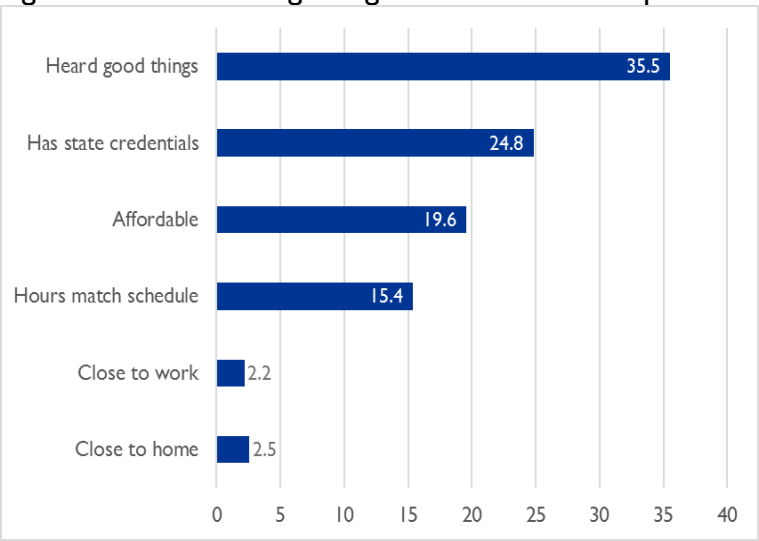
Finally, results also demonstrate that affordability varies according to use of licensed care: 65 percent of respondents who do not use licensed care said that their current child care arrangement was affordable, compared with 44 percent of those who have at least one child in licensed care (not shown). That unlicensed care may be a more affordable option for families is

an important finding, given that little existing data has been able to quantify the use and characteristics of unlicensed care in the Upper Valley.

Choosing a Child Care Provider

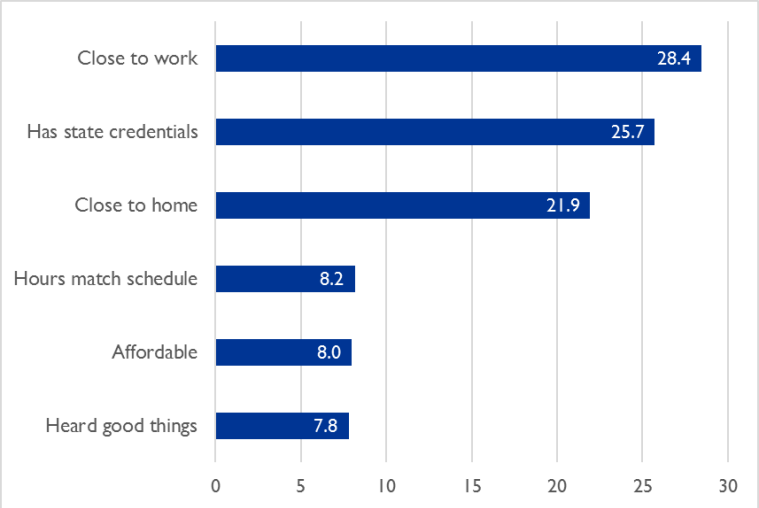
Respondents were asked to rank a list of six factors in order of importance to them when choosing a child care provider. Figure 7 shows the share of respondents who rank each factor as the most important, while Figure 8 shows the share ranking each factor as the least important.

Figure 7. Percent Designating Factor As "Most Important" When Choosing a Provider



Note: N=552

Figure 8. Percent Designating Factor As "Least Important" When Choosing a Provider



Note: N=552

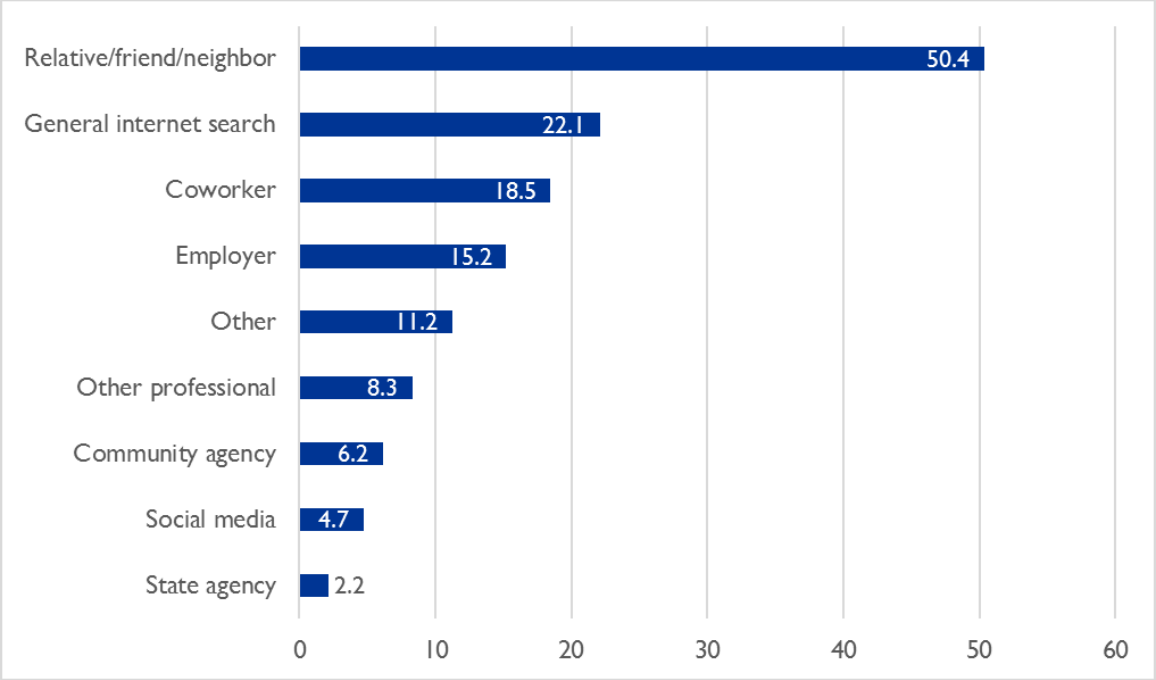
Together, Figures 7 and 8 show that hearing good things about a provider from someone the respondent knows is uniformly important to respondents: it's ranked as the most important

factor by more than one-third of respondents, and has the lowest share of respondents who rank it as the least important factor. Having state credentials, on the other hand, is of mixed importance, as one-quarter of respondents rank it as their most important factor and another one-quarter rank it as their least important. A provider being close to work and home are of fairly low importance to respondents, at least when compared with the other factors explored here.

In addition to the six factors in Figure 7 and 8, respondents were given the opportunity to explain "other" factors that were important to them when selecting a provider; 234 respondents did so. While space precludes a full exploration of all text responses, some of the most important factors identified by respondents were staff quality and child-staff ratio, flexibility to accommodate varying work schedules, child and facility safety, consistency in caregivers, and rich, developmentally-appropriate curriculum. As one parent summarized, "I just want a safe place to leave my daughter for the day. A place where she will have fun, be exposed to new experiences, but be safe, loved, protected in [a] secure welcoming environment." It is also clear from the text responses that some respondents are frustrated with availability and affordability of care, and that selecting a provider based on their child care ideals may be completely secondary to finding a slot that is available, affordable, and matches with their schedule. One parent succinctly explained, "Unfortunately all other factors are secondary to being able to afford ANY child care."

Finally, given the complexity of choosing a child care arrangement, it is of interest to determine how respondents learn about their providers. As shown in Figure 9, half of respondents (50 percent) identified their current provider through an informal source such as a relative, friend, or neighbor. Conversely, very few respondents had learned of their provider through a community or state agency (6 and 2 percent, respectively). These disparities are telling in several ways: first, informal, word-of-mouth communication appears to be the most valuable source of information. Second, it's not clear whether learning about providers from informal sources is by choice—because validation from family or friends is especially meaningful—or because the availability or quality of information from other sources is inadequate or overwhelming. Given findings from Figure 7, above, on the importance of hearing good things about a provider from someone known to the respondent, it is likely that the former at least plays a role.

Figure 9. "How did you find out about your child care provider?"

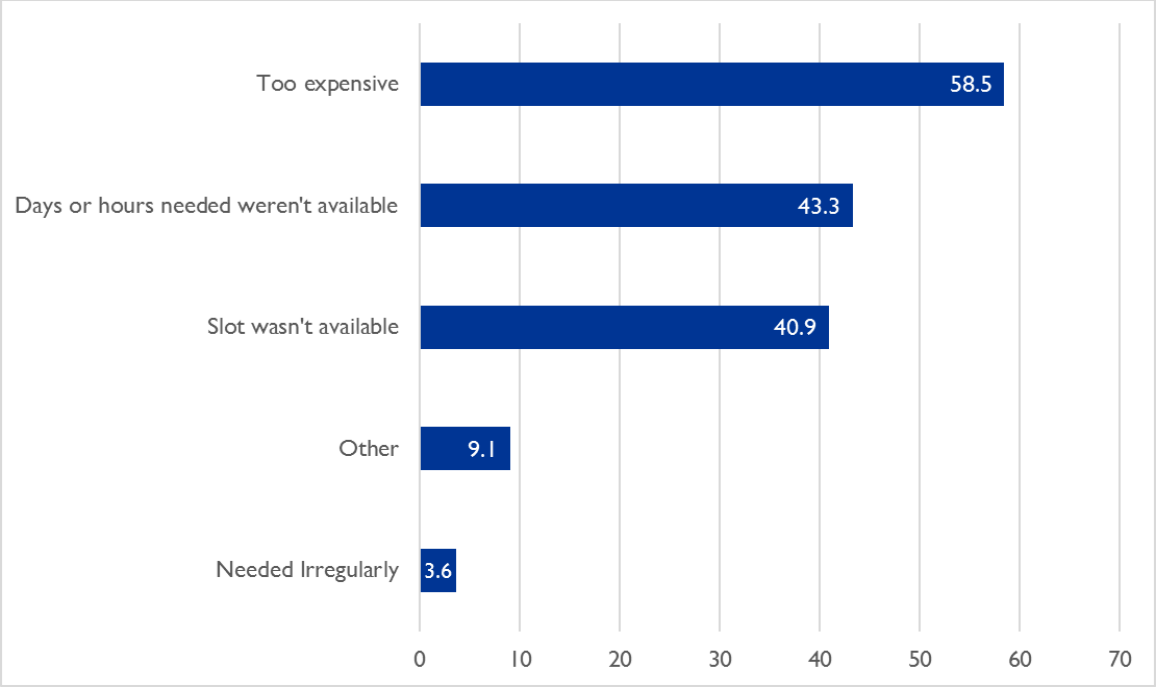


Note: Percentages indicate the share of respondents who selected a given option; respondents could select more than one option, so percentages do not sum to 100. "Other professional" includes, for example, social worker, doctor, or teacher. N=552

Child Care Access

While Figure 4 showed that respondents are usually satisfied with many dimensions of their child care experience, this doesn't necessarily mean that their experiences of access to child care have been uniformly positive. For example, 55 percent of all respondents said that there was "a time in the last six months that [they] needed or wanted more child care but could not get it." Among these respondents, the challenges in obtaining care were plentiful and varied, as shown in Figure 10, but the most frequent barrier was cost (59 percent). Importantly, 37 percent of respondents selected more than one of the below options, suggesting that accessing care may be difficult in more ways than one.

Figure 10. Reasons for Not Enrolling in More Care When Needed/Wanted

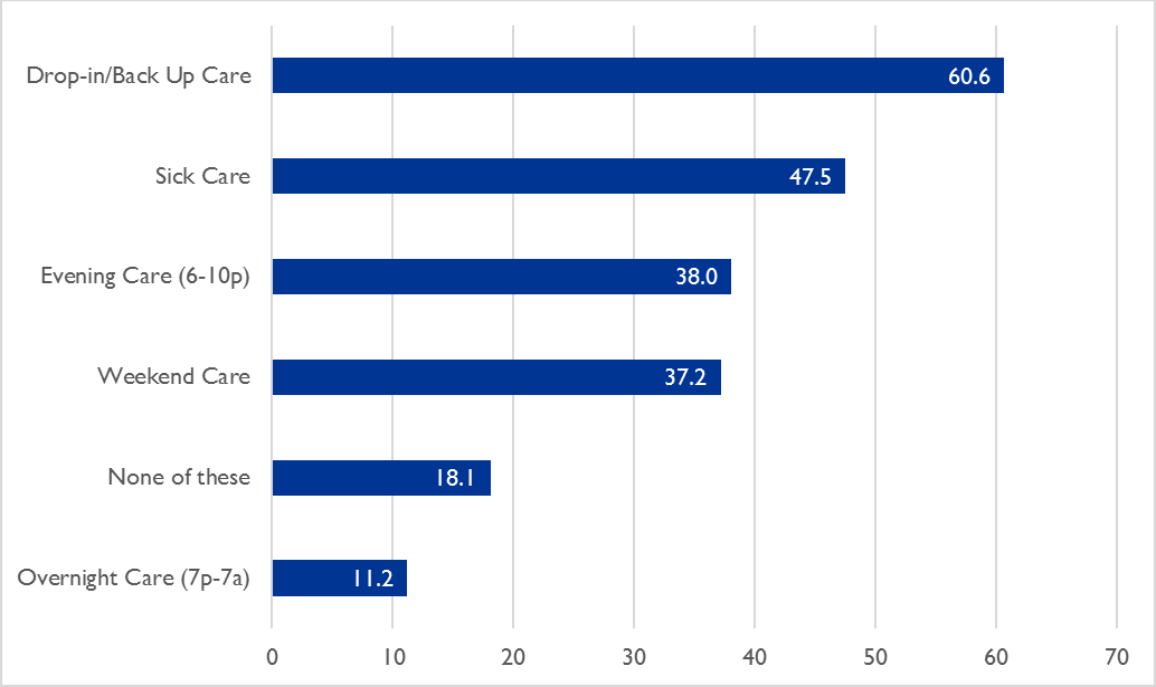


Note: N=330 respondents who reported needing more care. Totals do not sum to 100, as respondents could select all options that applied.

Respondents were also asked whether they would use a variety of nonstandard child care forms if available (Figure 11). These results indicate that drop-in or back-up care is among the most highly sought-after option, with 61 percent of respondents saying they would use this type. Sick care was also a popular option,[8] and just 18 percent of respondents said they wouldn't use any of these nonstandard care types.

[8] Sick care might be interpreted by respondents as care needed for a child who is too sick to attend their usual arrangement or who is unable to return to care due to provider policy (e.g., must be on antibiotics or fever-free for a certain number of days or hours before returning) *or* as care needed when a home-based or relative provider is sick and unexpectedly cannot provide care.

Figure 11. Percent of Respondents Who Would Use Nonstandard Care Options if Available

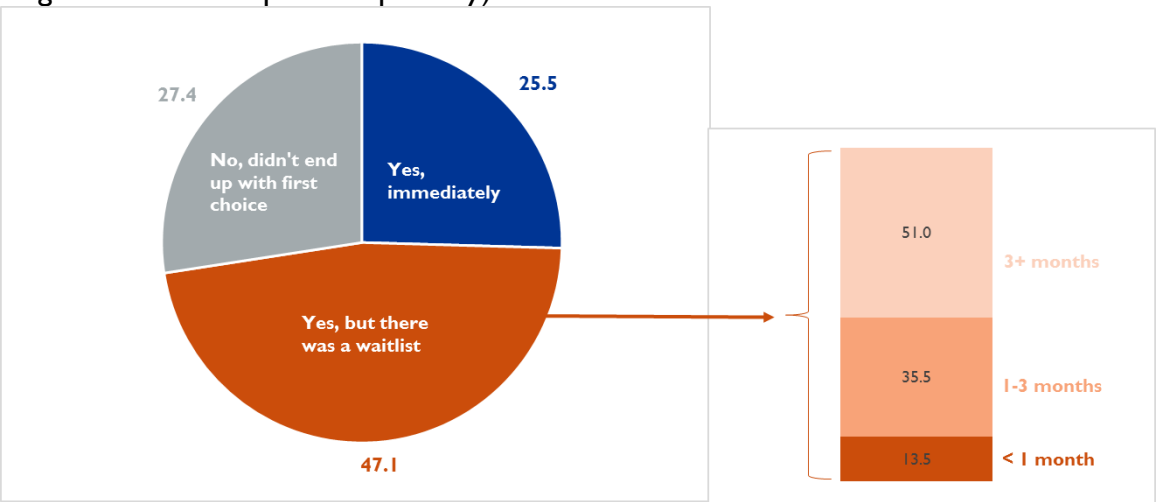


Note: Percentages indicate the share of respondents who selected a given option; respondents could select more than one option, so do not sum to 100. N=592

When asked to reflect on their most recent experience enrolling their child in care, respondents indicated that the process was not generally easy. In fact, 61 percent of respondents said the process was somewhat (40 percent) or extremely (21 percent) difficult, while just over a quarter said it was somewhat or extremely easy (19 and 8 percent, respectively).

Reflective of this process, only one quarter of respondents were able to immediately enroll their child in their first choice of care, as shown in Figure 12.

Figure 12. Percent of Respondents Able to Enroll in their First Choice of Care Last Time (with length of wait list depicted separately)



Note: N=554 for pie chart; N=259 for bar graph (all but 2 respondents who were on a waitlist)

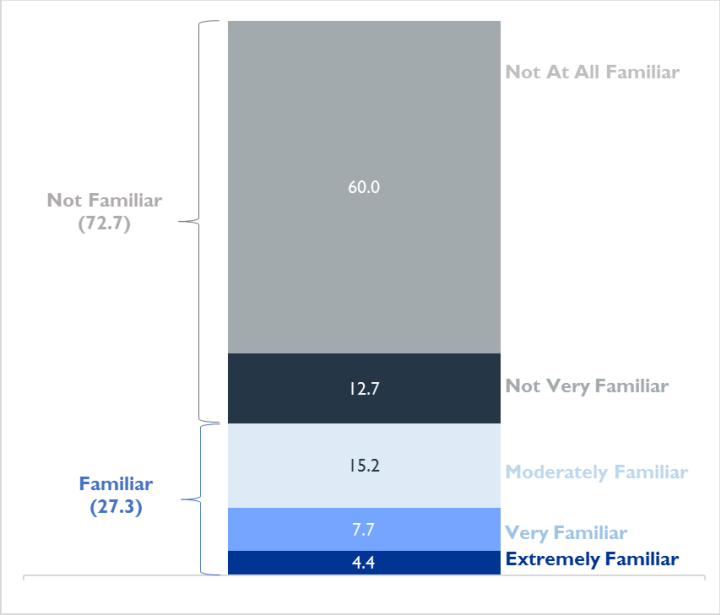
Additional analyses suggest that respondents with young children of all ages faced challenges in obtaining their first choice of care; that is, parents of younger children were not more likely to say that they did not obtain their first choice. However, there is a relationship between obtaining one's first choice and whether a respondent uses licensed care. As might be expected, respondents who use licensed care for their children (of all ages) are more likely to experience a wait list than were respondents who use unlicensed care. Further, respondents who use unlicensed care are more likely to report that they didn't end up with their first choice than those who use licensed care (41 percent versus 25 percent; not shown). While not conclusive, this is consistent with the possibility that parents' first choices of care may be more formal, licensed care.

Among those who didn't end up with their first choice (that is, those from the gray portion of the pie chart in Figure 12), the most common reason was because a spot never opened (63 percent of respondents; not shown). As a follow up, respondents were also asked "what did you do when you didn't get your first choice of child care?" Results suggest that options for responding to child care challenges may be constrained by family economics. Fewer than one in ten respondents took leave or got a different job when they didn't get their first choice of care, although 13 percent reduced their work hours. The most common response was simply to settle for a less favorable care arrangement (76 percent) or to pay more than they wanted to for the available arrangement (24 percent) (note that respondents could select all options that applied).

Resources About & Within the Child Care System

One of the most important child care quality assessment tools at parents' disposal is each state's Quality Resource Information System. However, very few respondents reported familiarity with QRIS, even when referenced by its state-specific names (STARS in Vermont and "Licensed Plus" status in New Hampshire). As shown in Figure 13, a full 60 percent of respondents reported being "not at all familiar" with QRIS.

Figure 13. Percent Reporting Familiarity with Quality Resource Information System (QRIS)

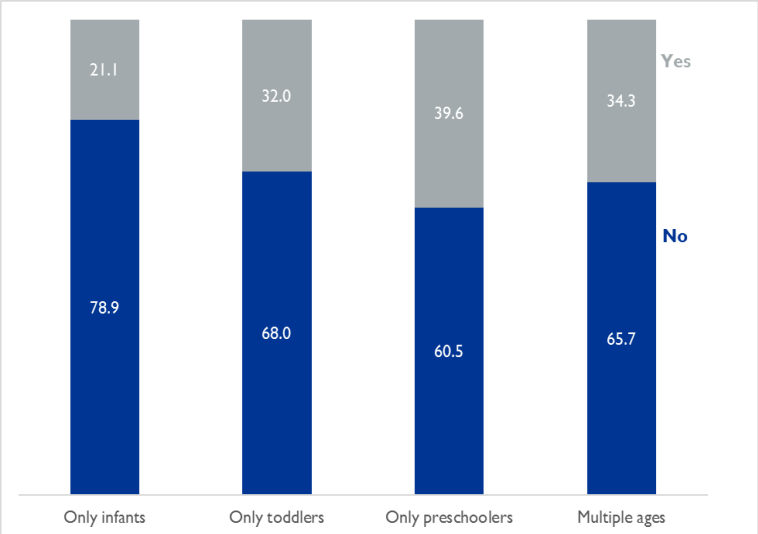


Note: N=585

Perhaps unsurprisingly, the share of respondents who are not at all familiar with QRIS is markedly higher among those who do not use licensed care (86 percent; not shown), although more than half of those who have at least one child in licensed care are not at all familiar with QRIS either (54 percent; not shown). With such a high share of parents unfamiliar with the system, it is possible that the state or other nonprofit agencies might better serve families as a resource by at least disseminating some materials to increase familiarity with the system's existence for parents who are interested in learning more.

Beyond information about assessing child care quality, the survey also inquired about information families might obtain about supporting themselves and their children. Respondents with a child in care were asked whether their provider has ever shared information with them about resources or services for themselves, their children, or their families: just 34 percent of respondents said yes. As with familiarity with QRIS, responses vary according to use of licensed care, and among those who only use unlicensed care, just 18 percent reported that their provider had shared information (versus 37 percent using some licensed care). In addition, as shown in Figure 14, there is a relationship between the age of respondents' children in care and whether a provider has ever shared information, at 21 percent among those who only have infants in care versus 40 percent among those with only preschoolers. While difficult to discern precisely, this may be due to the different types of care used by respondents with infants versus those with older children (specifically, that respondents with infants are less likely to use licensed care than are respondents with older children).

Figure 14. Whether Provider Has Ever Shared Information on Resources or Services, by Age of Child in Care



Note: Among those with at least one child in care. N=549

Spotlight on Hypertherm

As shown in the earlier Table 2, Hypertherm associates represent about 10 percent of those employed by one of the participating employers, and comprise 9 percent (N=53) of survey respondents who reported their employer. Results from Hypertherm associates specifically did not vary substantially from results derived from the entire set of respondents, but are detailed in this section to provide easy access to Hypertherm-specific numbers.

Child Care Use among Hypertherm Associates

First, the vast majority of Hypertherm respondents identified child care as necessary in order for them to remain in the workforce (93 percent, versus 96 percent of all respondents).[9] More than half of Hypertherm respondents (52 percent) have only preschoolers in care, a share that is higher than among all respondents (39 percent). However, the share of Hypertherm respondents using licensed care only for their children is similar to that of all survey respondents, at just over 80 percent.

Child Care Access among Hypertherm Associates

More than 80 percent of Hypertherm respondents who use child care are happy with that arrangement's staff, location, and safety practices. However, mirroring the pattern among all respondents, a lower share of Hypertherm respondents reported being satisfied with their

[9] While possibly of interest, these results do not have the capacity to estimate the percent of associates who use any child care. By design, the survey sought to identify those who had at least one young child in care, rather than to assess the share of all responding parents who use any care. Correspondingly, those who use no child care (and identified themselves as unlikely to use any at all) were directed to the end of the survey, and were not directed to the block of survey items that included identifying one's employer. As such, calculating a share of Hypertherm respondents who use child care is likely inaccurate.

arrangement's curriculum or learning opportunities (69 percent). While these measures indicate that many features of care are satisfactory, other dimensions—including access and affordability—are more challenging. For instance, 50 percent of Hypertherm respondents said that their youngest child's care arrangement was not very, or not at all, affordable for their family. This is similar to all respondents, although a higher share of Hypertherm respondents report paying the full cost of care out of pocket than among all respondents (96 percent versus 79 percent overall). As further evidence that existing systems don't meet Hypertherm respondents' needs completely, 62 percent said their most recent experience finding and enrolling in care was somewhat or extremely difficult, and more than half reported needing or wanting more child care than they were able to get at some point in the past six months.

Choosing a Child Care Provider among Hypertherm Associates

As with respondents more broadly, Hypertherm respondents varied in identifying the most important factor when choosing a child care arrangement. While a high share selected "heard good things about the provider" as the most important factor, an equally high share selected "provider has state credentials" as most important. A provider being close to home or close to work were equally deemed least important among Hypertherm respondents. The 20 respondents who described additional factors that influenced their selection of a provider mentioned the importance of quality staff; a trustworthy, structured environment; safety; affordability; and accommodation for siblings.

Conclusions

Results from this survey serve to fill some important gaps in knowledge of the early childhood education and care landscape in the Upper Valley. For example, data presented in the first phase of this project[10] described the social and economic landscape of the Upper Valley using data from the Census and other large surveys, but was unable to speak to child care experiences specifically. Data from the States of New Hampshire and Vermont provided important information about the limited slots and high costs of licensed child care in the Upper Valley, especially for very young children, but could not shed light on the extent to which parents turn to unlicensed care as an alternative. This survey fills both of those gaps by providing detail on Upper Valley-specific child care experiences and by not limiting respondents to users of licensed care only.

The data collected here lend support to many of the trends identified in existing research. For instance, respondents deem child care as essential to their ability to remain in the workforce, and seek care for even their very young children. Respondents use a variety of types of care for their children—varying by children's age, and likely too by family preference and economics—and particularly among older children, may be patching together multiple forms of care. That one-third of respondents with infants in care use only unlicensed child care helps to explain how some of the mismatch between potential child care need and licensed slots available identified in the earlier research plays out. However, this finding also raises questions about

[10] Carson, Jessica A. "Understanding Early Childhood Education Needs and Opportunities in the Upper Valley." *White paper prepared for The Couch Family Foundation.* November 30, 2017.

parental preference for informal sources of care in early infancy. Further, this finding also highlights that materials that might be typically disseminated through licensed providers—on infant developmental milestones, for instance—may not be reaching all parents who could benefit from this information.

Regarding access, findings here also coincide with much of the existing research. For instance, child care is often unaffordable for respondents, particularly in terms of care that is licensed or dedicated to the youngest children. Respondents regularly reported not being able to access their first choice of child care, experiencing long wait lists when trying to access their first choice, and that they would use more care than they have, if they could afford it. Critically, these data underscore the importance of child care *options* for parents, including flexible, varied, or nontraditional schedules that match with respondents' working lives. Key gaps exist in current child care offerings, with drop-in or back-up care sorely missing to provide child care coverage consistency for respondents when children or providers are ill, schools are on holiday, or work schedules change at the last minute.

In terms of parental decision-making, these data suggest that quality and safety of child care are critical to respondents, even if they are not using formal tools (like QRIS ratings) to assess these dimensions of care. Respondents rely on their informal networks for learning about child care options, assessing its quality, and in some cases, to provide the care itself. Determining how to ensure parents can access the information they need to make key child care decisions—including how to balance the quality they value with the realistic constraints of cost—is likely a challenge moving forward.

While this work fills key gaps in existing knowledge, there is still much that is unknown about Upper Valley families' needs. Future research might explore the possible emergence and implications of the preference for relative care among the youngest children, how parents assess quality of child care outside of formal QRIS ratings, and how they balance preference for quality care with the constraints of cost. Further, while early care and education is a particularly critical developmental period, it is important to recall that many of these families likely also have older children for whom child care is a challenge. In fact, Census data show that just 21 percent of Upper Valley households with children only have young children: 17 percent have a child under 6 and at least one more over age 6, and 62 percent have only children aged 6 to 17.[11] Particularly when children's school hours do not align with parental work hours, parents may struggle to "patch" together child care, with resulting strains and costs having implications for all family members, including the youngest.

Finally, although this and the previous research on the region have been informative about family needs and practices, there are still considerable gaps in understanding the child care landscape from a provider perspective. Future work on this front might consider collecting data from providers about how philanthropic, community, and state groups could better support their missions; identify specific challenges to providing care in the Upper Valley; or highlight challenges for families from the provider perspective.

[11] Author's analysis of American Community Survey data, 2016 5-year; Table S1101.

Appendix. Upper Valley Early Childhood Education: Full Survey

Start of Block: Consent

Q1 *Please read on if you live with any children age 5 or younger (even part of the time).*

Dear Upper Valley employee,
As a parent or guardian of young children working for one of the Upper Valley's largest employers, you are eligible to participate in a one-time survey from the University of New Hampshire. This study is being conducted with the Couch Family Foundation to better understand families' experiences with child care, how they make decisions about child care arrangements, and ways that families could be better supported in meeting their child care needs.

The survey is short and should take about 10 minutes to complete. We are surveying Upper Valley employees who (1) work for one of the region's largest employers, and (2) live with at least one child age 5 or younger. We estimate that about 1,000 workers will respond, but our goal is to hear from as people many as possible.

You must be at least 18 years old to participate. By completing this survey, you are consenting to participate in this research. Although we hope that you will answer every question, you are free to skip any questions. Your participation is voluntary, and you may stop participating at any time.

Participation in this study is expected to present minimal risk to you. And while there are no direct benefits to you for participation, more broadly, and over the longer term, working parents in the Upper Valley may benefit from the Foundation's increased understanding of the issues facing early childhood care and education and their resulting strategic investments to support working parents.

Data from this survey will be used in a paper for the Couch Family Foundation, but might also be used in reports or presentations from the university. Your responses will be kept confidential to the extent possible when sending information over the internet. Survey data will only be analyzed and reported in aggregated ways that will not reveal your identity.

Thank you in advance for your participation. If you have questions about the research, please feel free to contact Jess Carson at the Carsey School of Public Policy at UNH, at 603-862-3215 or Jessica.carson@unh.edu. If you have questions about your rights as a research subject, you may contact Dr. Julie Simpson in UNH Research Integrity Services at 603-862-2003 or Julie.Simpson@unh.edu to discuss them. By clicking "I Agree" you are agreeing to participate in this study.

Jessica A. Carson, Ph.D.
Research Assistant Professor of Public Policy
Carsey School of Public Policy
University of New Hampshire

Q2 I agree / do not agree to participate in this study.

- ○ I agree
- ○ I do not agree

Skip To: End of Survey If I agree / do not agree to participate in this study. = I do not agree

End of Block: Consent

Start of Block: Screening & child care needs

Q3 How many children aged **5 years or younger** currently live with you?

(Include children that live with you even part of the time)

- ○ None
- ○ 1
- ○ 2
- ○ 3
- ○ 4
- ○ 5+

Skip To: End of Survey If How many children aged 5 years or younger currently live with you? = None

Q4 Please indicate the number and ages of young children who live with you.

	Number of children		
	0	1	2+
Less than 12 months old	○	○	○
12-35 months old	○	○	○
3-5 years old	○	○	○

Skip To: End of Survey If Please indicate the number and ages of young children who live with you. = Less than 12 months old =0 & 12-35 months old =0 & 3-5 years old = 0

Q5 Are any of those young children regularly cared for by someone other than a parent? (By regularly, we mean five hours a week or more).

- ○ Yes
- ○ No

Skip To: Q6 If Are any of those young children regularly cared for by someone other than a parent? = No
Skip To: Q7 If Are any of those young children regularly cared for by someone other than a parent? = Yes

Display This Question:
If Are any of those young children regularly cared for by someone other than a parent? = No

Q6 If child care options were affordable, easily accessible, and matched well with your family's schedule, how likely would you be to have someone other than a parent regularly care for any of your young children?

- ○ Extremely likely
- ○ Somewhat likely
- ○ Neither likely nor unlikely
- ○ Somewhat unlikely
- ○ Extremely unlikely

Skip To: End of Survey If If child care options were affordable, easily accessible, and …= Extremely unlikely
Skip To: End of Survey If If child care options were affordable, easily accessible, and... = Somewhat unlikely

Display This Question:
If Please indicate the number and ages of young children who live with you: Number of children: Less than 12 months old =[1] or [2+]

Q7 Please select the number of children under 12 months who live with you and participate in each kind of child care.

	0	1	2+
A child care center or day care	○	○	○
A relative who is not a licensed/registered provider	○	○	○
A non-relative (ex., a neighbor, nanny, or babysitter) who is not a licensed/registered provider	○	○	○
A licensed or registered family- or home-based provider	○	○	○
Early Head Start	○	○	○
Don't know	○	○	○
Other (please specify)	○	○	○

Display This Question:
If Please indicate the number and ages of young children who live with you: Number of children = 12-35 months old =[1] or [2+]

Q8 Please select the number of children aged 12-35 months who live with you and participate in each kind of child care.

	0	1	2+
A child care center or day care	○	○	○
A relative who is not a licensed/registered provider	○	○	○
A non-relative (ex., a neighbor, nanny, or babysitter) who is not a licensed/registered provider	○	○	○
A licensed or registered family- or home-based provider	○	○	○
Early Head Star	○	○	○
Don't know	○	○	○
Other (please specify)	○	○	○

Display This Question:

If Please indicate the number and ages of young children who live with you.: Number of children = 3-5 years old= [1] or [2+]

Q9 Do you have any children aged 3-5 who are in any child care arrangement OTHER THAN full day kindergarten?

(Select "Yes" if child attends part-day kindergarten, has a regular babysitter, etc.)

- ○ Yes
- ○ No

Skip To: End of Survey If Do you have any children aged 3-5 who are in any child care arrangement OTHER THAN full day kinde... = No

Display This Question:

If Please indicate the number and ages of young children who live with you: Number of children = 3-5 years old= [1] or [2+]

Q10 Please select the number of children aged 3-5 who live with you and participate in each kind of child care.

	0	1	2+
A child care center or day care	○	○	○
A relative who is not a licensed/registered provider	○	○	○
A non-relative (ex., a neighbor, nanny, or babysitter) who is not a licensed/registered provider	○	○	○
A licensed or registered family- or home-based provider	○	○	○
Head Start	○	○	○
Public preschool	○	○	○
Part day kindergarten	○	○	○
Full day kindergarten	○	○	○
Other (please specify)	○	○	○

End of Block: Screening & child care needs

Start of Block: Child care needs (2/2)

Display This Question:

If Are any of those young children regularly cared for by someone other than a parent? = Yes

Q11 Thinking about your youngest child who is in child care: how many days per week does that child usually participate in care?

- ○ 1
- ○ 2
- ○ 3
- ○ 4
- ○ 5
- ○ 6
- ○ 7
- ○ It varies (please describe) _____

Display This Question:
If Are any of those young children regularly cared for by someone other than a parent? = Yes

Q12 Still thinking about your youngest child who is in child care: how many hours per week does that child usually participate in care?

- ○ Less than 10
- ○ 10-19
- ○ 20-29
- ○ 30-39
- ○ 40-49
- ○ 50 or more
- ○ It varies (please describe) _____

Display This Question:
If Are any of those young children regularly cared for by someone other than a parent? = Yes

Q13 Still thinking about your youngest child who is in care, how satisfied are you with that care arrangement's...

	Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Don't know
Location?	○	○	○	○	○	○
Safety practices?	○	○	○	○	○	○
Staff?	○	○	○	○	○	○
Curriculum or learning opportunities?	○	○	○	○	○	○
Hours or days available?	○	○	○	○	○	○

Display This Question:
If Are any of those young children regularly cared for by someone other than a parent?= Yes

Q14 Do you pay for child care?

(Select "Yes" if you share the cost with other adults who live with you).

- ○ Yes, I/we pay all or part of the cost
- ○ No

Display This Question:
If Do you pay for child care? = Yes, I/we pay all or part of the cost

Q15 Which of the following best describes how you pay for child care? (Please select all that apply).

- ☐ I/we pay for the full cost out of pocket
- ☐ I/we pay according to a sliding scale
- ☐ I/we pay a co-pay after using a child care subsidy
- ☐ My employer pays for part of the cost
- ☐ A friend or relative who does not live with me pays for part of the cost
- ☐ Other _____

Display This Question:
If Do you pay for child care?= No

Q16 Which of the following options best describes the reason that you don't pay for child care?

- ○ The provider I use doesn't charge (ex., Head Start or an unpaid relative)
- ○ My employer pays all of the cost
- ○ The public-school system pays for the program
- ○ A friend or relative who does not live with me pays for it
- ○ Other _____

Display This Question:
If Do you pay for child care? = Yes, I/we pay all or part of the cost

Q17 How would you describe the affordability of your child care arrangement for your family?

- ○ Extremely affordable
- ○ Somewhat affordable
- ○ Not very affordable
- ○ Not affordable at all
- ○ No opinion or not sure

Q18 Was there a time in the last six months that you needed or wanted more child care, but could not get it?

- ○ Yes
- ○ No

Display This Question:
If Was there a time in the last six months that you needed or wanted more child care, but could not... = Yes

Q19 What prevented you from enrolling your child or children in more hours or days of child care per week? (Please select all that apply).

- ☐ The provider didn't offer additional days/hours.
- ☐ It was too expensive.
- ☐ It was difficult to get a slot.
- ☐ Other _____

Q20 Is child care necessary for you to remain in the workforce?

- ○ Yes
- ○ No

End of Block: Child care needs (2/2)

Start of Block: Child Care Ideals

Q21 The below list includes some factors that might matter when choosing a child care arrangement. Please rank each item in order of importance to you (where 1 is the most important).

_____ Arrangement is affordable.
_____ Child care location is a short distance from my home.
_____ Child care location is a short distance from my work.
_____ I heard good things about the person or center caring for my child from someone I know.
_____ Care hours match my schedule.
_____ The person or center has State credentials (ex., a license or a Quality rating)

Q22 Are there other factors that are especially important to you when choosing a child care arrangement? If yes, please share your thoughts in the space below.

_____
_____
_____
_____
_____

Q23 If the following kinds of care were available and affordable in your area, would you use any? (Please select all that apply).

- ☐ Weekend care
- ☐ Drop in or back up care
- ☐ Evening care (ex., 6pm-10pm)
- ☐ Overnight care (ex., 7pm to 7am)
- ☐ Sick child care
- ☐ ⊗I probably wouldn't use any of these.

End of Block: Child Care Ideals

Start of Block: Child Care Access & Decision Making

Display This Question:
If Are any of those young children regularly cared for by someone other than a parent? = Yes

Q24 Thinking back to the last time you chose a child care arrangement, how easy was the process of finding and enrolling your child in care, overall?

- ○ Extremely easy
- ○ Somewhat easy
- ○ Neither easy nor difficult
- ○ Somewhat difficult
- ○ Extremely difficult

Display This Question:
If Are any of those young children regularly cared for by someone other than a parent? = Yes

Q25 Still thinking of the last time you chose a child care arrangement, were you able to enroll your child/children in your first choice of care?

- ○ Yes, immediately.
- ○ Yes, but there was a wait list.
- ○ No, I didn't end up with my first choice.

Display This Question:
If Still thinking of the last time you chose a child care arrangement… = Yes, but there was a wait list.

Q26 How long was your family on a wait list? (If you can't quite remember, your best guess is fine).

- ○ Less than a week
- ○ More than week, but less than a month
- ○ More than a month, but less than three months
- ○ Three months or more

Display This Question:
If Still thinking of the last time you chose a child care arrangement…= No, I didn't end up with my first choice.

Q27 Why didn't you end up with your first choice of child care arrangement? (Please select all that apply).

- ☐ A spot never opened for my child/children
- ☐ The child care arrangement was too expensive
- ☐ The provider closed
- ☐ Other _____

Display This Question:
If Still thinking of the last time you chose a child care arrangement... = No, I didn't end up with my first choice.

Q28 What did you do when you didn't get your first choice of child care arrangement? (Please select all that apply).

- ☐ Took a leave from work
- ☐ Found a different job
- ☐ Settled for a less desirable option
- ☐ Reduced my work hours
- ☐ Paid more than I wanted to
- ☐ Other _____

Display This Question:
If Are any of those young children regularly cared for by someone other than a parent? = Yes

Q29 How did you find out about your child care provider? (Please select all that apply).

- ☐ Referral from a community agency
- ☐ Referral from a State agency
- ☐ Other professional (ex, social worker, doctor, teacher)
- ☐ General internet search
- ☐ Social media (ex, Facebook)
- ☐ Employer
- ☐ Relative, friend, or neighbor
- ☐ Coworker
- ☐ Other

End of Block: Child Care Access & Decision Making

Start of Block: Ratings & Referrals

Q30 How familiar are you with the child care Quality Ratings and Information System (sometimes called "QRIS", and also referred to as "STARS" in Vermont and "Licensed Plus" in New Hampshire)?

- ○ Extremely familiar
- ○ Very familiar
- ○ Moderately familiar
- ○ Slightly familiar
- ○ Not familiar at all

Display This Question:
If Are any of those young children regularly cared for by someone other than a parent?= Yes

Q31 Has your child care provider ever shared information with you about resources or services that might help you, your child, or your family?

- ○ Yes
- ○ No

Display This Question:
If Has your child care provider ever shared information with you about resources or services = Yes

Q32 Which of the following topics has your child care provider shared information about? (Please select all that apply).

- ☐ Where to find help paying for child care
- ☐ Where to find help paying for everyday family needs (ex. food, heat, or clothing)
- ☐ Where to find help paying for special occasion needs (ex. winter coats, holiday dinners, birthday gifts)
- ☐ Where to find more information about your child/children's development
- ☐ Where to find information about state or national programs like WIC, food stamps, or Medicaid
- ☐ Other _____

End of Block: Ratings & Referrals

Start of Block: Demographics

Q33 Which of the following companies do you work for?

- ○ Dartmouth Hitchcock Medical Center
- ○ Dartmouth College
- ○ Hypertherm
- ○ Sturm Ruger Firearms
- ○ Whelen Engineering
- ○ Plymouth State University
- ○ Timken Aerospace
- ○ Alice Peck Day Memorial Hospital
- ○ Fuji Film
- ○ TomTom

Q34 Do any adults in your household also work for one of the below companies?

Dartmouth Hitchcock Medical Center,
Dartmouth College,
Hypertherm,
Sturm Ruger Firearms,
Whelen Engineering,
Plymouth State University,
Timken Aerospace,
Alice Peck Day Memorial Hospital,
Fuji Film,
or TomTom?

- ○ Yes
- ○ No

Q35 What is your gender?

- ○ Female
- ○ Male
- ○ Non-binary/third gender
- ○ Prefer to self-describe_____
- ○ Prefer not to say

Q36 Which of the following best describes your living situation? (Please select all that apply).

- ☐ ⊗I'm the only adult in my household
- ☐ I live with my spouse or partner
- ☐ I live with another adult who is not my spouse or partner (ex., parent, sibling, adult child)
- ☐ Other _____

End of Block: Demographics

Start of Block: End

Q37 Thank you for your participation in this study; please hit "Submit" to finish. Your responses are much appreciated!

- ○ Submit

End of Block: End