

Falling Through the Cracks: Child Care Decision Making Among the Working Poor

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Statement of the Research Problem

Pressure placed on families to maintain work to financially support the family unit and find affordable, quality child care is intense. Several programs exist to provide families with child care including family child care homes and center based care (Child Care Aware, 2009). While these programs provide some help to families, many child care settings are unaffordable. Financial assistance programs such as child care subsidies and Head Start serve only a small number of eligible families due to inadequate funds (Herbst, 2008; National Women's Law Center [NWLC], 2005) which has resulted in unequal distribution of quality care among differing levels of socioeconomic groups in society. Because of increasing financial pressure on families, service providers and policy makers, understanding barriers and opportunities that families face in finding quality care for children has become a growing focus of research (Vandenbroeck, De Visscher, Van Nuffel & Ferla, 2008).

Research Background and Hypothesis

The importance of quality early learning highlights the urgency of finding ways to help families access high quality care. In order to support families, understanding the current processes families go through to choose care is critical. Perhaps what is least understood about child care is how parents navigate the child care system, i.e. responding to barriers and opportunities in the individual, family and community systems (De Marco, 2008; Pungello & Kurtz-Costes, 1999; Seo, 2003). Ecological Systems Theory (Bronfenbrenner 1979), along with a structured developmental approach to decision making (Mensing, French, Fuller & Kagan, 2000) are useful in framing research around child care choices.

State context is also important as states are allowed vastly different interpretations of federal guidelines in providing child care assistance. The eligibility cutoff to receive child care subsidies in the state of study has consistently ranked near the bottom at 127% of the Federal Poverty Line ([FPL] Citizens for Missouri's Children, 2008). This translates to less than 50% of the state median income (SMI), which is significantly lower than the maximum federal guideline of 85% SMI (Schulman & Blank, 2009). Also, less than 15% of eligible families receive subsidy suggesting that barriers to access exist (C. Shapton, personal communication, October 29, 2009). By comprehending which barriers harm parents' abilities to choose quality settings, services can be better targeted in a limited fiscal environment.

This study asks the following research question: How do barriers influence working poor parents' child care selection criteria, satisfaction and continuity of care for their children? This question leads to the following hypotheses: 1) Parents with greater perceived barriers (less affordability, social support, and work and caregiver flexibility; no assistance with child care cost; higher percent of income spent on child care; and more transportation problems) will be more likely to have a discrepancy in selection criteria when choosing an ideal child care setting versus criteria used in choosing their current child's care setting than parents with fewer perceived barriers; 2) Parents with greater perceived barriers will be less satisfied with their child care choice than parents with fewer perceived barriers; 3) Parents with greater perceived barriers will rate their child as having less continuity of care than parents with fewer perceived barriers.

Methodology

Data were collected through a survey informed by interviews with parents and other surveys (Emlen, Koren, & Schultze, 2000; Emlen & Weber, 2007; Raikes, 2005). Eligible participants included parents with a total household income less than 300% FPL who utilized non-parental care at least 10 hours per week. The survey was distributed using convenience sampling in three different locations in one metropolitan county in Missouri: the Women, Infant and Children (WIC) program, the public library, and Head Start. Barriers were measured in the survey using scales for parental work flexibility, transportation, affordability, caregiver flexibility, and social support (Emlen, Koren, & Schultze, 2000; Emlen & Weber, 2007). Percent of income spent on child care and financial assistance with care were also included as predictors. Parental experience with the child care subsidy system was measured in the survey through questions developed by Raikes (2005).

The first dependent variable (DV), parental child care selection criteria, was measured by comparing ratings of the importance of quality and logistics in the context of an ideal versus actual child care choice. The remaining DVs, care satisfaction and continuity, were measured using scales developed by Emlen, et al. (2000). Results were

analyzed using logistic regression with nine predictor variables included in three models: work flexibility, affordability, child care cost to income ratio, caregiver flexibility, social support, presence of financial assistance, employment status, partner status and type of child care.

Results

A total of 154 parent surveys were included in the model after addressing missing data and prescreening issues. The first hypothesis was supported: As barriers accumulated, there was a greater likelihood of a discrepancy in selection criteria in an ideal versus real choice, $\chi^2 (9, N=154) = 37.73, p < .001$. A Nagelkerke R Square value indicated that 29% of the variance could be explained by the predictors. The Hosmer and Lemeshow test indicated that the model fit the data, $\chi^2 (8, N=154) = 12.67, p = .124$. Two of the predictor variables were particularly influential: low social support, $\chi^2 (1, N=154) = 6.52, p < .017$; and the lack of financial assistance for child care, $\chi^2 (1, N=154) = 7.39, p < .01$ (see Table 1).

Table 1
Predictors of Discrepancy in Child Care Selection Criteria

Variable	<i>B</i>	<i>SE</i>	Wald	<i>p</i>	<i>OR</i>	95% CI
Non-relative care	.91	.51	3.22	.073	2.48	[.92, 6.67]
Employed full-time	.44	.39	1.33	.250	1.56	[.73, 3.32]
No financial assistance	1.13	.42	7.39**	.007	3.10	[1.37, 7.00]
Work flexibility	.07	.05	1.84	.175	1.07	[.97, 1.18]
Affordability	.10	.07	2.39	.122	1.11	[.97, 1.18]
Caregiver flexibility	-.03	.05	.55	.459	.97	[.88, 1.06]
Social support	.16	.06	6.52*	.011	1.17	[1.04, 1.33]
Percent income spent on child care	-1.11	1.17	.90	.344	.33	[.03, 3.29]
No partner in home	-.33	.39	.73	.393	.72	[.34, 1.53]
Constant	-2.87	.73	15.53	.000	.06	

Note. *N* = 154. *SE* = standard error; *OR* = odds ratio; *CI* = confidence interval.

p* < .017. *p* < .01. Bonferroni adjustment, *p* < .017

The second hypothesis was supported; as barriers accumulated, imperfect satisfaction was more likely, $\chi^2 (9, N=154) = 75.70, p < .001$. The Nagelkerke R Square value indicated that 54% of the variance could be explained by the predictors. The Hosmer and Lemeshow Test indicated good model fit, $\chi^2 (8, N=154) = 6.67, p = .573$. Three of the predictor variables were significantly influential: lack of financial assistance with child care, $\chi^2 (1, N=154) = 9.82, p < .01$; low work flexibility, $\chi^2 (1, N=154) = 7.95, p < .01$; and low affordability, $\chi^2 (1, N=154) = 18.92, p < .001$ (see Table 2).

Table 2
Predictors of Parental Satisfaction with Child Care

Variable	<i>B</i>	<i>SE</i>	Wald	<i>p</i>	<i>OR</i>	95% <i>CI</i>
Non-relative care	1.10	.67	2.67	.102	2.99	[.80, 11.16]
Employed full-time	-.79	.52	2.32	.128	.45	[.16, 1.26]
No financial assistance	1.76	.56	9.82*	.002	5.82	[1.94, 17.53]
Work flexibility	.18	.06	7.95*	.005	1.20	[1.06, 1.35]
Affordability	.41	.09	18.92**	.000	1.51	[1.25, 1.81]
Caregiver flexibility	-.08	.06	1.63	.202	.92	[.82, 1.04]
Social support	.05	.08	.41	.521	1.05	[.91, 1.22]
Percent income spent on child care	-2.47	1.75	1.98	.159	.09	[.00, 2.63]
No partner in home	-1.19	.52	5.19	.023	.30	[.11, .85]
Constant	-4.94	1.04	22.46	.000	.01	

Note. $N = 154$. *SE* = standard error; *OR* = odds ratio; *CI* = confidence interval.

* $p < .01$. ** $p < .001$. Bonferroni adjustment, $p < .017$

The third hypothesis was also supported; as barriers accumulated discontinuity of care was more likely, $\chi^2 (9, N=154) = 63.47, p < .001$. The Nagelkerke R Square value indicated that 45% of the variance could be explained by the predictors. The Hosmer and Lemeshow Test indicated good model fit, $\chi^2 (8, N=154) = 2.47, p = .96$. Only social support emerged as significant when examining the predictor variables individually, $\chi^2 (1, N=154) = 16.10, p < .001$ (see Table 3).

Table 3
Predictors of Continuity of Child Care

Variable	<i>B</i>	<i>SE</i>	Wald	<i>p</i>	<i>OR</i>	95% CI
Non-relative care	1.06	.56	3.63	.057	2.89	[.97, 8.64]
Employed full-time	-.09	.44	.05	.831	.91	[.39, 2.14]
No financial assistance	.32	.46	.46	.496	1.37	[.55, 3.41]
Work flexibility	.12	.06	3.98	.046	1.12	[1.00, 1.26]
Affordability	.11	.07	2.10	.147	1.11	[.96, 1.29]
Caregiver flexibility	.05	.05	.95	.331	1.05	[.95, 1.17]
Social support	.28	.07	16.10*	.000	1.33	[1.16, 1.52]
Percent income spent on child care	.44	1.33	.11	.738	1.56	[.12, 20.97]
No partner in home	.08	.43	.04	.849	1.09	[.47, 2.52]
Constant	-3.99	.85	22.09	.000	.02	

Note. $N = 154$. *SE* = standard error; *OR* = odds ratio; CI = confidence interval.

* $p < .001$. Bonferroni adjustment, $p < .017$

Because of the limited number of participants who received child care subsidies in their lifetime ($n = 74$), subsidy experience was not included in the models. Of these participants, 64.9% reported currently receiving subsidies ($n = 48$), however 102 participants met the eligibility criteria of 127% FPL. Subsidy participants were asked a series of yes/no questions about their experiences with subsidies. Overall responses indicated a positive assessment, however participants were less likely to respond affirmatively to the statement that they had more choices because of subsidies, and that subsidies were easy to keep. Also, over one third of participants indicated that some providers would not provide care because of subsidies, and that they had experienced interrupted/lost subsidies (see Table 4).

Table 4
Child Care Subsidy Experiences

Experience	<i>n</i> (responding yes)	Valid % (responding yes)
Child care subsidies are a tremendous boost to our family's ability to work and make a living	65	87.8
Child care subsidies are easy to apply for	53	71.6
Child care subsidies are easy to keep	38	52.1
I feel that I have more child care choices because of subsidies	46	63.0
Even though part of my child's care is paid for by subsidies, I feel my child is treated as well as the other children at the child care facility	66	90.4
Some child care providers I have approached will not care for my child because of the subsidies	28	38.4
I do not have as many choices for child care because of using subsidies	22	30.1
I feel my child did not have access to the highest quality care because my child care is paid/partly paid by subsidies	17	23.0
My caseworker cares about my family and works with me to help cover my child care needs	54	75.0
Have you ever had a period of interrupted or lost subsidy payment	27	36.5

Note. *N* = 74.

Utility for Social Work Practice

Results point to the significance of the environmental context in understanding how parents choose child care and care satisfaction and continuity. A lack of financial assistance and low social support were particularly important, emerging as significant in two of three models. Findings provide guidance for practice, policy and future research. In relation to policy, this study adds support to previous findings that families who

receive assistance with the cost of child care are able to choose care based more on quality, and feel more satisfied with their choices. This finding, combined with the fact that the sample contained many participants who were eligible for assistance but did not receive it, highlights a need to ensure that more eligible families receive financial assistance with child care. Administrative barriers may need to be addressed as participants reported difficulty keeping subsidies and not being fully aware of the application process.

More families can be informed in the community through various access points about child care assistance and other resources. When families access a service, this creates a potential point of contact in which parents can be screened for child care assistance eligibility and given a referral, so that families are not turned out blindly to navigate a complex child care market. Other findings support the need to understand the role of social support in securing and maintaining child care. Lower social support was found to increase care discontinuity and the likelihood that parents would have a greater discrepancy between selection criteria in an ideal versus real choice. However assessing a family's social support network is not part of a child care referral or subsidy application process. Tools could be developed to assess social support, and connect families to social networks in the community. Resources that strengthen social support networks may need to be created to supplement families with weak social ties.

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