



2020

EARLY CHILDCARE & EARLY LEARNING SURVEY

A report on childcare options, factors that influence parent's choices for childcare and quality of early learning environments in Vanderburgh and Warrick Counties in Indiana.



2020 EARLY CHILDCARE & EARLY LEARNING SURVEY

A SURVEY OF VANDERBURGH AND WARRICK, IN COUNTIES

FROM THE WELBORN BAPTIST FOUNDATION

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SPECIAL THANKS

The Foundation extends a special thank you to the following for lending their early childhood expertise to this project: Kevin Bain, retired CEO of Welborn Baptist Foundation and former chair of the Indiana Early Learning Advisory Committee, Aleisha Sheridan, President & CEO of 4C Community Coordinated Childcare of Southern Indiana and Patrick Jackson, Early Learning Program Officer for the Welborn Baptist Foundation.

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TABLE OF CONTENTS

Introduction / Letter from the CEO	1
Executive Summary	2
Types of Childcare	5
Parent or Primary Caregiver	6
Center-based	8
Family, Friend & Neighbor	24
Childcare Choices	31
Learning Environments	36
Sources	44
Methods & Limitations	46

INTRODUCTION

Many young children in the greater Evansville area need care because their parents are working or going to school. In fact, according to data from the Indiana Early Learning Advisory Committee, more local children need care compared to children across the state of Indiana (Vanderburgh 75%, Warrick 71% vs Indiana 64%). Nearly 9 out of 10 (87%) families in this study need childcare.

Beyond a caregiver's reliability to cover hours needed for care, the quality of a child's care arrangement also matters to local families. While parents are working or going to school, children may spend many hours with babysitters and childcare providers and how children spend those hours matters. Experts agree that a child's early experiences influence brain development and the future success of the child. A child's early years are the critical foundation for lifelong educational and social/emotional development.

This survey project was designed to answer key questions about childcare and early learning for families in Vanderburgh and Warrick Counties in Indiana.

?

What types of childcare do families use when they need care for their children?

?

What factors do families consider when making choices for childcare?

?

How are families, providers and communities creating learning environments for young children?

Note: Survey data was collected before the 2020 COVID-19 epidemic. At the time of publication, the greater Evansville area faced childcare constraints as families desire to get back to work and centers were in varying stages of reopening. Community organizations, funders and collaborations are actively working on solutions to make more childcare options available to support the recovery of individual families and the region's economy.



Cultivating communities that flourish with the wellbeing, abundance, and peace that God desires. That's our overarching vision here at the Welborn Baptist Foundation. It's a lofty vision, and a weighty one. What are the most strategic investments in our community **now** that will bring the greatest **future** return towards that vision of flourishing? We are convinced that investment in high-quality early learning and childcare for our most precious resource, our children, is among the most strategic and loving investments we can make.

The Early-Learning and Childcare environments in our community are inextricably linked, and play a crucial role in the development of key educational and social-emotional learning that studies prove is necessary for school and lifelong success. And every day parents across our community make difficult decisions about who will care for their children when they go to school and to work. Some choose center-based programs. Others select providers who care for children in the provider's home. Yet others choose to have family, friends, or neighbors care for their children. Regardless of the provider and setting, parents want stable, affordable childcare where their child is safe, happy, healthy, and learning.

In 2020, the Welborn Baptist Foundation has undertaken a survey of parents in Vanderburgh and Warrick counties to obtain a better understanding of what matters in choosing child care: quality? cost? proximity to work or home? In this report, we offer a glimpse of what we found. It is our hope that multiple audiences, including families, providers, employers and the community at large will find the data useful and informative.

This survey represents part of the Foundation's contribution to our community's advancement of High Quality Early Learning and Childcare. We invite you to join us as together we *cultivate communities that flourish*.

Sincerely,

A handwritten signature in black ink, appearing to read 'Pat Creech'.

Pat Creech
Executive Director and CEO
Welborn Baptist Foundation

EXECUTIVE SUMMARY

CHILDREN

Vanderburgh and Warrick Counties are two of the more populated counties in the southwest region of Indiana. In these counties, there are just under 15,000 children under the age of five.

Over 3,500, or one in four (25%) young children live below the poverty level.

One in four households (26%) with children under the age of 5 are single mother households. Two-thirds of single mother households (62%) are below the poverty level.

In the survey area, more than eight out of ten children under the age of five are white, while 10% are black and 6% identify with multiple racial groups. Additionally, 5% of children under the age of five have Hispanic or Latino ethnicity.

Most parents surveyed (92%) believe their children are in very good or excellent health. A small segment of children, approximately 1 in 5 (18%), have special needs, e.g., physical, mental or behavioral health issues, developmental delays, born addicted to pharmaceuticals.

14,527
**MORE THAN ONE QUARTER OF
ALL CHILDREN ARE UNDER
THE AGE OF 5**



EXECUTIVE SUMMARY CONTINUED

FAMILIES

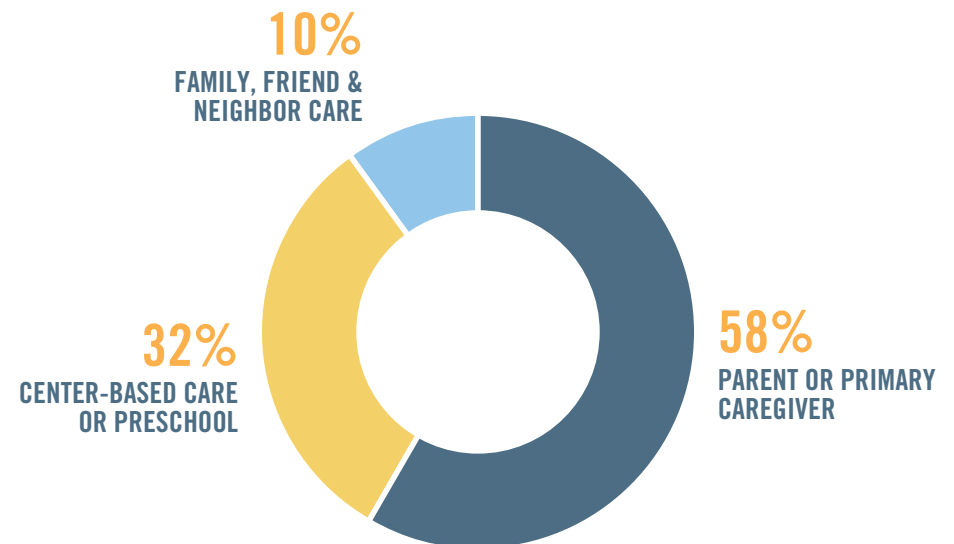
TWO-THIRDS OF FAMILIES WITH CHILDREN UNDER THE AGE OF SIX HAVE MARRIED PARENTS. THE REMAINING ONE-THIRD ARE SINGLE-PARENT FAMILIES.

66%
MARRIED PARENTS

34%
SINGLE PARENTS

Of the nearly 62,000 families living in the survey area, 19%, or roughly 1 in 5 have at least one child under the age of six. Most of these children have married parents, but a third are raised by single parents.

MOST YOUNG CHILDREN RECEIVE CARE FROM A PARENT OR PRIMARY CAREGIVER.



Most local families have a parent or primary caregiver at home watching their young children during the hours that care is needed. Of those children cared for outside the home, one-third of families use center-based care or preschool and less commonly, family, friends & neighbors.

SURVEY HEADLINES

TOP THREE STRENGTHS

1. Families in general are satisfied with their child's current care arrangement
2. Families prioritize quality and reliability over cost regardless of income level
3. Families report reading with their young children about as often as experts recommend

TOP THREE OPPORTUNITIES

1. Most children are cared for by parents and relatives when they need care. The quality of these environments is unknown, presenting a unique challenge for those working to promote quality in all childcare settings.
2. Young children could spend less time with technology, especially those aged 2 – 5.
3. Families want more community and educational activities for younger children, more childcare center options, more affordable options and additional health supports for young children.

TYPES OF CHILDCARE

Many parents who work, go to school or need care for their young children for other reasons, struggle with the decision to stay at home with their children, place them in childcare, or look to a friend or relative for care. There are benefits and drawbacks of each type of care and no shortage of opinions on which situation is best. Some believe a stay-at-home parent is best for proper nurturing of children, others believe children develop better socially in a childcare environment, while others believe time is best spent bonding with grandparents or extended family. Some families feel limited in their choices for care because of cost, location, availability and other factors.

Regardless of the type of care, quality is an important consideration though *center-based care* is the only type of care subject to quality regulations. All types of caregivers - parents, childcare center workers, friends, relatives, and non-relatives - can and should provide the safety, stimulation and affection that children need to grow and thrive.

This study examines three types of childcare:

- Parent or primary caregiver care
- Center-based care
- Family, friend & neighbor care

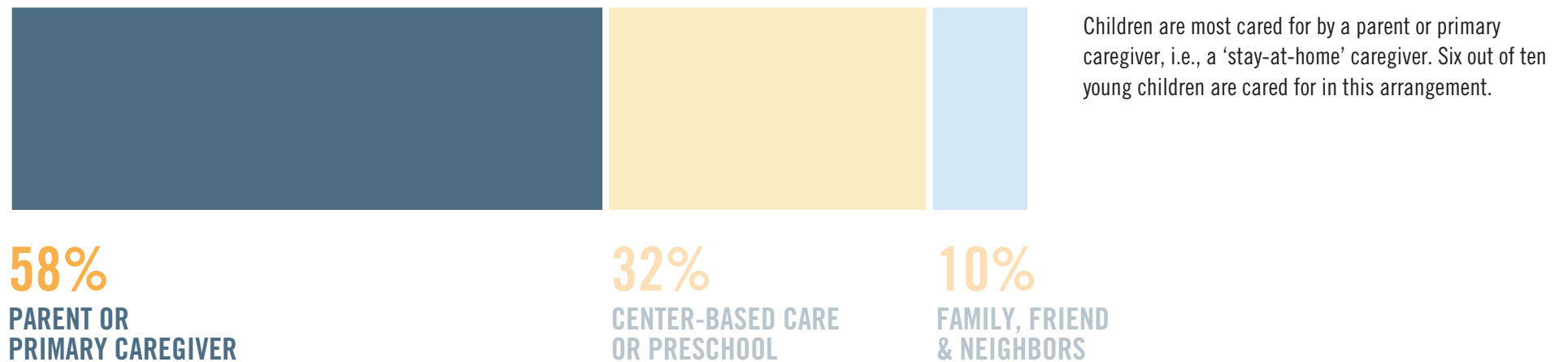


TYPES OF CHILDCARE

PARENT OR PRIMARY CAREGIVER CARE

There are many reasons parents choose to stay home with their young children. Many believe there is no substitute for a parent or primary caregiver when it comes to nurturing children during these early, formative years. Finances can be a consideration as well. For some, it makes better financial sense for one parent to stay home when they compare the cost of quality childcare with their potential wages. Families also consider factors like the proximity of childcare to home and work and the emotional, physical, behavioral and educational needs of the child.

Q: In a typical week, please indicate from the following list of options where your child spends over half of the time that he/she needs care. **A:** *With a parent or primary caregiver*



TYPES OF CHILDCARE

PARENT OR PRIMARY CAREGIVER CARE

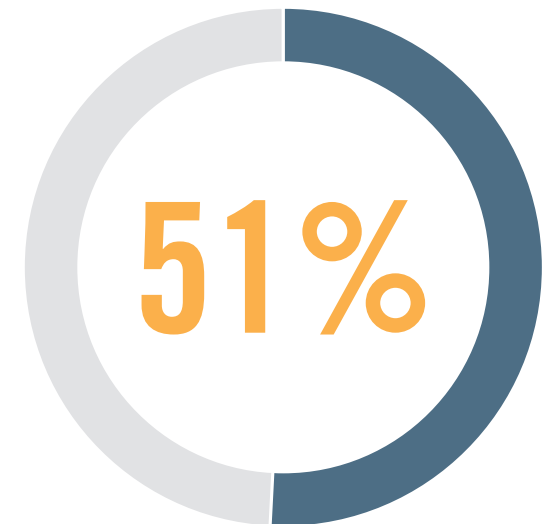
Q: In the past year, have you and your child participated in any educational programs offered by organizations where other caregivers and children were present?

HALF OF STAY-AT-HOME CAREGIVERS ATTEND COMMUNITY EDUCATIONAL PROGRAMS WITH THEIR CHILD

'Educational programs' like Mommy & Me or Play & Learn are generally offered to the community by organizations like libraries, nonprofits and childcare resource & referral agencies. Here, caregivers and children can gather and learn together. About half of those surveyed have attended such a program.

Of those who haven't attended, 60% say they were not previously aware of these types of programs. More awareness of educational programming offered in the community may help parents and their children be more likely to participate. Other families experience obstacles or have concerns. Limitations with cost, transportation, and concerns about quality are among other reasons for not attending this type of programming.

Reasons for not attending community education programs include lack of awareness, cost, transportation, and quality concerns.





TYPES OF CHILDCARE

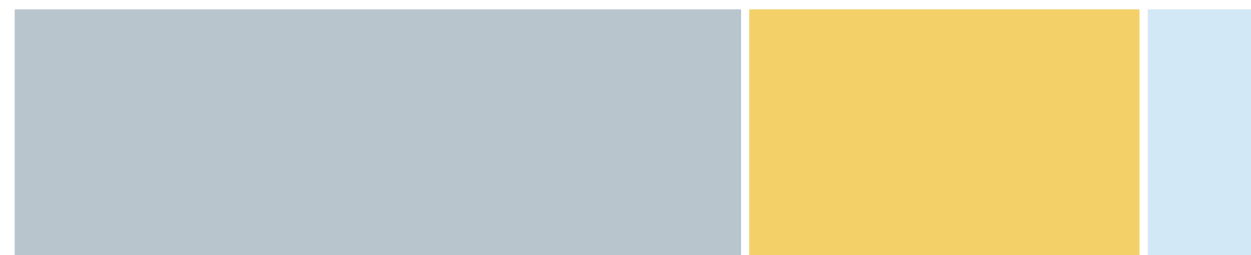
CENTER-BASED CHILDCARE

Childcare centers are usually located in stand-alone buildings, are larger and have staff who care for multiple children. Often centers are divided into groups or classrooms of similarly aged children. They may be privately operated for profit by chains or individual owners, or operated by nonprofits, churches, public schools, and government agencies.

Many families choose center-based care for their structured environments, educational opportunities, variety of activities as well as socialization opportunities for children.

According to *Indiana Early Learning Advisory Committee (ELAC) 2020 Interactive Data Dashboard* there are 237 known childcare programs including centers, family-care centers, registered ministries, pre-school and Head Start programs in Vanderburgh and Warrick Counties.

Q: In a typical week, please indicate from the following list of options where your child spends over half of the time that he/she needs care. **A:** *In a Child Care Center or Preschool program*



58%

PARENT OR
PRIMARY CAREGIVER

32%

CENTER-BASED CARE
OR PRESCHOOL

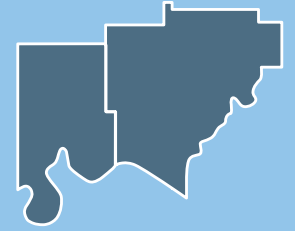
10%

FAMILY, FRIEND
& NEIGHBORS

One out of three (32%) families in Vanderburgh and Warrick Counties choose center-based care for their children. On average, children in this study started attending their present center-based care or preschool when they were just under two-years old (22 months).

TYPES OF CHILDCARE

CENTER-BASED CHILDCARE

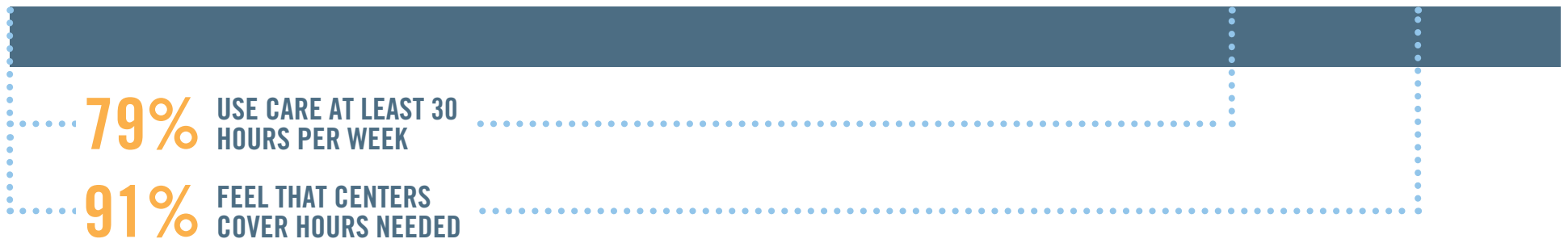


Q: How well does this care arrangement cover the hours needed for care?

Q: About how many hours each week does your child receive care from this program?

NEARLY ALL FAMILIES (91%) FEEL THAT CENTER AVAILABILITY COVERS THE HOURS NEEDED

MOST FAMILIES (79%) USE CENTER-BASED CARE AT LEAST 30 HOURS PER WEEK



Note: Of those parents surveyed who work second or third shift jobs, most did not indicate using center-based care.



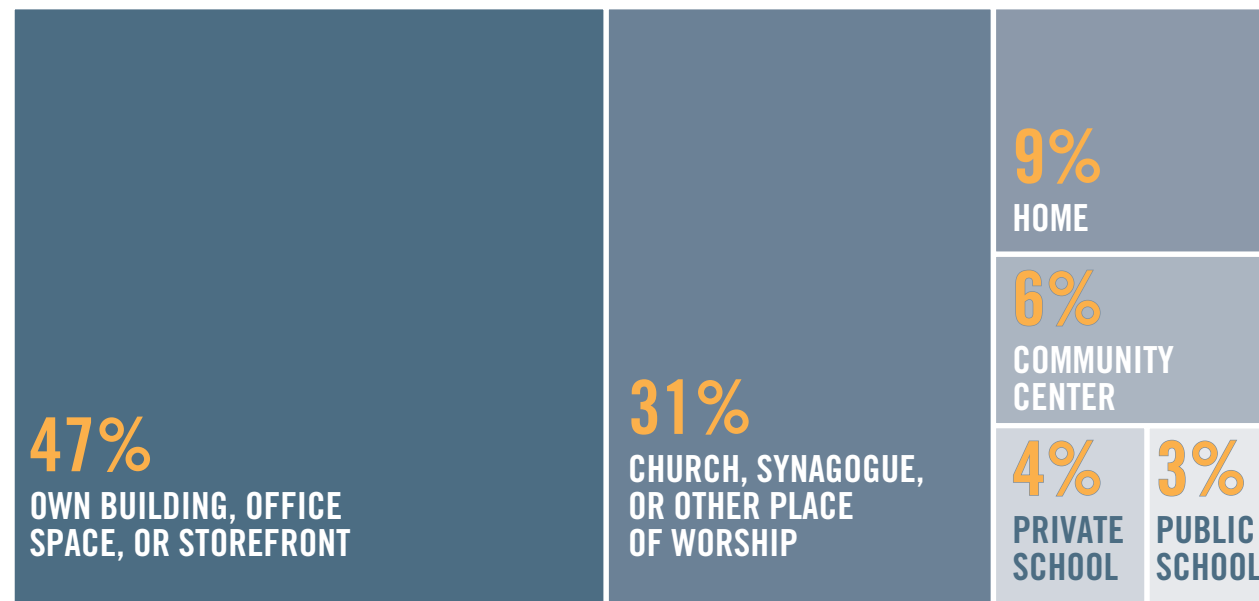
TYPES OF CHILDCARE

CENTER-BASED CHILDCARE

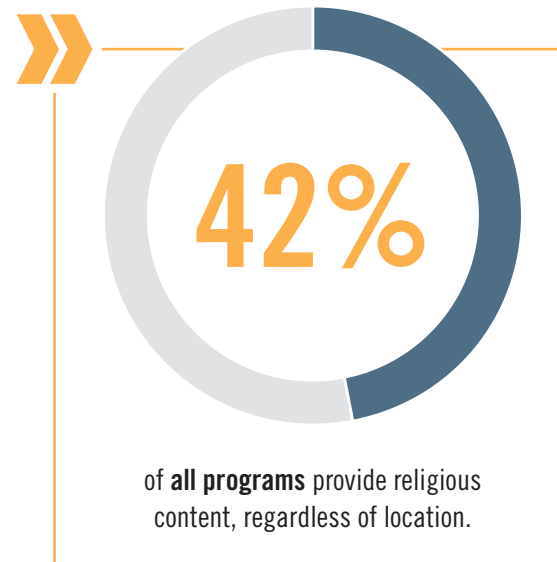
CHARACTERISTICS OF CENTERS AND PRESCHOOLS

Nearly Half of Childcare Programs are located in their Own Building, Office Space, or Storefront.

The two most common settings for childcare or preschool programs are standalone buildings and places of religious worship.

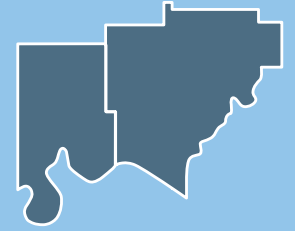


Q: Where is this program [childcare center, preschool, or prekindergarten] located?



TYPES OF CHILDCARE

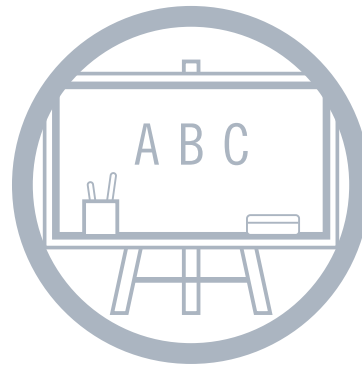
CENTER-BASED CHILDCARE



Q: Is this program a Head Start or Early Head Start program?

ONE OUT OF FIVE CENTERS ARE HEAD START OR EARLY HEAD START PROGRAMS.

Early Head Start and Head Start are federal programs that serve families with incomes below the federal poverty level. Early Head Start serves infants, toddlers and pregnant women and their families while Head Start promotes the school readiness of children under five by enhancing their cognitive, social and emotional development. Both programs emphasize the role of parents as the child's first teacher.





TYPES OF CHILDCARE

CENTER-BASED CHILDCARE

Q: Has this program offered any of the following services?

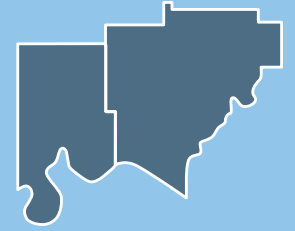
SOME CHILDCARE CENTERS OFFER IMPORTANT HEALTH AND DEVELOPMENT SERVICES.

Half of all centers (50%) provide medication administration. One in four provides hearing, speech and/or vision testing or formal testing for developmental or learning problems. Center-based physical and dental examinations are much less common. Families surveyed indicated a desire for more childcare to address health needs.



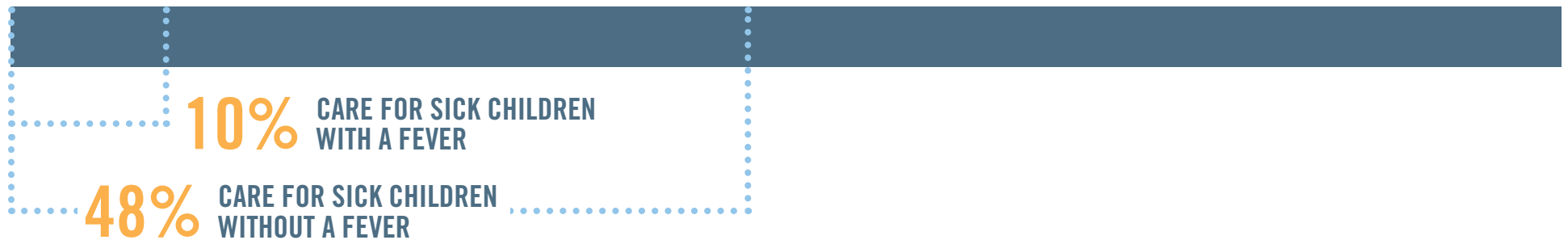
TYPES OF CHILDCARE

CENTER-BASED CHILDCARE



VERY FEW CHILDCARE CENTERS (10%) PROVIDE CARE TO SICK CHILDREN WITH A FEVER.

Even without a fever, just half of centers (48%) will provide sick care for children.





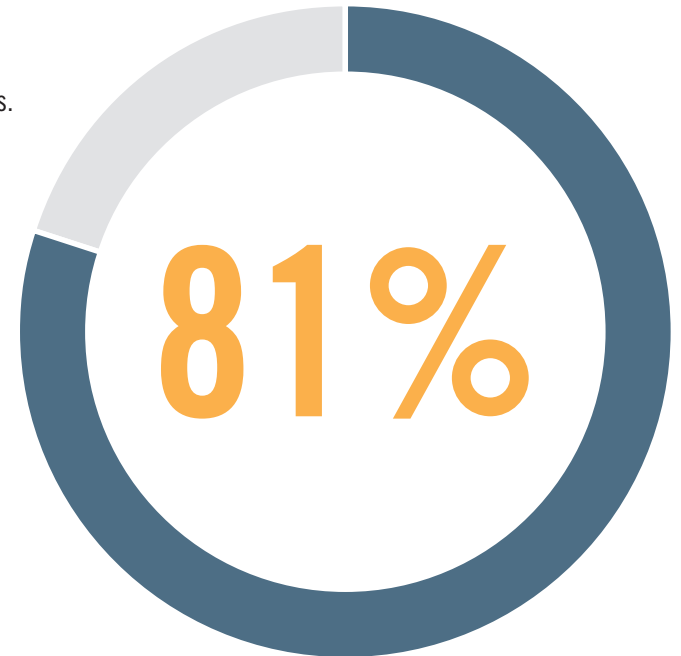
TYPES OF CHILDCARE

CENTER-BASED CHILDCARE

Q: Is there any charge or fee for the care your child receives from this care provider, paid either by you or some other person or agency?

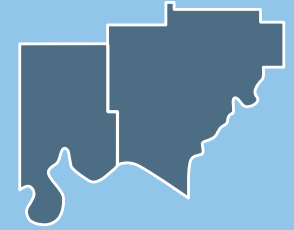
MOST FAMILIES PAY A FEE FOR CENTER-BASED CARE

Nearly all childcare centers charge a fee for their services. Though there is almost always a cost for the care, some families may not incur a fee if they are attending a subsidized program. Head Start programs, for example, are subsidized by federal funding.



TYPES OF CHILDCARE

CENTER-BASED CHILDCARE

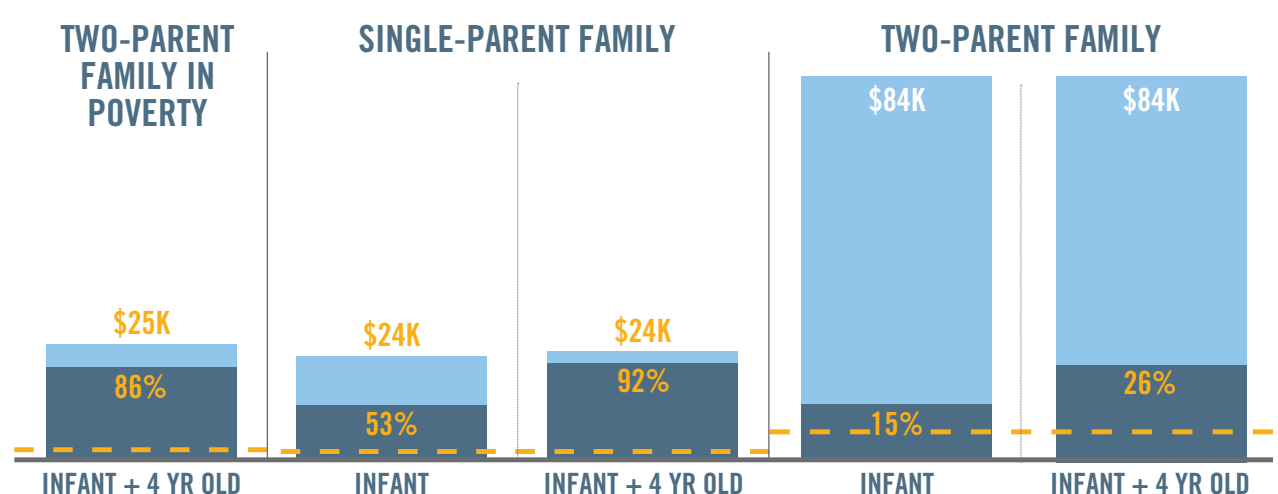
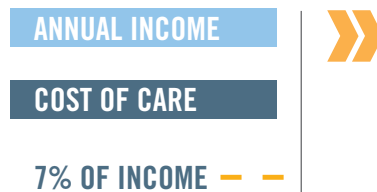


Q: How much does your household pay for your child to go to this program, not counting any money that may be received from others to help pay for care?

AFFORDABILITY IS AN IMPORTANT CONSIDERATION

Cost can be an obstacle for some children to participate in center-based care, especially high-quality care. Costs tend to vary by age of the child, with the largest financial burden on families needing care for infants. According to Child Care Aware of America, for Indiana in 2019, the average annual tuition cost to send an infant to a center-based program was \$12,390.

To minimize household financial burden, it is recommended by the U.S. Department of Health and Human Services that families not spend over 7% of their income on childcare. Indiana parents spend much more than 7% of their income on childcare. Especially burdensome on families with lower incomes, it could cost a single parent as much as 92% of their income to send their infant and 4 year old to center-based care.



Indiana Early Learning Advisory Committee (ELAC) 2020 Annual Report

Child Care Aware America 2019



TYPES OF CHILDCARE

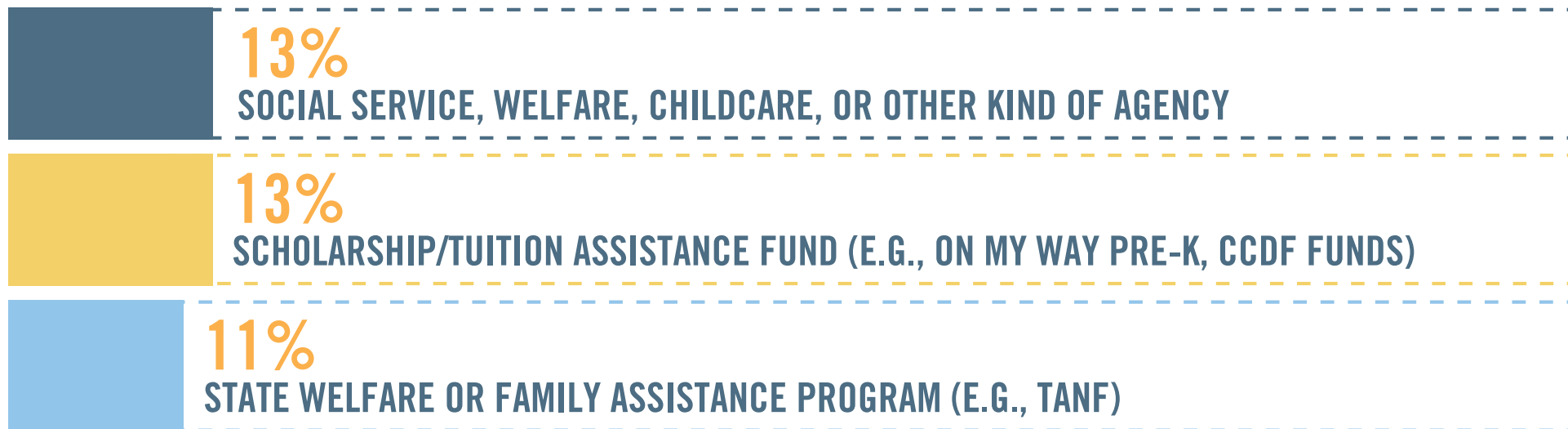
CENTER-BASED CHILDCARE

Q: Do any of the following people, programs, or organizations help pay for your child to go to this program?

FEW FAMILIES OVERALL RECEIVE FINANCIAL ASSISTANCE TO HELP COVER CENTER-BASED CHILDCARE COSTS.

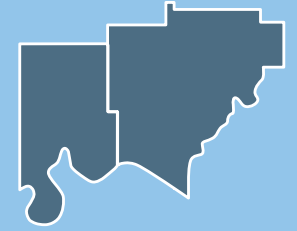
According to the National Institute for Early Education Research, Indiana has historically provided very little financial investment in early childhood and is one of only six states without state funded preschool.

2019 NIEER Report



TYPES OF CHILDCARE

CENTER-BASED CHILDCARE



Q: In minutes, how long is the drive between your home and this program?



MOST FAMILIES DRIVE 10 MINUTES OR LESS FOR CENTER-BASED CARE

No families drive more than 30 minutes to their child's center-based care. Close to 1 in 5 (17%) centers or preschools are located at parents' places of work. Just over half of parents say location of the center relative to home (57%) and relative to work (55%) are very important drivers of choice.



100%

DRIVE 30 MINUTES
OR LESS



91%

DRIVE 20 MINUTES
OR LESS



58%

DRIVE 10 MINUTES
OR LESS



TYPES OF CHILDCARE

CENTER-BASED CHILDCARE QUALITY

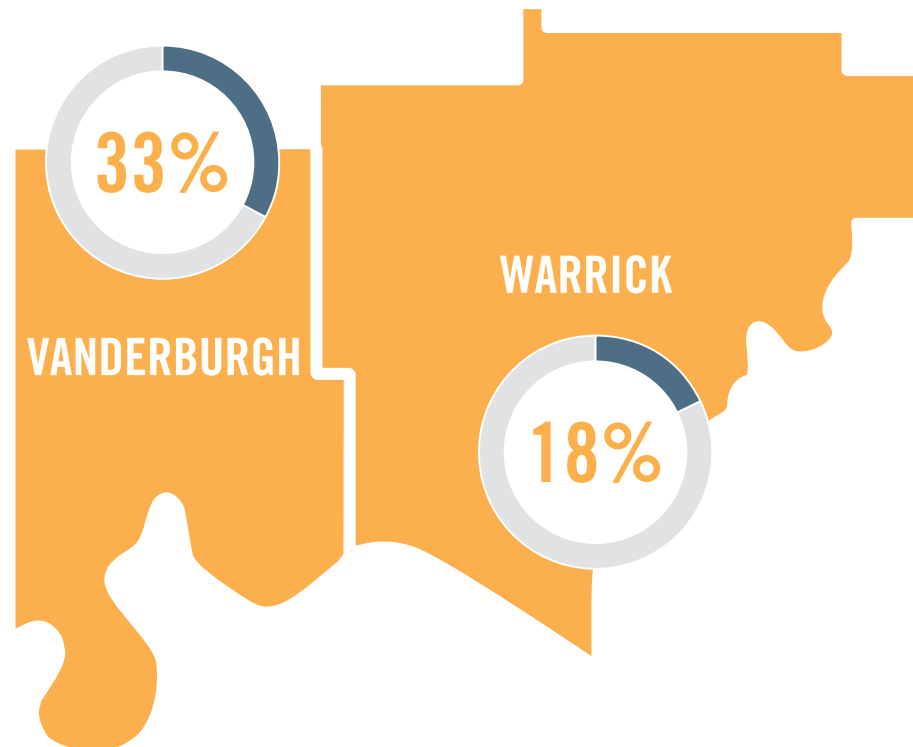
High quality childcare programs are essential. Parents need stable, reliable, high quality care to ensure that their child is safe, healthy and learning during those hours they need care. Our school systems need children who are entering school ready to succeed. Businesses need a high-quality work force. Studies from James J. Heckman have shown that high-quality birth-to-five programs for disadvantaged children can deliver a 13% per year return on investment. Significant gains are realized through better outcomes in education, health, social behaviors and employment.

The Indiana Paths to QUALITY™ Quality Rating and Improvement System assesses the quality of care within a program and works to improve that quality level. Each Paths to QUALITY™ level builds on the foundation of the previous one, resulting in significant quality improvements at each stage. The system provides incentives and awards for success at each level.

- Level 1: Health and safety needs of children met
- Level 2: Environment supports children's learning
- Level 3: Planned curriculum guides child development and school readiness
- Level 4: National accreditation (the highest indicator of quality) is achieved

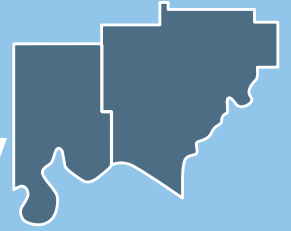
LEVELS 3 AND 4 ARE CONSIDERED HIGH QUALITY

Close to 1 in 5 centers in Warrick County (18%) and 1 in 3 (33%) centers in Vanderburgh County, are high quality. (State of Indiana 26%). Vanderburgh county ranks second in the state for the percent of children who need care that are in high quality care (29%), thanks in part to state childcare subsidy programs such as On My Way Pre-K.

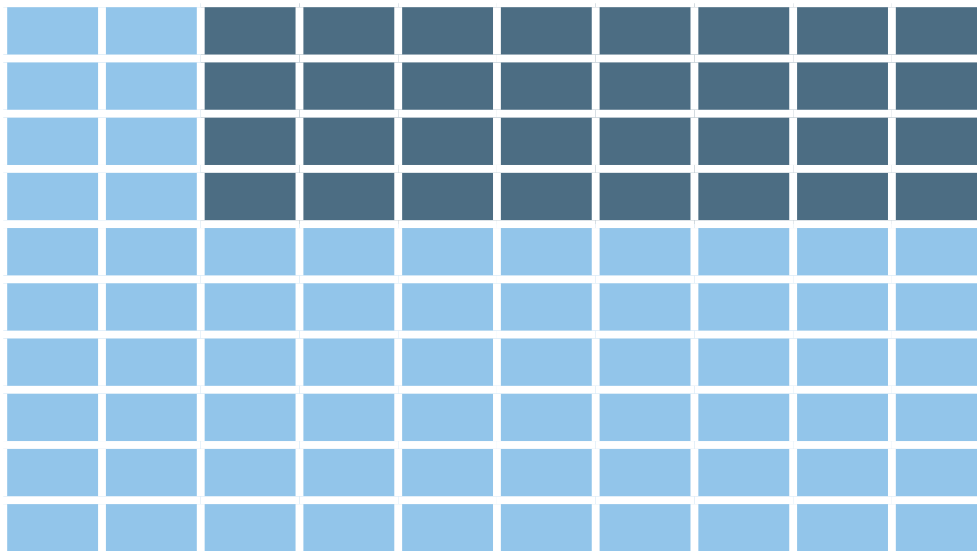


TYPES OF CHILDCARE

CENTER-BASED CHILDCARE QUALITY



ONE THIRD OF LOCAL CHILDCARE CENTERS ARE HIGH QUALITY. THESE CENTERS HAVE LEVEL 3 OR LEVEL 4 PATHS TO QUALITY RATINGS



32%

HIGH QUALITY (PTQ LEVEL 3 OR 4)

68%

PTQ LEVEL 1 OR 2 (OR DO NOT PARTICIPATE IN PTQ)

Indiana Paths to Quality™

Indiana Early Learning Advisory Committee (ELAC) 2020 Interactive Data Dashboard

Indiana On My Way Pre-K



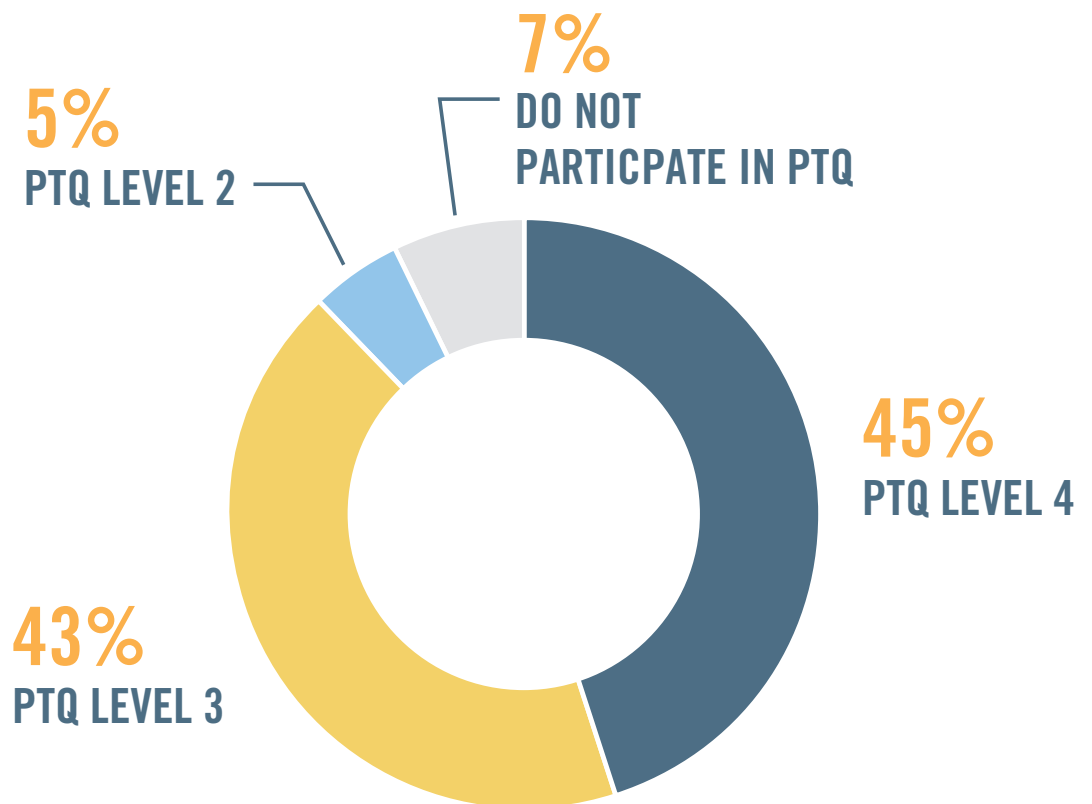
TYPES OF CHILDCARE

CENTER-BASED CHILDCARE QUALITY

Q: Are you aware of the Indiana Paths to QUALITY™ level rating for your child's care center?

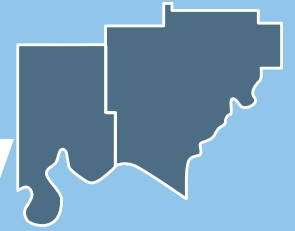
OVER HALF (60%) OF FAMILIES ARE AWARE OF THEIR CENTERS' PATHS TO QUALITY LEVEL.

Of those families who are aware of the center's rating, nearly 90% are Level 3 or Level 4.



TYPES OF CHILDCARE

CENTER-BASED CHILDCARE QUALITY



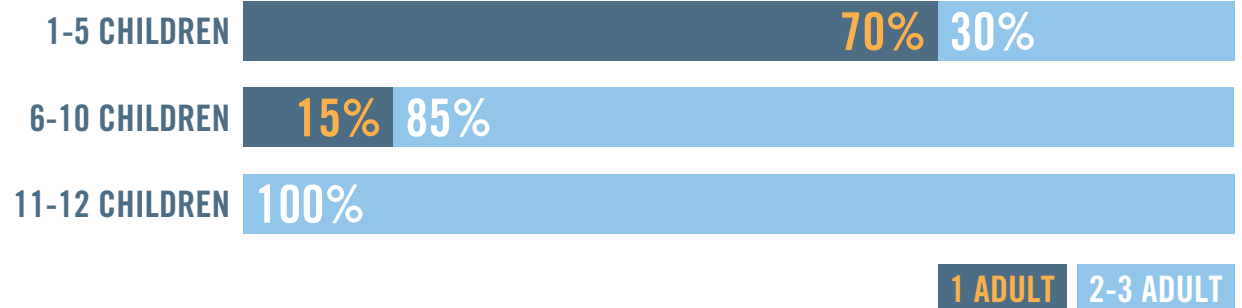
Q: On average, how many adults are present with your child's room or group?

Q: Including your child, how many children are usually in one room or group while attending the program?

CHILD-TO-ADULT RATIOS ARE IMPORTANT SAFETY AND QUALITY CONSIDERATIONS.

Families report more adults supervising their children as the total number of children in the classroom or group increases. According to Indiana regulations, there must be 1 adult for every 4 infants with a maximum of 8 infants in a group or room. At the older end of the spectrum, for children 5 years and older, there must be 1 adult for every 15 children with a maximum of 30 children in a group or room.

Indiana Family and Social Services Administration





TYPES OF CHILDCARE

CENTER-BASED CHILDCARE QUALITY

Q: How important were each of these reasons when you chose the childcare arrangement or program where your child spends the most time?

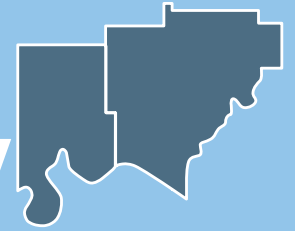
RELIABILITY AND QUALITY CONSIDERATIONS ARE VERY IMPORTANT FACTORS FOR FAMILIES WHEN CHOOSING CHILDCARE - MORE IMPORTANT THAN COST.

DATA ON FOLLOWING PAGE

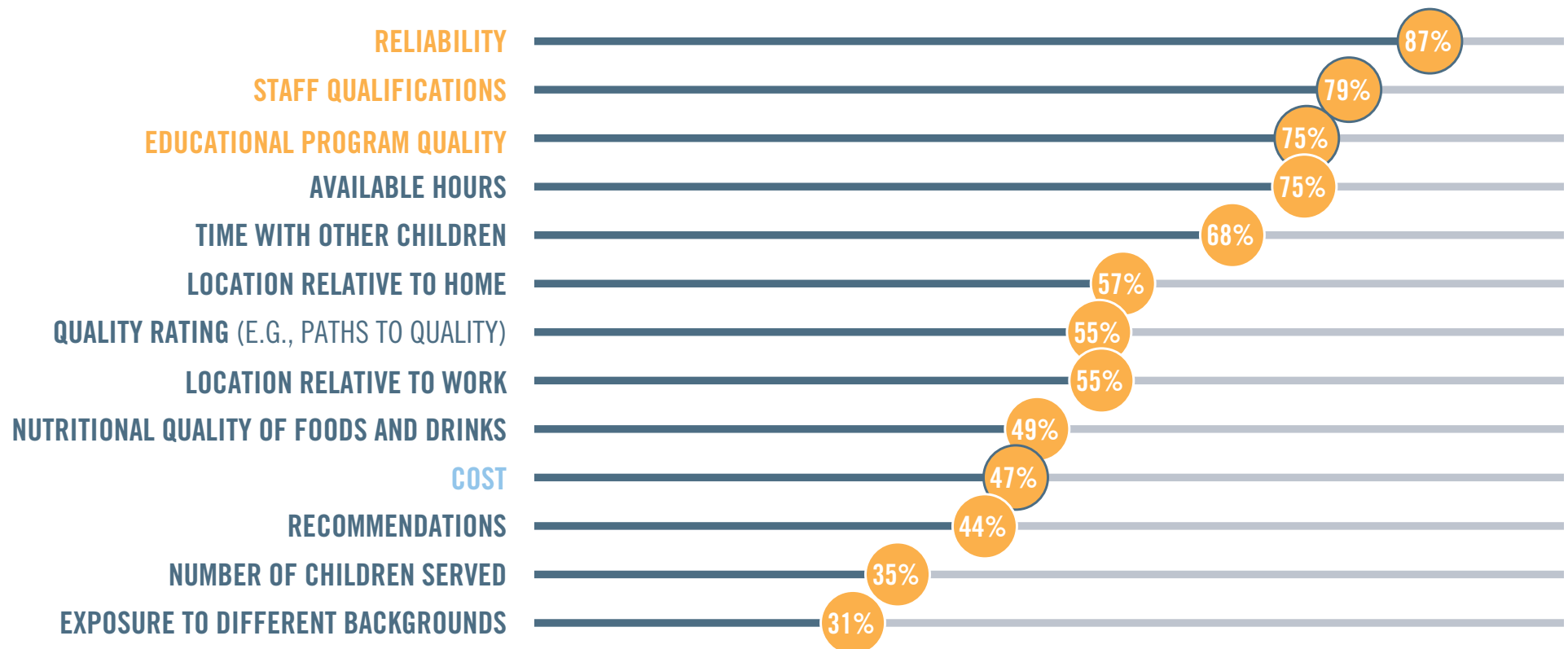


TYPES OF CHILDCARE

CENTER-BASED CHILDCARE QUALITY



Though cost is an important consideration when choosing childcare, regardless of their income levels, families in this study place a higher value on factors like reliability, staff qualifications, program quality, available hours, socialization opportunities and even the nutritional quality of food and drinks served to their children while in care.





TYPES OF CHILDCARE

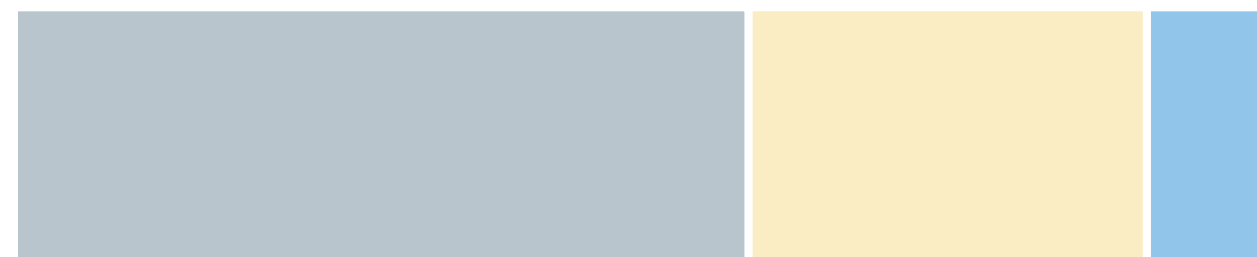
FAMILY, FRIEND & NEIGHBOR CARE

Friend, relative and non-relative care environments are typically unlicensed and unregulated by public agencies. Examples include a grandparent watching their grandchildren while parents work or go to school, a neighbor watching children after school or a paid babysitter or nanny.

Prioritizing the understanding of this small but important segment of the childcare ecosystem, often referred to as family, friend and neighbor (FFN) care, is important. With better understanding, communities and organizations can plan for ways to provide support and encourage quality in these settings.

Q: In a typical week, please indicate from the following list options where your child spends over half of the time that he/she needs care. **A:** *With a relative or non-relative*

A SMALL PORTION OF FAMILIES RELY ON FAMILY, FRIENDS & NEIGHBORS FOR CHILDCARE



58%
PARENT OR
PRIMARY CAREGIVER

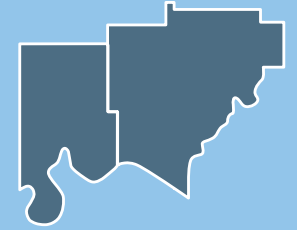
32%
CENTER-BASED CARE
OR PRESCHOOL

10%
FAMILY, FRIEND
& NEIGHBORS

Family, friend, and neighbor care makes up a small but important segment of childcare choices. Children tend to start this care earlier than those cared for in center-based care. The average age when children begin family, friend, and neighbor care is 7.5 months compared to 22 months for center-based care.

TYPES OF CHILDCARE

FAMILY, FRIEND & NEIGHBOR CARE



Q: Will your relative/non-relative provide care for your child when he/she is sick without a fever?
Sick with a fever?

FAMILY, FRIEND & NEIGHBOR CAREGIVERS PROVIDE CARE TO SICK CHILDREN WITHOUT A FEVER. TWO THIRDS WILL CARE FOR SICK CHILDREN WITH A FEVER.

Family, friend, and neighbors are more likely to still care for sick children than center-based care. All friends and family caregivers (100%) will care for a sick child without a fever (versus center-based care 48%) and 65% will care for a child with a fever (versus center-based care 10%). Among relatives specifically, more than 80% will care for a sick child even with a fever.

65% CARE FOR SICK CHILDREN WITH A FEVER

100% CARE FOR SICK CHILDREN WITHOUT A FEVER



TYPES OF CHILDCARE

FAMILY, FRIEND & NEIGHBOR CARE

Q: Is there any charge or fee for the care your child receives from your relative/non-relative, paid either by you or some other person or agency?

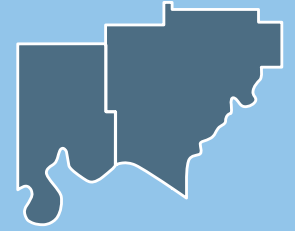
VERY FEW FAMILIES ARE CHARGED A FEE FOR FAMILY, FRIEND & NEIGHBOR CARE

A very small percentage of families (10%) are charged any fee for family, friend, and neighbor childcare making this an affordable childcare choice for many.



TYPES OF CHILDCARE

FAMILY, FRIEND & NEIGHBOR CARE

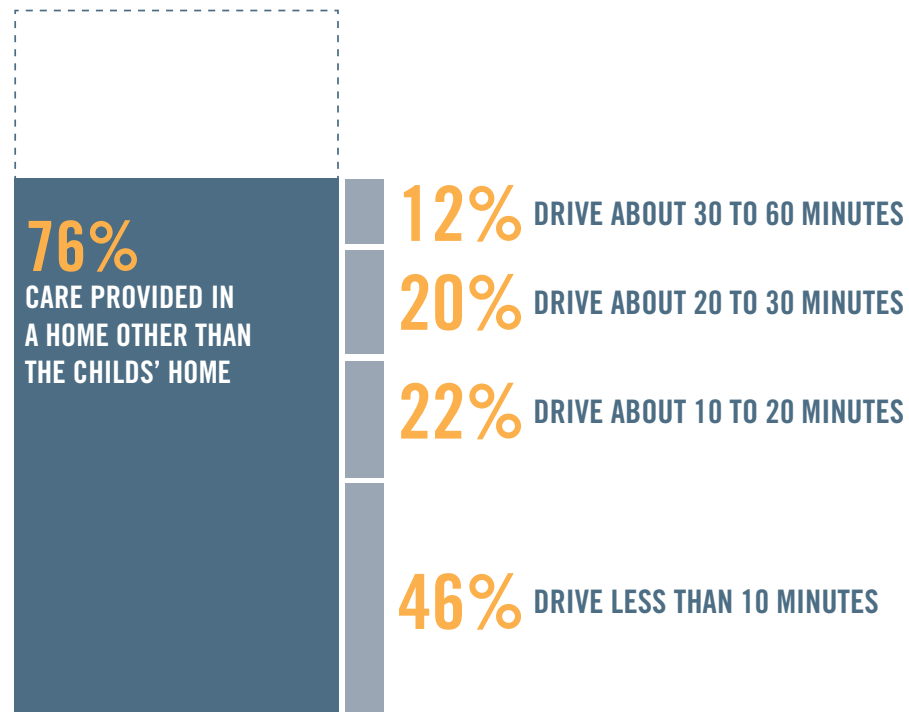


Q: Is this care provided in your home or another home?

Q: In minutes, how long is the drive between your home and your relative/non-relative's home?

MOST FAMILY, FRIEND & NEIGHBOR CARE IS PROVIDED IN A HOME OTHER THAN THE CHILD'S HOME.

TYPICALLY, THE DRIVE IS LESS THAN 20 MINUTES.





TYPES OF CHILDCARE

FAMILY, FRIEND & NEIGHBOR CARE

MOST COMMON TYPE OF FAMILY, FRIEND NEIGHBOR CARE

RELATIVES

Q: How is the relative related to your child?

Q: In years, how old is the relative who provides the most care for your child?

NEARLY THREE FOURTHS OF ALL RELATIVE CARE IS PROVIDED BY GRANDPARENTS. THE MAJORITY OF RELATIVE CAREGIVERS ARE AT LEAST 50 YEARS OLD.

The most common family, friend, and neighbor care is provided by a relative. Of all relatives, grandparents (73%) are by far the most common relatives to provide childcare. Other relatives (27%) include siblings and aunts and uncles. Not surprisingly, two-thirds of relatives providing care (64%) are over the age of 50 and one-third (36%) are younger, between 20 and 49 years old.

RELATIONSHIP
TO CHILD

27%

NON-GRANDPARENT

73%

GRANDPARENT

AGE

36%

AGE 20-49

23%

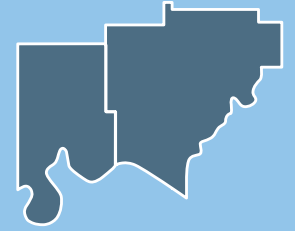
AGE 50-59

41%

AGE 60+

TYPES OF CHILDCARE

FAMILY, FRIEND & NEIGHBOR CARE

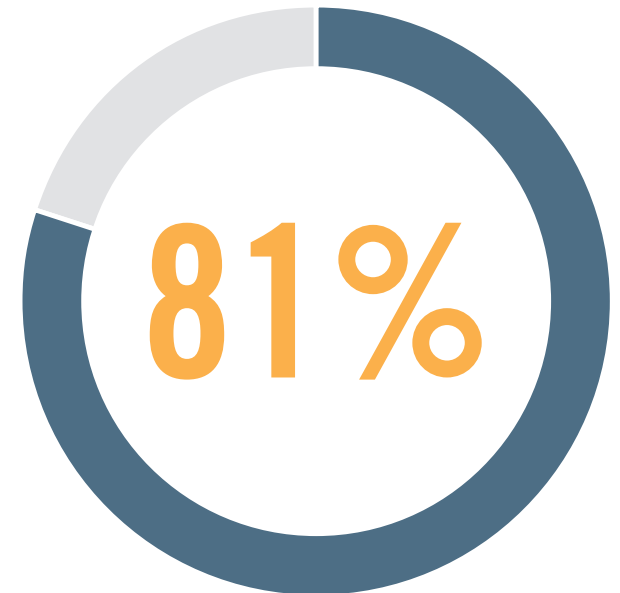


MOST COMMON TYPE OF FAMILY, FRIEND NEIGHBOR CARE **RELATIVES**

Q: In an average month, how many days would you say that your child's relative needs to cancel a scheduled care arrangement for whatever reason?

MOST RELATIVE CAREGIVERS (80%) NEVER CANCEL SCHEDULED CARE. AT MOST, RELATIVES CANCEL 1-2 DAYS PER MONTH.

These relatives tend to be a reliable source of childcare and rarely cancel on parents, if ever.





TYPES OF CHILDCARE

FAMILY, FRIEND & NEIGHBOR CARE

MOST COMMON TYPE OF FAMILY, FRIEND NEIGHBOR CARE

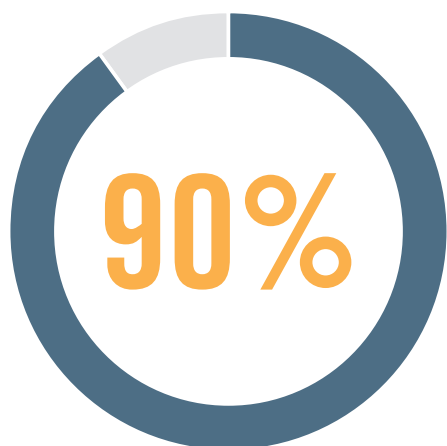
RELATIVES

Q: How well does your relative/non-relative care arrangement cover the hours needed for care?

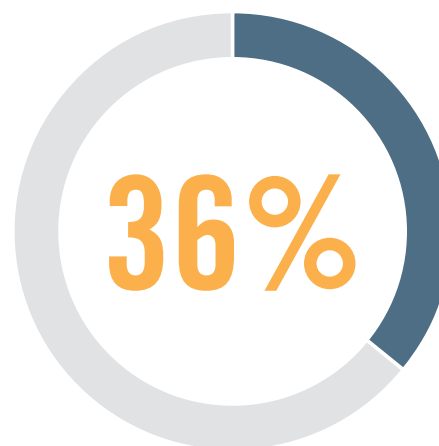
Q: About how many hours each week does your child receive care from this relative/non-relative?

NEARLY ALL FAMILIES WHO USE FAMILY, FRIEND & NEIGHBOR CARE FEEL THAT THE AVAILABILITY OF CARE COVERS THE HOURS NEEDED.

Most parents and primary caregivers who use family, friend and neighbor care feel the childcare provided covers the hours they need care. Children are spending many hours in this care each week. Slightly more than one-third of families use care at least 30 hours per week.



FEEL THAT FAMILY, FRIEND
& NEIGHBOR CARE COVERS
HOURS NEEDED



USE FAMILY, FRIEND &
NEIGHBOR CARE AT LEAST 30
HOURS PER WEEK

CHILDCARE CHOICES

Families understandably have questions about finding the right fit for their young children who need care outside of the home. Care arrangements vary considerably by setting, provider, cost, content and quality, presenting challenges for many families seeking the right fit.

Local childcare experts see families with unique needs as well. For example, care to cover second and third shift hours, hours needed due to multiple jobs, and care for infants are some of the needs identified by local experts like 4C of Southern Indiana, Community Coordinated Child Care resource and referral agency.

There is growing interest in how parents make decisions about their children's care. Communities want to understand what parents care about and what they are looking for in childcare to meet needs and promote quality.

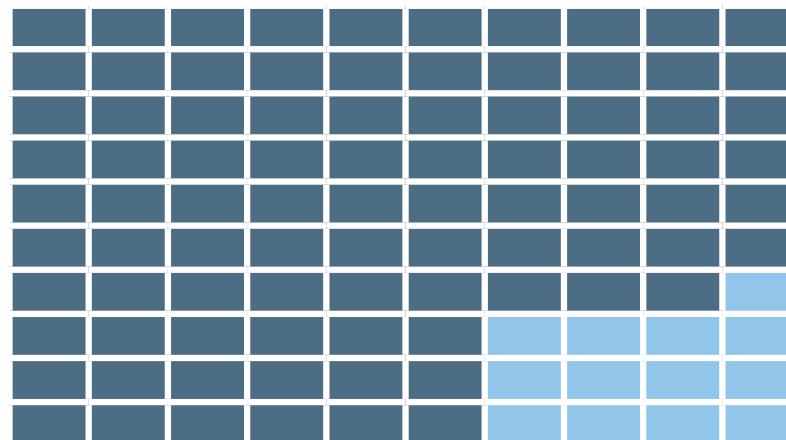


CHILDCARE CHOICES

Q: Did you seek this childcare [outside of the home] because of your work obligations?

NEARLY ALL FAMILIES UTILIZE CENTER-BASED OR FAMILY, FRIEND & NEIGHBOR CARE DUE TO PARENT/GUARDIAN SCHOOL OR WORK OBLIGATIONS.

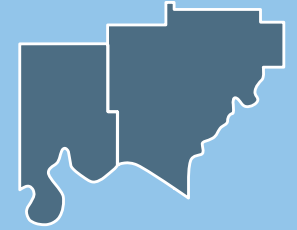
Most local families need care outside of the home for their young children because of their work or school commitments. Other reasons include preparing the child for school and running errands.



87%
SCHOOL OR WORK OBLIGATIONS

13%
OTHER

CHILDCARE CHOICES

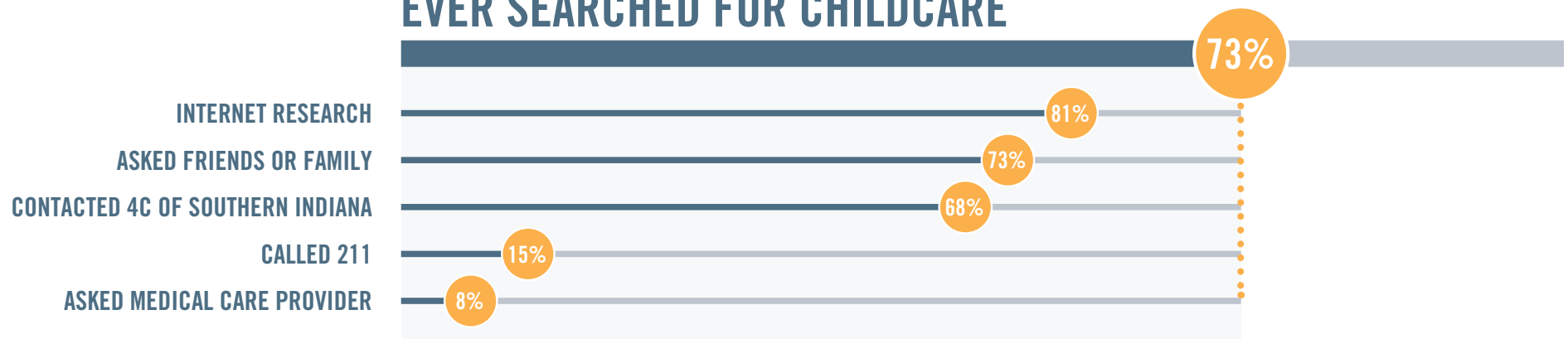


Q: Have you ever searched for care for your child?

NEARLY THREE OUT OF FOUR FAMILIES SEARCH FOR CHILDCARE AT SOME POINT.

Three-quarters of families (73%) have searched for childcare at some point. Most turn to the internet (81%), friends and family (73%) or to our local childcare resource and referral agency, 4C of Southern Indiana (68%) for information.

EVER SEARCHED FOR CHILDCARE



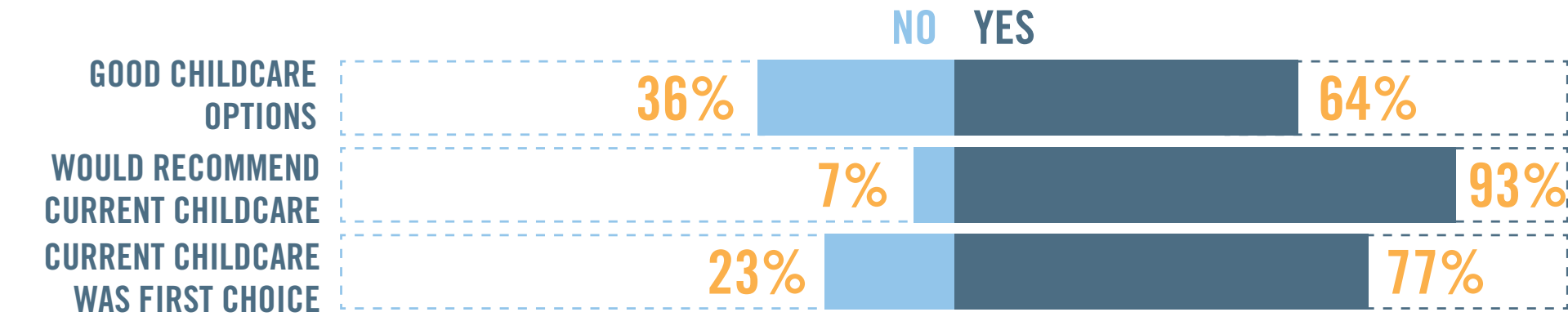


CHILDCARE CHOICES

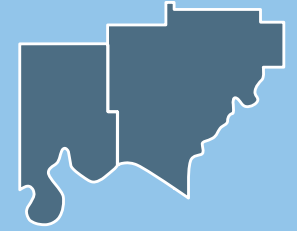
- Q:** Do you feel there are good options for childcare of early childhood programs where you live?
- Q:** Would you recommend the care arrangement or program you chose for your child to other parents?
- Q:** Is your child's current care arrangement your first choice?

MOST FAMILIES BELIEVE THERE ARE GOOD OPTIONS FOR EARLY CHILDHOOD PROGRAMS IN THE AREA.

Nearly all parents would recommend their child's current care arrangement to others, but 1 in 4 families report that their current childcare arrangement is not their first choice. For the quarter of families where the care arrangement was not their first choice, preferences included friend or family member's home (38%), center-based program or preschool (25%) or at home with a parent or primary caregiver (24%)



CHILDCARE CHOICES



Q: What was the main reason your household chose the current care arrangement where your child spends the most time?

FAMILIES IDENTIFY SEVERAL REASONS FOR CHOOSING CHILDCARE ARRANGEMENTS.

Families consider a variety of criteria when choosing childcare. Quality, cost, environment and work or school obligations are the top reasons families cited for choosing their child's current care arrangements.

MOST COMMON REASONS

QUALITY

"Level 4 childcare center"

COST

"Most affordable"

ENVIRONMENT

"Least stressful environment"

WORK OR SCHOOL

"Both parents work"

LESS COMMON REASONS

LOCATION

"Very close to home"

CONVENIENCE

"Good Hours"

RECOMMENDATIONS

"Referral from other parents"

LIMITED OPTIONS

"Not a lot of choices"

FAMILY HISTORY

"Other child goes to the program"

LEARNING ENVIRONMENTS

Besides the home environment, the childcare environment is one of the child's first 'classrooms' with opportunities to learn and develop skills. Experiences in the formative, early years help build the foundation for school and life success. Learning environments are nurturing spaces that support the development of young children to include indoor and outdoor experiences, both solo play and social experiences, free play and structured activities in age-appropriate exploration. Learning environments tend to change over time with the needs, growth and development of the child.

Families and care providers alike can provide learning environments for children to help prepare them for their developmental journey. Considerations for learning environments include the level and type of communication between parents and providers/teachers, the importance of reading with children, cautions about screen time and the importance of community programs/services as supports.



PREPARING FOR NEXT STEPS

Q: When your child is eligible to start kindergarten, where will he/she attend school?

THE MAJORITY OF LOCAL FAMILIES PLAN FOR THEIR CHILDREN TO ATTEND PUBLIC SCHOOL.

Most local families are preparing to send their children to public school when the time comes. Private school is the next most likely destination, with a minority of families planning to homeschool or still deciding.

78%
PUBLIC SCHOOL

13%
PRIVATE SCHOOL

5%
HOME SCHOOL

4%
UNDECIDED

FACTORS SUPPORTING EDUCATION SUCCESS

Communication with Care Providers

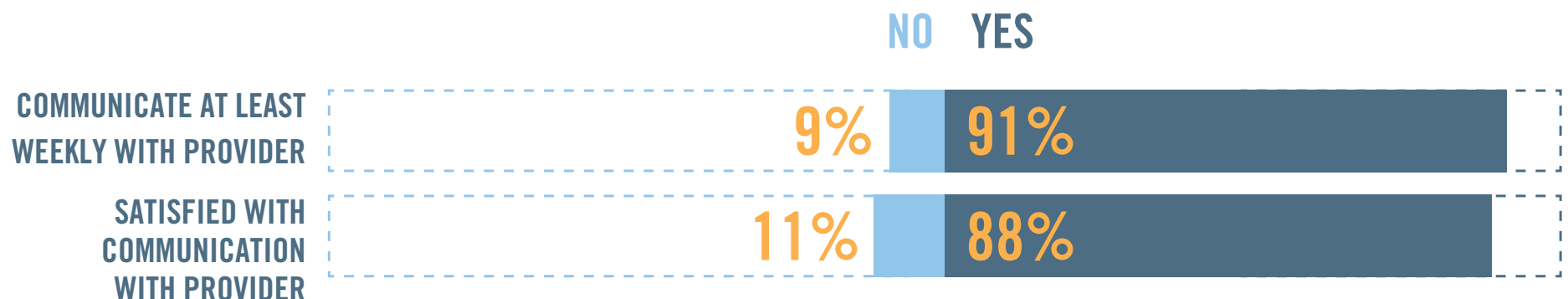
Q: How often do you have a discussion about your child with his/her care provider?

Q: Would you like to communicate more often with your child's care provider?

Q: Are there any barriers to communicating with your child's care provider?

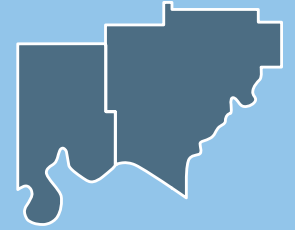
NO MATTER THE CHILDCARE TYPE, NEARLY ALL FAMILIES COMMUNICATE AT LEAST WEEKLY WITH THEIR CHILD'S PROVIDER(S).

Communication between parents and providers or teachers is a success factor for children throughout their education journey. Most families (91%) say that they have discussions with a care provider about their child weekly or daily and are satisfied with this frequency of communication. Though most families (90%) indicate few if any barriers to communication with their child's care provider, some (9%) raise concerns such as language barriers, providers not sharing information about progress, busyness and rushing as barriers to good communication.



FACTORS SUPPORTING EDUCATION SUCCESS

Communication with
Care Providers



Q: How many times have you or someone in your family read with your child in the past week?

Q: About how many minutes on each of those times did you or someone in your family read with your child?

FAMILIES REPORT READING WITH THEIR YOUNG CHILDREN ABOUT AS OFTEN AS EXPERTS RECOMMEND.

Reading promotes a child's ability to process and remember information, problem solve, learn, reason, develop language and make decisions. Reading is a critical skill for future academic success and is also an important socialization and bonding experience for children, parents and caregivers.

Experts recommend children be exposed to books from birth. In the very early years, children may only be interested in a story that lasts 5 or 6 minutes, but with regular exposure, a child's interest in books is sure to grow as they do. By the time children are kindergarten age, parents should be reading with children 20 minutes a day every day. On average, local families are closely meeting these recommendations.

Zero to Three Babycenter.com



ON AVERAGE, FAMILIES IN THE AREA READ TO YOUNG CHILDREN 7 TIMES EACH WEEK FOR 17 MINUTES AT A TIME



FACTORS SUPPORTING EDUCATION SUCCESS

Limiting Screen Time

Q: On an average weekday, about how much time does your child usually spend on computers, cell phones, handheld video games, and/or other electronic devices?

THOUGH MOST FAMILIES FOLLOW RECOMMENDED SCREEN TIME GUIDELINES, THERE ARE STILL TOO MANY CHILDREN UNDER 5 YEARS OLD USING TECHNOLOGY.

Technology, when used effectively, can be a tool to support children's learning. During the 2020 COVID-19 crisis, technology also served as a way to stay connected to friends and family. But, when children spend too much time on technology such as phones, computers and video games, they are at greater risk for not getting enough sleep, having poor grades, and are at a greater risk of obesity. Too much screen time can also take away from high quality educational experiences and social interactions.

Across all ages birth to 5, well over two-thirds (71%) of all children 0-5 years old spend 1 hour or less per day on computers, cell phones, handheld video games and other electronic devices and just under a third (29%) spend 2 hours or more. The breakdown of screen time by age of child suggests an opportunity for at least some families in each category, especially those with children 0-17 months and 2-5 years old to decrease their child's time spent with technology.

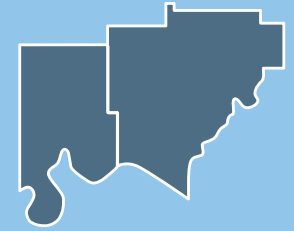
Media and Young Minds, Nov 2016 AAP Media and Children Communication Toolkit

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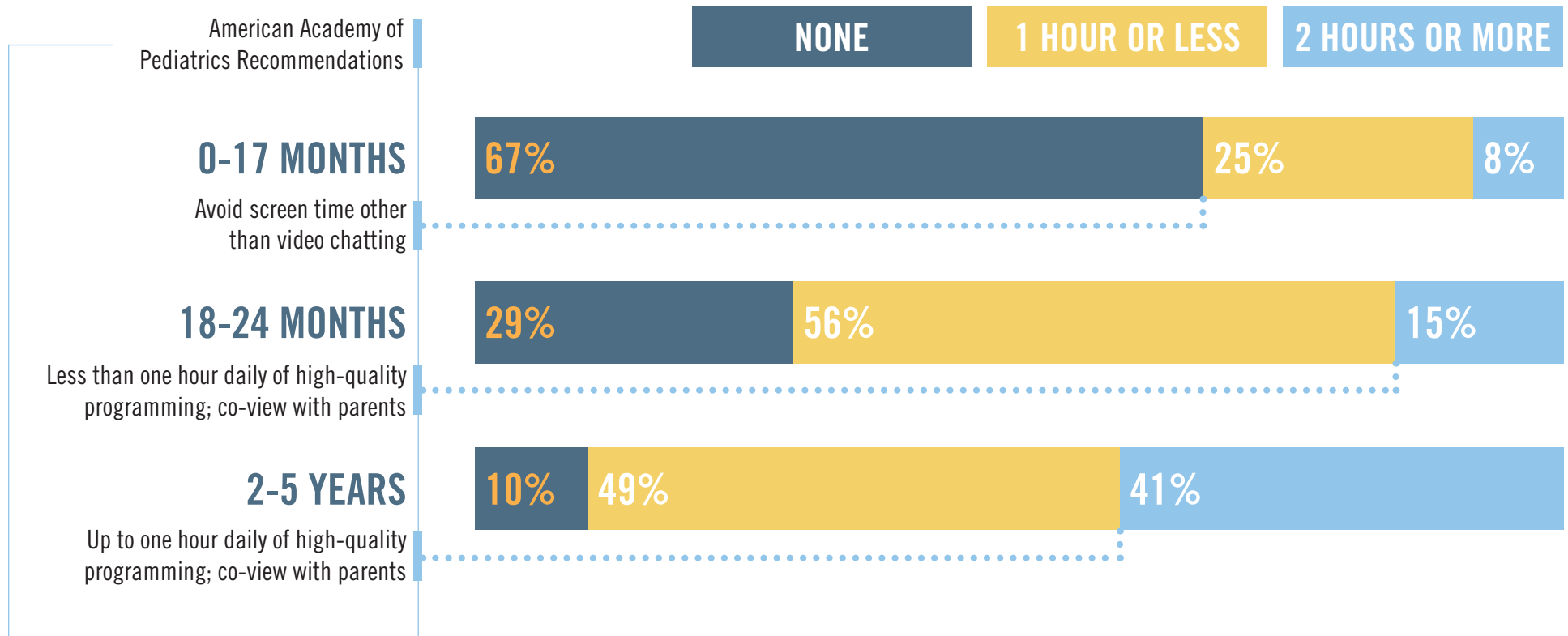
FACTORS SUPPORTING EDUCATION SUCCESS

Limiting Screen Time



PARENT REPORTED SCREEN TIME

TIME ON COMPUTERS, CELL PHONES, HANDHELD VIDEO GAMES, OR OTHER ELECTRONIC DEVICES



FACTORS SUPPORTING EDUCATION SUCCESS

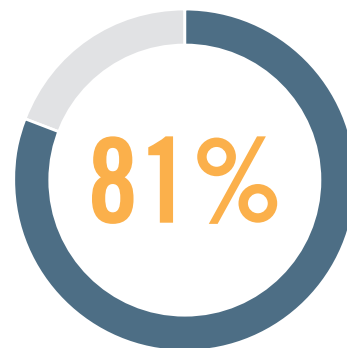
Limiting Screen Time

Q: On an average weekday, about how much of this screen time is for educational or learning activities?

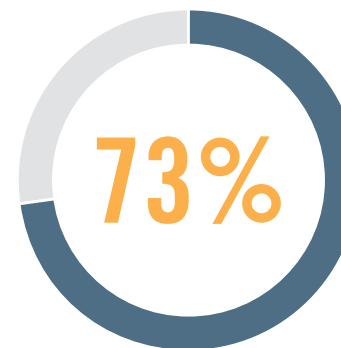
PARENTS REPORT MOST SCREEN TIME IS SPENT WITH EDUCATIONAL CONTENT.

Of those families with children spending any time with technology, about half, (49%) say that most or all of the tech time is for educational or learning activities. Almost a third, (31%) say that very little or none of the tech time is educational. Beyond the opportunity for families to decrease screen time in general, there is again an opportunity for families of children, especially those ages 2-5 to increase the quality of what their children are viewing. Co-viewing of content with a parent or caregiver is also recommended for young children birth to 5.

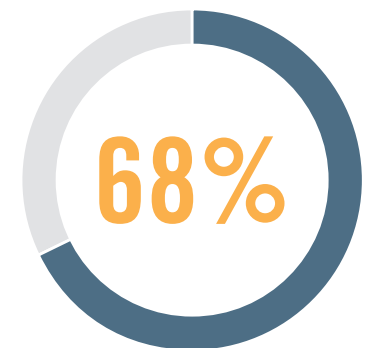
0-17 MONTHS



18-24 MONTHS



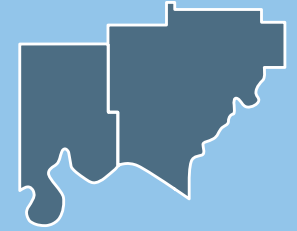
2-5 YEARS



AT LEAST HALF OF SCREEN TIME IS EDUCATIONAL

FACTORS SUPPORTING EDUCATION SUCCESS

Limiting Screen Time



Q: What services or support for your child not already offered would you like to see in your community?

MORE THAN A THIRD OF FAMILIES DESIRE MORE EARLY CHILDCARE SERVICES AND SUPPORTS.

Young children and families benefit when communities can offer a wide variety of needed services and supports. A little over a third of families surveyed (37%) provided ideas of specific services or supports they would like to see in their community that are not already offered. The 100 unique suggestions families provided fell into four main areas of need including: more community and educational activities for younger children, more childcare center options, more affordable options, and additional healthcare supports for young children.

MORE ACTIVITIES FOR YOUNGER CHILDREN	MORE CHILDCARE CENTER OPTIONS	MORE AFFORDABLE CHILDCARE OPTIONS	MORE HEALTHCARE SUPPORTS
Community arts and recreational activities	More childcare centers	Free/affordable programs	Childcare to address health needs
Educational based activities and programs	Non-traditional hours for childcare	More voucher availability	Improved healthcare options
	Shorter waiting lists		
	Higher quality options		

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METHODS & LIMITATIONS

The Welborn Baptist Foundation's 2020 Early Childcare & Early Learning Survey provides a good source of information on childcare options, factors influencing parent choice for childcare, and quality learning environments in the greater Evansville region. Survey questions were patterned after the Institute for Educational Sciences National Center for Educational Statistics, National Household Education Surveys and further developed by the Welborn Baptist Foundation in consultation with Diehl Consulting Group, Evansville, IN, Kent State University Survey Research Center, Kent, OH and professionals from the local early childcare landscape.

The survey was implemented by the Kent State University Survey Research Center. Telephone survey interviews were the primary method, but participants also had the option of completing an electronic survey. The average length of the telephone survey interview was just under 19 minutes. All adults age 18 and older with children ages 6 years and younger in Vanderburgh and Warrick Counties in Indiana were eligible to participate in the survey. The two survey counties were chosen because they account for a large percentage of households within the Welborn Baptist Foundation service area.

A random sample of available households with children 6 years and younger was used. Cell phones and pre-paid cell phones were added to help increase the possibility of reaching population sub-groups who may rely more on cell and pre-paid cell phones than land line phones. The overlapping phone user sampling plan included random digit dials of landlines and wireless phones (cellular and

pre-paid cellular). Extra steps were taken to assist with representation of population sub-groups in the area (e.g., bilingual interviewers). From a sample list of 18,676 phone records across two counties, of which 2,000 were "Addressed Based Samples" (ABS), 78,855 dials were made. A postcard was also sent to the 2,000 ABS records with language approved by the project stakeholders. A total of 217 adults completed the survey. A pretest was launched on April 29, 2019 and completed on May 1, 2019 consisting of 16 completed surveys. A brief report was generated, and the survey was then active until October 1, 2019, at which time project stakeholders agreed to conclude the data collection effort.

Survey data were weighted by county, housing tenure (rent/own), education, income, and racial/ethnic minority status to ensure that the sample more accurately reflected the characteristics of the population from which it was drawn. Population characteristics (i.e., control variables) were derived from the 2018 American Community Survey (ACS; 5-year estimates). The survey sample was weighted to the population controls through an iterative raking process. Survey weighting was performed by Diehl Consulting Group using methods aligned with the National Center for Education Statistics Early Childhood Program Participation Survey to the extent possible.

LIMITATIONS

A few limitations are important to note.

First, a representative sample for all racial/ethnic groups was not obtained through the survey. Therefore, racial ethnic groups were collapsed into either White/Caucasian Only (Non-Hispanic/Latino) and Non-White which includes all other racial/ethnic population groups and weighted accordingly.

Second, obtaining an adequate sample of participants meeting the study criteria proved challenging. The total number of children not yet in kindergarten included 217 respondent households across the two combined counties. This represented an approximate margin of error or +/-7% (based on American Community Survey, 2018 households with children 6 years old and less). Significant efforts were made to obtain the sample which included exhausting the call list, providing an electronic survey option, and including incentives. The survey window was also lengthened.

Third, while 217 participants responded to the survey, approximately 32% reported that the child spends over half of their time in a child-care center or a preschool program and 10% reported family, friend, and neighbor care. As such, sample sizes were smaller for these subgroups. To achieve a more comprehensive understanding of each childcare type, this study was supplemented by other data resources as available (See Sources).



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